

CONFIDENTIAL "

Kansas Corporation Commission Oil & Gas Conservation Division 1104136

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 # 320	14		API No. 15 - 15-111-20453-00-00	
Name: Trimble & Maclas	kev Oil LLC		Spot Description:	
Address 1: 110 SOUTH ST			E2_NW_SW_NE Sec. 25 Twp. 21 S. R. 10 V East West	
Address 2: PO BOX 171			3630 Feet from North / ✓ South Line of Sect	
City: GRIDLEY State: KS Zip: 66852 +			2145 Feet from ▼ East / West Line of Sect	
Contact Person: Randall L. T			Footages Calculated from Nearest Outside Section Corner:	
Phone: (620) 836-2000			□ NE □ NW ✓ SE □ SW	
CONTRACTOR: License # 32			County: Lyon	
Gulick Drilling Co., Inc.			Lease Name: Well #: 9	
Wellsite Geologist: Thomas E. Blair			Field Name:	
Purchaser:			Producing Formation: Arbuckle	
			Elevation: Ground: 1266 Kelly Bushing: 1274	
Designate Type of Completion: ✓ New Well Re-Entry Workover			Total Depth: 2660 Plug Back Total Depth:	
			Amount of Surface Pipe Set and Cemented at:	
✓ Oil WSW	SWD	SIOW		ee
☐ Gas ☐ D&A	ENHR	SIGW	Multiple Stage Cementing Collar Used? Yes V No	
OG CM (Coal Bed Methane)	L GSW	Temp. Abd.	If yes, show depth set:F	eet
Cathodic Other (C	ore Evel atol:		If Alternate II completion, cement circulated from:	
If Workover/Re-entry: Old Well			feet depth to: sx c	cmt
,				,all 11 al
Operator:			Drilling Fluid Management Plan	
Well Name:			(Data must be collected from the Reserve Pit)	
Original Comp. Date:			Chloride content: 0 ppm Fluid volume: 0 t	oble
Deepening Re-p		o ENHR Conv. to SWD	Dewatering method used: Evaporated	
Plug Back:	Conv. t		Location of fluid disposal if hauled offsite:	
Plug Back: Plug Back Total Depth Commingled Permit #: Dual Completion Permit #:				
			Operator Name:	
SWD	· · · · · · · · · · · · · · · · · · ·		Lease Name: License #:	
ENHR			QuarterSecTwpS. REast W	/es
Gsw			County: Permit #:	
08/19/2012 08/2	3/2012	11/07/2012		
Spud Date or Date Reached TD Recompletion Date		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
√ Let	ter of Confidentiality Received e: 12/07/2012
41.11	nfidential Release Date:
UIC	ologist Report Received Distribution NAOMIJAMES Date: 12/13/2012