



CONFIDENTIAL WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34574
 Name: Shell Gulf of Mexico Inc.
 Address 1: 150 N DAIRY-ASHFORD (77079)
 Address 2: PO BOX 576 (77001-0576)
 City: HOUSTON State: TX Zip: 77001 + 0576
 Contact Person: Damonica Pierson
 Phone: (832) 337-2172
 CONTRACTOR: License # 34718
 Name: Nabors Drilling USA, LP
 Wellsite Geologist: Jack Grow
 Purchaser: CONDUCTOR ONLY

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:
 Operator: _____
 Well Name: _____
 Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to ENHR Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

| | | |
|-----------------------------------|-------------------|---|
| <u>08/03/2012</u> | <u>08/03/2012</u> | <u>08/03/2012</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-095-22259-01-00
 Spot Description: _____
E2 NE NW NE Sec. 30 Twp. 30 S. R. 5 East West
330 Feet from North / South Line of Section
1325 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Kingman
 Lease Name: Rhoads 93 Family Trust 3005 Well #: 30-1H
 Field Name: _____
 Producing Formation: CONDUCTOR ONLY
 Elevation: Ground: 1376 Kelly Bushing: 1402
 Total Depth: 60 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 0 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: _____ Feet
 If Alternate II completion, cement circulated from: _____
 feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
 Chloride content: 0 ppm Fluid volume: 0 bbls
 Dewatering method used: Hauled to Disposal
 Location of fluid disposal if hauled offsite:
 Operator Name: Plumb Thicket Landfill
 Lease Name: N/A License #: 99999
 Quarter SW Sec. 4 Twp. 31 S. R. 6 East West
 County: Harper Permit #: KDHE Permit No. 0842

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

Letter of Confidentiality Received
 Date: 08/14/2012

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: Deanna Garrison Date: 08/21/2012