

CONFIDENTIAL

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1097870

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

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33168			API No. 15 - 15-007-23901-00-00
Name: Woolsey Operatin	g Company, L		Spot Description:
Address 1: 125 N MARKET STE 1000			W2_E2_SE_NE_Sec35 Twp33 S. R. 11 East ✔ Wes
Address 2:			1980 Feet from North / South Line of Section
City: WICHITA	State: KS	Zip: 67202 ₊ 1729	515 Feet from ✓ East / West Line of Section
Contact Person: DEAN PATT			Footages Calculated from Nearest Outside Section Corner:
Phone: (316) 267-4379		THE RESERVE TO STREET THE PARTY OF THE PARTY	✓ NE □NW □SE □SW
CONTRACTOR: License # 33902			County: Barber
Name: Hardt Drilling LLC			Lease Name: GLENN WEIR Well #: 2
Wellsite Geologist: SCOTT ALBERG			Field Name: ROUNDUP SOUTH
Purchaser: PLAINS MARKETING / ATLAS PIPELINE			Producing Formation, MISSISSIPPIAN
Designate Type of Completion:			Elevation: Ground: 1453 Kelly Bushing: 1463
✓ New Well R	e-Entry	Workover	Total Depth: 5179 Plug Back Total Depth: 5063
☐ Oil ☐ WSW Solution ☐ WSW D&A	SWD ENHR SSW	SIOW	Amount of Surface Pipe Set and Cemented at: 216 Fee Multiple Stage Cementing Collar Used? ☐ Yes ✔ No
CM (Coal Bed Methane)	GOVV	Temp. Abd.	If yes, show depth set;Fee
Cathodic Other (Co.	re. Expl., etc.):		If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well in			feet depth to: w/ sx cm
Operator:			
Well Name:			Drilling Fluid Management Plan
Original Comp. Date:			(Data must be collected from the Reserve Pit)
		o ENHR Conv. to SWD	Chloride content: 32000 ppm Fluid volume: 1800 bbls
r	Conv.		Dewatering method used: Hauled to Disposal
Plug Back:			Location of fluid disposal if hauled offsite:
Commingled			Operator Name: CHIEFTAIN OIL
Dual Completion			Lease Name: GARNER ZAPPIA License # 33235
SWD BNHR			
GSW			Quarter NW Sec. 11 Twp. 33 S. R. 10 East West County: BARBER Permit # D28060
06/22/2012 07/02/2		00/05/0040	County: BARBER Permit #: D28060
		09/05/2012	
Recompletion Date	ached TD	Completion Date or Recompletion Date	

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
√ L	etter of Confidentiality Received ate: 10/19/2012
c	onfidential Release Date:
√ w	/ireline Log Received
√ G	eologist Report Received
	IC Distribution ✓ I II III Approved by: NAOMI JAMES Date: 10/23/2012