



CONFIDENTIAL WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5798
 Name: Weilert, Michael D. dba Michael D. Weilert Oil Company
 Address 1: 866 230TH AVE
 Address 2: _____
 City: HAYS State: KS Zip: 67601 + 9605
 Contact Person: CURTIS WEILERT
 Phone: (785) 625-6327
 CONTRACTOR: License # 34519
 Name: Double Drum Well Service LLC
 Wellsite Geologist: ROGER MOSES
 Purchaser: CRA

API No. 15 - 15-051-26242-00-00
 Spot Description: _____
NE SW SE NE Sec. 7 Twp. 14 S. R. 19 East West
3266 Feet from North / South Line of Section
735 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Ellis
 Lease Name: Veley-Riedel Well #: 2
 Field Name: _____
 Producing Formation: ARBUCKLE
 Elevation: Ground: 2228 Kelly Bushing: 2236
 Total Depth: 3865 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 203 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: 1506 Feet
 If Alternate II completion, cement circulated from: 1506
 feet depth to: 0 w/ 200 sx cm.

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>05/08/2012</u>	<u>05/14/2012</u>	<u>06/04/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
 Chloride content: 8000 ppm Fluid volume: 50 bbls
 Dewatering method used: Evaporated
 Location of fluid disposal if hauled offsite:
 Operator Name: _____
 Lease Name: _____ License #: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Permit #: _____

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: 08/27/2012

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: NAOMI JAMES Date: 08/29/2012