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JAN 29 2013
KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 # 34420
Name: Exodus Gas & Oil LLC
Address 1: 1001 McKinney St., Ste 804
Address 2: _____
City: Houston State: TX Zip: 77002
Contact Person: Brian Lingard
Phone: (281) 822-3939
CONTRACTOR: License # _____
Name: _____
Wellsite Geologist: _____
Purchaser: _____

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Designate Type of Completion:
 New Well Re-Entry Workover
 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: Dorado Gas Resources
Well Name: Offenbacher 3-36 SWD
Original Comp. Date: 5/5/2005 Original Total Depth: 1564
 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 #: _____
Spud Date or 9/23/12 Date Reached TD 9/23/12 Completion Date or 9/23/12
Recompletion Date Recompletion Date

API No. 15 - 001-29227-00-00 01
Spot Description: _____
NE NE NW Sec. 36 Twp. 26 S. R. 17 East West
4,875 Feet from North / South Line of Section
3,645 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Allen
Lease Name: Offenbacher Well #: 3-36-SWD
Field Name: Humboldt-Chanute
Producing Formation: _____
Elevation: Ground: 850 Kelly Bushing: 850
Total Depth: 1564 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1355
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Brian Lingard
Title: Manager Date: 1/23/13

KCC Office Use ONLY

Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: _____ Date: _____

Operator Name: Exodus Gas & Oil LLC Lease Name: Offenbacher Well #: 3-36-SWD
 Sec. 36 Twp. 26 S. R. 17 East West County: Allen

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No

(If no, Submit Copy)

List All E. Logs Run:

Gamma Ray

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Ft Scott	632	
Excello/Cherokee	658	
Bevier	739	
Cattelman	818	
Bartlesville	911	
Mississippian	1078	
Arbuckle	1353	

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CASING RECORD New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12.25"	8 5/8"	20#	40 ft	OWL	31	
Production	6.75"	4 1/2"	10.5#	1355 ft	OWL	220	2% gel

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

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LUBING RECORD: Size: 2 7/8 Set At: 8' sub Packer At: none Liner Run: Yes No
only have other tubing

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____
 Estimated Production Per 24 Hours: Oil Bbls. _____ Gas Mcf _____ Water Bbls. _____ Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: Vented Sold Used on Lease (If vented, Submit ACO-18.)
METHOD OF COMPLETION: Open Hole Perf. Dually Comp. (Submit ACO-5) Commingled (Submit ACO-4) Other (Specify) _____
PRODUCTION INTERVAL: _____