

KANSAS CORPORATION COMMISSION CONFIDENTIAL OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM

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

## WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5316	}		API No. 15 - 15-069-20386-00-00
Name: Falcon Exploration	ı, Inc.		Spot Description:
Address 1: 125 N MARKET STE 1252			NW_NW_SE_SW Sec. 30 Twp. 28 S. R. 30 ☐ East  West
Address 2:			1040 Feet from North / South Line of Section
City: WICHITA	State: KS Zip:	67202 + 1719	
Contact Person: CYNDE WC			Footages Calculated from Nearest Outside Section Corner:
Phone: ( 316 ) 262-1378		olo althographic manner and an anti-	□NE □NW □SE ØSW
CONTRACTOR: License # 51			County: Gray
Name: Sterling Drilling Con	many	A STATE OF THE STA	Lease Name: JANTZ Well #: 1-30(SW)
Wellsite Geologist: KEITH REA	AVIS		Field Name:
Purchaser:			Producing Formation: NA
Designate Type of Completion:			Elevation: Ground: 2823 Kelly Bushing: 2836
✓ New Well Re-Entry Workover			Total Depth: 5480 Plug Back Total Depth:
☐ Oil ☐ WSW	☐ swb	SIOW	Amount of Surface Pipe Set and Cemented at: 1900 Feet
Gas ✓ D&A	☐ ENHR	SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
og	☐ GSW	Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)			If Alternate II completion, cement circulated from:
Cathodic Other (C	ore. Expl., etc.):	and the second s	feet depth to:w/sx cmt
If Workover/Re-entry: Old Well	Info as follows:		
Operator:	Control consistence of the second		Drilling Fluid Management Plan
Well Name:			(Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:			Chloride content: 3200 ppm Fluid volume: 125 bbls
Deepening Re-p	erf. Conv. to E	NHR Conv. to SWD	Dewatering method used: Hauled to Disposal
	Conv. to C		
Plug Back:	_		Location of fluid disposal if hauled offsite:
Commingled			Operator Name: SHAWN HAYDEN
Dual Completion		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Lease Name: LIZ SMITH License #: 33562
SWD			Quarter NE Sec. 26 Twp. 30 S. R. 34 East West
ENHR GSW			County: HASKELL Permit #: D26802
	0/2012	08/21/2012	
Spud Date or Date Reached TD Recompletion Date		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
<b>7</b> L	etter of Confidentiality Received ate:
□ c	onfidential Release Date:
<b>√</b> w	Vireline Log Received
<b> ✓</b> G	eologist Report Received
	IIC Distribution  ☑ I ☐ III Approved by: NAOMI JAMES Date: 11/26/2012