



CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34574
Name: Shell Gulf of Mexico Inc.
Address 1: 150 N DAIRY-ASHFORD (77079)
Address 2: PO BOX 576 (77001-0576)
City: HOUSTON State: TX Zip: 77001 + 0576
Contact Person: Damonica Pierson
Phone: (832) 337-2172
CONTRACTOR: License # 34718
Name: Nabors Drilling USA, LP
Wellsite Geologist: Bess Colberg
Purchaser: CONDUCTOR ONLY

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 #: _____

| | | |
|-----------------------------------|-----------------|---|
| 09/30/2012 | 10/01/2012 | 10/01/2012 |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-077-21871-00-00

Spot Description: _____

W2 SE SW SW Sec. 1 Twp. 35 S. R. 9 East West

330 Feet from North / South Line of Section

985 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Harper

Lease Name: Chain Land 3509 Well #: 1-1

Field Name: Wildcat

Producing Formation: CONDUCTOR ONLY

Elevation: Ground: 1252 Kelly Bushing: 1275

Total Depth: 6636 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 0 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite: _____

Operator Name: Plumb Thicket Landfill

Lease Name: N/A License #: 99999

Quarter SW Sec. 6 Twp. 31 S. R. 4 East West

County: Harper Permit #: KDHE Permit #0842

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: 12/10/2012

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: NAOMI JAMES Date: 12/13/2012