

## CONFIDENTIAL COMPLETION FORM

1107666

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 # 32044	· · · · · · · · · · · · · · · · · · ·	API No. 15 - 15-111-20457-00-00			
Name: Trimble & Maclaskey Oil LLC  Address 1: 110 SOUTH ST  Address 2: PO BOX 171		Spot Description: NW_NE_NW_Sec25Twp21SR10			
				state: KS Zip: 66852 +	3630 Feet from   ▼ East /   West Line of Section
			Contact Person: Randail L. Tri		Footages Calculated from Nearest Outside Section Corner:
Phone: ( 620 ) 836-2000		□NE □NW ☑SE □SW			
CONTRACTOR: License # 328	54	County: Lyon			
Name: Gulick Drilling Co., Inc		Lease Name: Babinger Well #: 8			
	3lair	Field Name:			
•		Producing Formation: Viola			
Designate Type of Completion:		Elevation: Ground: 1272 Kelly Bushing: 1280			
✓ New Well Re	e-Entry [ Workover	Total Depth: 2651 Plug Back Total Depth:			
<b>⊘</b> oil	SWD SIOW	Amount of Surface Pipe Set and Cemented at: 119 Feet			
Gas D&A	☐ ENHR ☐ SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No			
OG	GSW Temp. Abd.	If yes, show depth set: Feet			
CM (Coal Bed Methane)		If Alternate II completion, cement circulated from:			
Cathodic Other (Co	re. Expl., etc.):	feet depth to: w/sx cmt.			
If Workover/Re-entry: Old Well I	nfo as follows:				
Operator:		Drilling Fluid Management Plan			
Well Name:		(Date must be collected from the Reserve Pit)			
Original Comp. Date:	Original Total Depth:	Chloride content: 0 ppm Fluid volume: 0 bbls			
Deepening Re-pe	rf. Conv. to ENHR Conv. to SWD	Dewatering method used: Evaporated			
	Conv. to GSW	Dewatering method used.			
Plug Back:	Plug Back Total Depth	Location of fluid disposal if hauled offsite:			
Commingled	Permit #:	Operator Name:			
Dual Completion	Permit #:	Lease Name: License #:			
SWD	Permit #:	QuarterSecTwpS. REast [West			
ENHR	Permit #:	County: Permit #:			
☐ GSW	Permit #:	County: Permit #.			
	/2012 11/13/2012				
Spud Date or Date R Recompletion Date	leached TD 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
Letter of Confidentiality Received  Date: 01/11/2013
Confidential Release Date:  ✓ Wireline Log Received
Geologist Report Received
UIC Distribution  ALT 1 1 Approved by: NAOMI JAMES Date: 01/14/2013