



KANSAS CORPORATION COMMISSION 1106242

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34681

Name: EnCana Oil & Gas (USA) Inc.

Address 1: 5851 LEGACY CIRCLE

Address 2: _____

City: PLANO State: TX Zip: 75024 +

Contact Person: Sharon Cook

Phone: (469) 304-6345

CONTRACTOR: License # 33923

Name: Precision Drilling, LLC

Wellsite Geologist: Jeff Faber

Purchaser: None

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 #: _____

<u>09/05/2012</u>	<u>09/19/2012</u>	<u>12/29/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-135-25449-01-00

Spot Description: _____

SE SW SW SE Sec. 1 Twp. 20 S. R. 25 East West

249 Feet from North / South Line of Section

1989 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Ness

Lease Name: Kerr 1H Well #: 2

Field Name: Wildcat

Producing Formation: Mississippian

Elevation: Ground: 2356 Kelly Bushing: 2372

Total Depth: 8805 Plug Back Total Depth: 8805

Amount of Surface Pipe Set and Cemented at: 1586 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ 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: 4000 ppm Fluid volume: 230 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite: _____

Operator Name: American Warrior

Lease Name: O'Brate License #: 405

Quarter NW Sec. 36 Twp. 22 S. R. 23 East West

County: Hodgeman Permit #: unknown

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: 12/31/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 01/11/2013