

CONFIDENTIAL

Kansas Corporation Commission Oil & Gas Conservation Division 1103967

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 # 3842			API No. 15 - 15-101-22397-00-00	
Name: Larson Engineering, Inc. dba Larson Operating Company			Spot Description;	
Address 1: 562 W STATE RD 4			SE SW SW SE Sec. 3 Twp. 19 S. R. 29 East West	
Address 2:			65 Feet from North / South Line of Section	
City: OLMITZ State: KS Zip: 67564 + 8561			2200 Feet from ✓ East / West Line of Section	
Contact Person: Thomas Larson			Footages Calculated from Nearest Outside Section Corner:	
			County: Lane	
CONTRACTOR: License # 33935 Name: H. D. Drilling, LLC			County: Smith Lease Name:	
TYGOTO.				
Wellsite Geologist: Vernon Schrag			Field Name:	
Purchaser:			Producing Formation: n/a Elevation: Ground: 2818 Kelly Bushing: 2825	
Designate Type of Completion:				
	Re-Entry		Total Depth: 4680 Plug Back Total Depth: 4680 Plug Back Total Depth Amount of Surface Pipe Set and Cemente	
✓ Oil WSW Gas D&A	[_] SWD [_] ENHR	∏ SIOW ∏ SIGW	Multiple Stage Cementing Collar Used?	
Gas D&A	GSW	Temp. Abd.	If yes, show depth set:	
CM (Coal Bed Methans	5. Commit	1	If Alternate II completion, cement circulate	
Cathodic Other (Core. Expl., etc.):			feet depth to:w/	
If Workover/Re-entry: Old W			1	
Operator:			Annual control of the	
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)	
Original Comp. Date: Original Total Depth:			Chloride content: 13000 ppm F	luid volume: 800 bbls
Deepening R	e-perf. Conv. to	ENHR Conv. to SWD	Dewalering method used: Evaporated	
Plug Back: Plug Back Total Depth		Location of fluid disposal if hauled offsite:		
Commingled Permit #:			Operator Name:	
Dual Completion Permit #:			Lease Name:	
SWD	Permit #:		QuarterSecTwp	
ENHR	Permit #:	The second secon	County: Permit	
GSW			CountyPermit	π,
	30/2012	8/30/2012		
Spud Date or Date Recompletion Date	te Reached 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
5	Letter of Confidentiality Received Date: 12/18/2012
-	Confidential Release Date:
ĺ	Wireline Log Received
(Geologist Report Received
	UIC Distribution ALT