

## OPICIAL

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE Form ACO-1 September 1999 Form Must Be Typed RECEIVED
DEC 2 7 2004
KCC WICHITA

Operator: License # 5150	API No. 15- 031-22, 024 <u>-00-00</u>
Name: COLT ENERGY, INC.	County:COFFEY
Address: P. O. BOX 388	NE_NWNE_SW_ Sec2 Twp23S. R16X_EW
City/State/Zip:IOLA, KS 66749	2479 feet from S Line of Section
Purchaser:COFFEYVILLE RESOURCES, LLC	3600 feet from E Line of Section
Operator Contact Person : DENNIS KERSHNER	Footages Calculated from Nearest Outside Section Corner:
Phone: ( 620) 365-3111	Circle one <u>SE</u>
Contractor: Name:FINNEY DRILLING	Lease Name:LIPSEY Well #:24
License:5989	Field Name:NEOSHO FALLS - LEROY
Wellsite Geologist:JIM STEGEMAN	Producing Formation:SQUIRREL
Designate Type Of Completion:	Elevation : Ground:UNKNOWN Kelly Bushing:
XNew WellReEntryWorkover	Total Depth:1010 Plug Back Total Depth:1004.30
X Oil SWD SIOW Temp Abd	Amount of Surface Pipe Set and Cemented at42Feet
Gas ENHR SIGW	Multiple Staging Cementing Collar Used? Yes X No
OtasENTRSTOWOther (Core, WSW, Expl., Cathodic,etc)	If yes, show depth set
If Workover/Re-entry: Old Well Info as follows:	If Alternate II Completion, cement circulated from1004.30
· · · · · · · · · · · · · · · · · · ·	feet depth toSURFACEw/152sx cement.
Operator:	rect depth tosert res
Well Name:	Drilling Fluid Management Plan(Data Collected From Pit)
Original Comp. Date:Original Total Depth:	Chloride Content_1000ppm Fluid Volune80bbls
	Dewatering method usedPUMPED OUT PUSH IN
Plug BackPlug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Docket No	·
Dual Completion Docket No	Operator Name:
Other (SWD or Entr.?) Docket No	Lease Name:License No.:
	Ouarter Sec Twp S R E W
6-25-046-28-049-7-04	County: Docket No.:
Spud Date or Date Reached TD Completion Date or Recompletion Date	
Wichita, Kansas 67202, within 120 days of the spud date, recompletic apply. Information of side two of this form will be held confidential for some rule 82-3-107 for confidentiality in excess of 12 months). One confidentiality in excess of 12 months).	led with the Kansas Corporation Commission, 130 S. Market - Room 2078, on, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 or a period of 12 months if requested in writing and submitted with this form pay of all wireline logs and geologist well reports shall be attached with this mit CP-4 form with all plugged wells. Submit CP-111 with all temporary
All requirements of the statutes, rules and regulations promulgated to regulate	e 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: Lennis Leisline.	KCC Office Use Only
	Letter of Confidentiality Attached
Title: OFFICE MANAGER Date: /2 - >>	If Denied, Yes Date Wireline Log Received
Subscribed and sworn to before me this 22nd day of Security	Geologist Report Received UIC Distribution
2004  CO  CO  CA  CA	
Notary Public: Shully & Stoller	

1-20-2008

Date Commission Expires:

## SIDE TWO

Operator Nam										LIPSEY		24		
Sec2_ Twp23_S. R. 16 X_EastINSTRUCTIONS: Show important tops and base of f						-				FEY				
										. Report all final c ssure reached station				
ole temperat	ure, fluid	l recover	ry, and flo	w rates	if gas to sur	face tes	t, along v	vith fina	al chart(s)	). Attach extra she	et if more space	is needed	l. Attach	
opy of all Ele														
			- 1		X_ No			X_ Lo		ormation (Top), De	enth and Datum		Sample	
Orill Stem Tests TakenYesYesY				_^_140			· ·	Top		Datum				
(Attach 2	Addition	ii Siicci.	3)				1		ГАСНЕГ	DRILLERS LOG				
amples Sent	to Geolo	gical Su	ırvev	Yes	ΧN	0	1							
ores Taken					XNo									
lectric Log I	Run				No									
(Submit C	Copy)													
ist All E. Lo	gs Run:													
				Report :			ORD			e, production, etc.				
2		Çi~	e Hole	<del></del>		Weight				Type Of Cement	# Sacks	Type and	Percent	
Purpose of st	ring	1	rilled	Size Casing Set (In O.D.)		Lbs/Ft		Setting Depth		Type of comen	Used	Additives		
SURFACE		11 5/8		7"		19		42		50/50 POZO	44SXS	PREMIUM GEL 2%		
PRODUCTION		5 5/8		2 7/8" 10RD		6.5		1004.30		50/50 POZO	152 SXS	PREM GEL 2%		
				<u> </u>										
		<u> </u>	<del> </del>	<u> </u>	A DDITI	ONALC	EMENTI	NG/SOI	IFFZE RE	CORD	l	<u>.                                    </u>		
							Τ				D Addition			
Purpose:  Perforate  Protect Casing					e of Cement #Sacks U		Used	Sed Type and Percent Additives						
		Top Bottom												
Plug Ba	_						<u> </u>							
Plug Off	Zone													
							<u> </u>		<u> </u>					
Cl · D·/E	T .	DEDEOL	ATION D	COPD	Deidas Dhu	vo Cat/Tu	me.			Acid Fracture Shot	Cement Squeeze	Record		
Shots Per/F	ŀ	PERFORATION RECORD - Bridge Specify Footage of Each Interv						Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)						
			, ,										Depth	
2	973 - 9	82						50G	AL HCL 1	5%			973-982	
		·						3000LBS 12/20 SAND						
								1000LBS 20\40 SAND						
<del></del>								1						
	ļ						•••	-				<del> </del>		
	<b> </b>							<del> </del>						
													<u> </u>	
TUBING RE	CORD		S	Set At		P	acker At		Line	er Run	Yes	N	0	
Date of First	Production	n 9-29-0	14		Р	roducing	Method:		Flowi	ingX_Pumpin	ıgGas Lif	t		
Estimated Production/24	4hrs	C	Dil 3.6 Bb	ls	Gas N	1cf		Water 8	.6 BBLS.	Gas-O	il Ratio	Grav	rity	
ispostion Of (	Gas		METHOD	OF CO	MPLETION				_	Production Int			, .	
Vented	So		_Used on I	æase			XPe	erf.	Duall	y Compl.	_Commingled			
(If vented S	Submit AC	O-18)			Otl	er (Spec	ify)							