

CONFIDENTIAL COMPLETION FORM

1109580

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 # 5144			API No. 15 - 15-135-25495-00-00				
Name: Mull Drilling Company, Inc. Address 1: 1700 N WATERFRONT PKWY Address 2: BLDG 1200 City: WICHITA State: KS Zip: 67206 + Contact Person: Mark Shreve Phone: (316) 264-6366 CONTRACTOR: License # 33575			Spot Description: SE_NW_NW_NW Sec. 29 Twp. 16 S. R. 22 ☐ East West				
					335 Feet from North / South Line of Section 335 Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW SE SW County: Ness Lease Name: Richardson Well #: 1-29		
			Name: WW Drilling, LLC			Lease Name:	
			Wellsite Geologist: Kevin Kessler			Field Name: Battmen	
			Purchaser: Plains Marketing			Producing Formation: Cherokee Sand	
			Designate Type of Completion:			Elevation: Ground: 2411 Kelly Bushing: 2419	
✓ New Well Re-Entry Workover Total Depth:		Total Depth: 4540 Plug Back Total Depth: 4469					
7 oil	SWD	SIOW	Amount of Surface Pipe Set and Cemented at: 235 Feet				
Gas D&A	ENHR	sigw	Multiple Stage Cementing Collar Used?				
OG	☐ GSW	Temp. Abd.	If yes, show depth set: 1787 Feet				
CM (Coal Bed Methane)			If Alternate II completion, cement circulated from: 1787				
Cathodic Other (Core, Expl., etc.):			feet depth to: 0 w/ 145 sx cmt				
If Workover/Re-entry: Old Well	Info as follows:						
Operator:							
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)				
Original Comp. Date: Original Total Depth:			Chloride content: 32000 ppm Fluid volume: 800 bbls				
Deepening Re-perf. Conv. to ENHR Conv. to SWD			Evanorated				
	Conv. to	GSW	Dewatering method used:				
Plug Back: Plug Back Total Depth			Location of fluid disposal if hauled offsite:				
Commingled			Operator Name:				
Dual Completion	Permit #:		Lease Name: License #:				
SWD	Permit #:	The state of the s	Quarter Sec TwpS. `R East Wes				
ENHR	Permit #:		County: Permit #:				
GSW	Permit #:		County Permit #:				
	6/2012	11/09/2012					
Spud Date or Date I Recompletion Date	Reached 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 UNLY
Letter of Confidentiality Received Date: 01/24/2013
Confidential Release Date:
✓ Wireline Log Received
✓ Geologist Report Received
☐ UIC Distribution ALT ☐ I ☑ II ☐ III Approved by: NAOM JAMES Date: 01/28/2013