

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASEOPERATOR: License # 30742Name: Palomino Petroleum, Inc.Address 1: 4924 SE 84TH ST

Address 2: \_\_\_\_\_

City: NEWTON State: KS Zip: 67114 + 8827Contact Person: Klee R. WatchousPhone: ( 316 ) 799-1000CONTRACTOR: License # 5822Name: Val Energy, Inc.Wellsite Geologist: Nicholas P. Gerstner and Ryan SeibPurchaser: None

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: \_\_\_\_\_

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>06/29/2012</u>	<u>07/09/2012</u>	<u>07/10/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-101-22389-00-00

Spot Description: \_\_\_\_\_

NE NW SE SE Sec. 4 Twp. 16 S. R. 28  East  West1318 Feet from  North /  South Line of Section896 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

 NE     NW     SE     SWCounty: LaneLease Name: Shanline Trusts Well #: 1Field Name: ShanlineProducing Formation: NoneElevation: Ground: 2584 Kelly Bushing: 2595Total Depth: 4450 Plug Back Total Depth: \_\_\_\_\_Amount of Surface Pipe Set and Cemented at: 221 FeetMultiple 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 bblsDewatering 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: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution

ALT  I  II  III Approved by: NAOMI JAMES Date: 10/03/2012



Operator Name: Palomino Petroleum, Inc. Lease Name: Shanline Trusts Well #: 1  
 Sec. 4 Twp. 16 S. R. 28  East  West County: Lane

**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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:  Radiation Guard Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum Attached Attached Attached
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CASING RECORD <input checked="" 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	12.25	8.625	23	221	Class A	165	2%gel 3%cc

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ 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:  
 Flowing     Pumping     Gas Lift     Other (Explain) \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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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Form	ACO1 - Well Completion
Operator	Palomino Petroleum, Inc.
Well Name	Shanline Trusts 1
Doc ID	1095793

Tops

Anhy.	1995	+ 600
Base Anhy.	2030	+ 565
Heebner	3745	-1150
Lansing	3781	-1186
BKC	4107	-1512
Marmaton	4137	-1542
Pawnee	4202	-1607
Ft. Scott	4284	-1689
Cherokee Sh.	4311	-1716
Miss.	4385	-1790
LTD	4449	-1854

### Summary of Changes

Lease Name and Number: Shanline Trusts 1

API/Permit #: 15-101-22389-00-00

Doc ID: 1095793

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	10/01/2012	10/03/2012
Producing Formation	LKC, Marmaton, Mississippian	None
Purchaser's Name		None
Save Link	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1093878">.../kcc/detail/operatorEditDetail.cfm?docID=1093878</a>	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1095793">.../kcc/detail/operatorEditDetail.cfm?docID=1095793</a>