



KANSAS CORPORATION COMMISSION 1100302
OIL & GAS CONSERVATION DIVISION

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

CONFIDENTIAL WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34579
Name: Cobalt Energy LLC
Address 1: 115 S. BELMONT #12
Address 2: PO BOX 8037
City: WICHITA State: KS Zip: 67208 +
Contact Person: Nicholas D. Hess
Phone: (316) 201-4101
CONTRACTOR: License # 30606
Name: Murfin Drilling Co., Inc.
Wellsite Geologist: Robert Hendrix
Purchaser: NCRA

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 #: _____
10/19/2012 10/27/2012 11/9/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-135-25492-00-00
Spot Description: _____
NW NE NW SE Sec. 27 Twp. 18 S. R. 24 East West
2475 Feet from North / South Line of Section
1732 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ness
Lease Name: Miner Unit 'A' Well #: 1-27
Field Name: _____
Producing Formation: Mississippian
Elevation: Ground: 2284 Kelly Bushing: 2289
Total Depth: 4366 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 218 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1517 Feet
If Alternate II completion, cement circulated from: 4366
feet depth to: _____ w/ 195 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 32000 ppm Fluid volume: 800 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite:
Operator Name: American Warrior
Lease Name: Billings License #: 4058
Quarter NE Sec. 35 Twp. 22 S. R. 23 East West
County: Hodgeman Permit #: 15-083-21453

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: 11/21/2012
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: NAOMI JAMES Date: 11/26/2012