

CONFIDENTIAL

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1097800

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 # 30535

Name: Hartman Oil Co., Inc.

Address 1: 10500 E BERKELEY SQ PKWY STE 100

Address 2:

City: WICHITA State: KS Zip: 67206 +

Contact Person: Stan Mitchell

Phone: (620) 272-1025

CONTRACTOR: License # 33793

Name: H2 Drilling LLC

Wellsite Geologist: Kitt Noah

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:

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 #:

9/26/2012 10/08/2012 10/16/2012

Spud Date or
Recompletion Date Date Reached TD Completion Date or
Recompletion Date

API No. 15 - 15-203-20184-00-00

Spot Description:

NW NE SE NW Sec. 1 Twp. 16 S. R. 35 East West
1330 Feet from North / South Line of Section
2280 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☒ NW ☐ SE ☐ SW

County: Wichita

Lease Name: ROSE Well #: 1-1

Field Name:

Producing Formation: Ft Scott

Elevation: Ground: 3153 Kelly Bushing: 3154

Total Depth: 4806 Plug Back Total Depth: 4844

Amount of Surface Pipe Set and Cemented at: 330 Feet

Multiple Stage Cementing Collar Used? ☒ Yes ☐ No

If yes, show depth set: 2495 Feet

If Alternate II completion, cement circulated from: 2495

feet depth to: 0 w/ 550 sx cm.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 6100 ppm Fluid volume: 8000 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: 11/02/2012

☐ Confidential Release Date:☒ Wireline Log Received☐ Geologist Report Received☐ UIC DistributionALT ☐ I ☒ II ☐ III Approved by: NAOMI JAMES Date: 11/05/2012