1105750

KANSAS CORPORATION COMMISSION
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 # 34661
Name: Pfeifer Explorations, LLC
Address 1: 309 W. 40TH
Address 2:
City: HAYS State: KS Zip: 67601 +
Contact Person: Jacob Pfeifer
Phone: (785) 625-7258
CONTRACTOR: License # 34272
Name: Outlaw Well Service LLC
Wellsite Geologist: NA
Purchaser:

Designate Type of Completion:
- [ ] New Well
- [ ] Re-Entry
- [x] Workover

- [x] 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: Empire Energy
Well Name: Braun F
Original Comp. Date: 07/15/1976 Original Total Depth: 3695

- [ ] Deepening
- [x] Re-perf.
- [ ] Conv. to ENHR
- [ ] Conv. to SWD
- [ ] Conv. to GSW
- [x] Plug Back: 3664 Plug Back Total Depth
- [ ] Commingled Permit #:
- [ ] Dual Completion Permit #:
- [ ] SWD Permit #:
- [ ] ENHR Permit #:
- [ ] GSW Permit #:

12/05/2012		12/07/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-051-20488-00-01
Spot Description:
NW-NW-NE Sec. 22 Twp. 13 S. R. 18 [ ] East [x] West
4950 Feet from [ ] North / [x] South Line of Section
2310 Feet from [x] East / [ ] West Line of Section
Footages Calculated from Nearest Outside Section Corner:
[ ] NE [ ] NW [x] SE [ ] SW
County: Ellis
Lease Name: TOMCAT 9 Well #: 1
Field Name:
Producing Formation: Arbuckle
Elevation: Ground: 2110 Kelly Bushing: 2116
Total Depth: 3695 Plug Back Total Depth: 3664
Amount of Surface Pipe Set and Cemented at: 598 Feet
Multiple Stage Cementing Collar Used? [ ] Yes [x] No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from: 0
feet depth to: 1370 w/ 375 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: ppm Fluid volume: bbls
Dewatering method used:
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
- [x] Letter of Confidentiality Received
  Date: 12/23/2012
- [ ] Confidential Release Date:
- [ ] Wireline Log Received
- [ ] Geologist Report Received
- [ ] UIC Distribution

ALT [x] I [ ] II [ ] III Approved by: NAOMI JAMES Date: 12/28/2012