

## CONFIDENTIAL

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

## **WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE**

DPERATOR: License # 5822  Name: Val Energy, Inc.  Address 1: 200 W DOUGLAS AVE STE 520  Address 2: City: WICHITA State: KS Zip: 67202 + 3005			API No. 15 - 15-193-20865-00-00  Spot Description:  NW SW SE SE Sec. 7 Twp. 8 S. R. 35 East West  335 Feet from North / South Line of Section  1117 Feet from   East / West Line of Section						
					Contact Person: TODD ALLA	M		Footages Calculated from Nearest Outside Section Corner:	
					Phone: ( 316 ) 263-6688  CONTRACTOR: License # 5822			☐ NE ☐ NW ✔ SE ☐ SW  County: Thomas	
					Wellsite Geologist: STEVEN MURPHY			Field Name:	
Purchaser:			Producing Formation: PAWNEE						
Designate Type of Completion:			Elevation: Ground: 3347 Kelly Bushing: 3356						
✓ New Well Re-Entry Workover			Total Depth: 5100 Plug Back Total Depth: 5078						
	•	SIOW	Amount of Surface Pipe Set and Cemented at: 314 F						
(✔) Oil WSW	SWD ENHR	SIGW	Multiple Stage Cementing Collar Used?   ✓ Yes  No						
i og	GSW	Temp. Abd.	If yes, show depth set:	eet					
CM (Coal Bed Methane)			If Alternate II completion, cement circulated from: 2912						
Cathodic Other (Core. Expl., etc.):			feet depth to: 0 w/ 475 sx 0						
If Workover/Re-entry: Old Wel	Info as follows:		Tuest dopin to						
Operator:									
Well Name:			Drilling Fluid Management Plan (Date must be collected from the Reserve Pit)						
Original Comp. Date: Original Total Depth:			Chloride content: 22000 ppm Fluid volume: 890t	obls					
Deepening Re-perf. Conv. to ENHR Conv. to SWD			Dewatering method used: Evaporated						
	Conv. to	GSW	Dewatering memod used.						
Plug Back: Plug Back Total Depth			Location of fluid disposal if hauled offsite:						
Commingled Permit #:			Operator Name:						
Dual Completion Permit #:			Lease Name: License #:						
			QuarterSecTwpS. REast V						
ENHR	Permit #:								
GSW	Permit #:		County: Permit #:						
11/9/2012 11/3	20/2012	12/13/2012							
Spud Date or Date Reached TD Recompletion Date		Completion Date or Recompletion Date							

## **AFFIDAVIT**

Recompletion Date

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