

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30742
 Name: Palomino Petroleum, Inc.
 Address 1: 4924 SE 84TH ST
 Address 2: _____
 City: NEWTON State: KS Zip: 67114 + 8827
 Contact Person: Klee R. Watchous
 Phone: (316) 799-1000
 CONTRACTOR: License # 33575
 Name: WW Drilling, LLC
 Wellsite Geologist: Nicholas P. Gerstner
 Purchaser: None

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 #: _____
 06/18/2012 06/25/2012 06/25/2012
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 15-135-25411-00-00
 Spot Description: _____
 NW SE SW NE Sec. 16 Twp. 16 S. R. 26 East West
1994 Feet from North / South Line of Section
1944 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Ness
 Lease Name: KRASH Well #: 1
 Field Name: Wildcat
 Producing Formation: None
 Elevation: Ground: 2629 Kelly Bushing: 2626
 Total Depth: 4630 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 214 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 cmr.

Drilling Fluid Management Plan

(Date must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 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: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
 ALT I II III Approved by: NACOR JAMES Date: 10/03/2012



Operator Name: Palomino Petroleum, Inc. Lease Name: KRASH Well #: 1
 Sec. 16 Twp. 16 S. R. 26 East West County: Ness

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
 (If no, Submit Copy)

List All E. Logs Run:

Radiation Guard Log

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Attached Attached Attached

CASING RECORD New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Dn'd	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	214	Common	165	2%gel 3%cc

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 (Amount and Kind of Material Used)	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:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	_____ _____ _____

Form	ACO1 - Well Completion
Operator	Palomino Petroleum, Inc.
Well Name	KRASH 1
Doc ID	1095788

Tops

Anhy	2056	+ 570
Base Anhy.	2090	+ 536
Heebner	3904	-1278
LKC	3948	-1322
BKC	4244	-1618
Marmaton	4276	-1650
Ft. Scott	4448	-1822
Cherokee Sh.	4473	-1847
Miss.	4558	-1922
LTD	4632	-2006

Summary of Changes

Lease Name and Number: KRASH 1

API/Permit #: 15-135-25411-00-00

Doc ID: 1095788

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	09/27/2012	10/03/2012
Field Name		Wildcat
Producing Formation	Mississippian	None
Purchaser's Name		None
Save Link	../kcc/detail/operatorEditDetail.cfm?docID=1093863	../kcc/detail/operatorEditDetail.cfm?docID=1095788