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SEP 20 2012

KCC WICHITA

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1  
June 2009  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

OPERATOR: License # 34475  
Name: TransCanada Keystone Pipeline, LP  
Address 1: 717 Texas St, Ste 24100  
Address 2:  
City: Houston State: TX Zip: 77002 +  
Contact Person: Chuck Bucy  
Phone: ( 860 ) 939-3239  
CONTRACTOR: License # KS791  
Name: Giles Environmental Drilling  
Wellsite Geologist:  
Purchaser:

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  WSW  SWD  SIOW  
 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: N/A  
Well Name: N/A

Original Comp. Date: N/A Original Total Depth: N/A  
 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 #:

6-7-12 6-7-12 6-7-12  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 041-20136-00-00  
Spot Description: 39.067009, -97.050986  
NE NE NW SW Sec. 25 Twp. 11 S. R. 3  East  West  
2,469 Feet from  North /  South Line of Section  
1,203 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: DICKINSON  
Lease Name: MP 67.80 Well #: 1  
Field Name: N/A  
Producing Formation: N/A  
Elevation: Ground: 1260 Kelly Bushing: N/A  
Total Depth: 350' Plug Back Total Depth: N/A  
Amount of Surface Pipe Set and Cemented at: 250 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: 58.9 ppm Fluid volume: 150 bbls  
Dewatering method used: Plate/Frame Filter Press  
Location of fluid disposal if hauled offsite:  
Operator Name: Reddi Industries, Inc  
Lease Name: N/A License #: N/A  
Quarter NE Sec. 35 Twp. 27 S. R. 1  East  West  
County: Sedgwick Permit #: Solid Waste KDHE No 856

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Rusty Green  
Title: Project Coordinator Date: 9/19/2012

KCC Office Use ONLY

Letter of Confidentiality Received  
Date:  
 Confidential Release Date:  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: Dlg Date: 9/20/12

Operator Name: TransCanada Keystone Pipeline, LP Lease Name: MP 67.80 Well #: 1  
 Sec. 25 Twp. 11 S. R. 3  East  West County: DICKINSON

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum  <div style="text-align: center; font-weight: bold; font-size: 1.2em;">                     RECEIVED                      SEP 20 2012                      KCC WICHITA                 </div>
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface Casing	17"	10"	N/A	250'	Portland	6.5 yds	N/A

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:      Size:      Set At:      Packer At:      Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____
Estimated Production Per 24 Hours	Oil    Bbls.      Gas    Mcf      Water    Bbls.      Gas-Oil Ratio      Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Midwest Products, LLC  
 203 W North  
 Manover, Kansas 66945

**Invoice**

Date	Invoice #
7/25/2012	14188

785-337-2252      www.midwestproductsllc.com

**RECEIVED**  
 JUL 31 2012  
 BY: \_\_\_\_\_

Bill To
MESA PRODUCTS PO BOX 52608 TULSA, OK 74152 ATTN: ROBERT HOGAN

P.O. No.	Terms	Project
	Due by 10th	

Quantity	Description	Rate	Amount
7.5	22 sack ready mix 6/22/12 MP 67 10-11-0873	290.00	2,175.00
30	Hauling	4.00	120.00
6	22 sack ready mix 7/18/12 MP 37 10-11-0873	290.00	1,740.00
	Hauling	120.00	120.00
	Sales Tax	7.30%	303.32

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TRANS CANADA  
 10-11-0873

**APPROVED**  
 [Signature]

Thank you! Please include invoice number on check. A 1.5% finance fee is added to past due accounts.

**Total**      \$4,458.32

Cash, Check, Visa or Master Card.  
 Please contact us if you would like your monthly invoices emailed or faxed.  
 Thank you.