



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM

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

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32044 Name: Trimble & Maclaskey Oil LLC Address 1: 110 SOUTH ST Address 2: PO BOX 171 City: GRIDLEY State: KS Zip: 66852 Contact Person: Randall L. Trimble Phone: (620) 836-2000 CONTRACTOR: License # 32854 Name: Gulick Drilling Co., Inc. Wellsite Geologist: Thomas E. Blair Purchaser:

Designate Type of Completion: [X] New Well [ ] Re-Entry [ ] 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: 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 #: 08/28/2012 08/31/2012 11/07/2012 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15-111-20452-00-00 Spot Description: E2 SE NW NE Sec. 25 Twp. 21 S R. 10 [X] East [ ] West 4290 Feet from [ ] North [X] South Line of Section 1485 Feet from [X] East [ ] West Line of Section Footages Calculated from Nearest Outside Section Corner: [ ] NE [ ] NW [X] SE [ ] SW County: Lyon Lease Name: Rossillon Well #: 8 Field Name: Producing Formation: Arbuckle Elevation: Ground: 1265 Kelly Bushing: 1273 Total Depth: 2662 Plug Back Total Depth: Amount of Surface Pipe Set and Cemented at: 119 Feet Multiple Stage Cementing Collar Used? [ ] Yes [X] No If yes, show depth set: Feet If Alternate II completion, cement circulated from: feet depth to: w/ sx cm.

Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: 0 ppm Fluid volume: 0 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 [X] Letter of Confidentiality Received Date: 12/07/2012 [ ] Confidential Release Date: [X] Wireline Log Received [ ] Geologist Report Received [ ] UIC Distribution ALT [X] I [ ] II [ ] III Approved by: NAOMI JAMES Date: 12/13/2012