



CONFIDENTIAL

WELL COMPLETION FORM

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 3062
Name: Questa Energy Corporation
Address 1: PO BOX 50968
Address 2: _____
City: AMARILLO State: TX Zip: 79159 + 0968
Contact Person: Curtis Smith
Phone: (806) 358-8161
CONTRACTOR: License # 5822
Name: Val Energy, Inc.
Wellsite Geologist: Justin Carter

API No 15 - 15-193-20864-00-00

Spot Description: _____
NW SW SE NE Sec. 22 Twp. 9 S. R. 32 East West
2283 Feet from North / South Line of Section
1264 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Thomas
Lease Name: Bertrand Well #: 1-22

Field Name: _____

Producing Formation: Lansing

Elevation: Ground: 3070 Kelly Bushing: 3078

Total Depth: 4725 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 344 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 2651 Feet

If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ sx cmt.

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 #: _____

10/20/2012 10/27/2012 12/12/2012

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

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 2100 ppm Fluid volume: 5000 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: 12/18/2012

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: NAOMI JAMES Date: 12/18/2012