

RECEIVED
OCT 29 2012

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

2/28/13
CORRECTED

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

KCC WICHITA

CORRECTED

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

OPERATOR: License # 33922
Name: Mustang Energy Corporation
Address 1: P.O. Box 1121
Address 2: _____
City: Hays State: Ks. Zip: 67601 + _____
Contact Person: Rod Brin
Phone: (785-) 623-0533
CONTRACTOR: License # 31548
Name: Discovery Drilling Co., Inc.
Wellsite Geologist: Herb Deines
Purchaser: _____

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: _____
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 #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
<u>2/3/12</u>	<u>2/11/12</u>	<u>2/12/12</u>

API No. 15 - 063-21,958-00-00
Spot Description: _____
NW SE NE SE Sec. 11 Twp. 14 S. R. 29 East West
1,830 Feet from North / South Line of Section
420 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Gove
Lease Name: Coberly "C" Well #: 1
Field Name: Unknown
Producing Formation: Kansas City
Elevation: Ground: 2694 Kelly Bushing: 2702
Total Depth: 4500 Plug Back Total Depth: 4396
Amount of Surface Pipe Set and Cemented at: 220.37 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 2536 Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 18,000 ppm Fluid volume: 320 bbls
Dewatering method used: Evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

CONFIDENTIAL

FEB 28 2013

KCC

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: Rodney J. Brin
Title: Owner Date: 2-28-2012

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: 2/28/12 - 2/28/13
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: US Date: 11-8-12

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KCC-WICHITA

Operator Name: Mustang Energy Corporation Lease Name: Coberly "C" Well #: 1
 Sec. 11 Twp. 14 S. R. 29 East West County: Gove

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Micro, Sonic, Compensated Neutron Density, Dual Induction	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Anhydrite</td> <td>2149</td> <td>+553</td> </tr> <tr> <td>Base</td> <td>2183</td> <td>+519</td> </tr> <tr> <td>Heebner</td> <td>3773</td> <td>-1071</td> </tr> <tr> <td>LKC</td> <td>3810</td> <td>-1108</td> </tr> <tr> <td>Base LKC</td> <td>4116</td> <td>-1414</td> </tr> <tr> <td>Ft. Scott</td> <td>4307</td> <td>-1605</td> </tr> <tr> <td>Mississippi</td> <td>4405</td> <td>-1703</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Anhydrite	2149	+553	Base	2183	+519	Heebner	3773	-1071	LKC	3810	-1108	Base LKC	4116	-1414	Ft. Scott	4307	-1605	Mississippi	4405	-1703
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CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> 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 Pipe	12 1/4	8 5/8	23	220.37	Common	150	2%Gel&3%CC
Production	7-7/8	5 1/2	15.5	4491	EA2	155	
		Port Collar@2536					

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	2536 to surface	QMDC	200	3/4#Floseal

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
2	4438-39	250 Gal mud acid	
	Plug set at 4396'		
1 hole each	4062.5-4065.5-4067.5	1000 gal 15% MCA	
1 hole each	4048.5		

TUBING RECORD:	Size: 2-3/8	Set At: 4458	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	FEB 6 2013
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Date of First, Resumed Production, SWD or ENHR. 2-28-12	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				KCC
Estimated Production Per 24 Hours	Oil Bbls. 25	Gas Mcf	Water Bbls. 0	Gas-Oil Ratio	Gravity 37

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: 4438-39
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