

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
October 2008  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32016  
Name: Pioneer Resources  
Address 1: 80 Windmill Dr.  
Address 2: \_\_\_\_\_  
City: Phillipsburg State: KS Zip: 67661+  
Contact Person: Rodger D. Wells  
Phone: (785) 543-5556  
CONTRACTOR: License # 33575  
Name: W-W Drilling LLC  
Wellsite Geologist: Stephen P. Murphy  
Purchaser: Coffeyville Resources

Designate Type of Completion:  
 New Well     Re-Entry     Workover  
 Oil     SWD     SIOW    **RECEIVED**  
 Gas     ENHR     SIGW    **APR 17 2009**  
 CM (Coal Bed Methane)     Temp. Abd.    **KCC WICHITA**  
 Dry     Other    (Core, WSW, Expl., Calc. 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  
 Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled    Docket No.: \_\_\_\_\_  
 Dual Completion    Docket No.: \_\_\_\_\_  
 Other (SWD or Enhr.?)    Docket No.: \_\_\_\_\_  
2-14-09    2-24-09    3-9-09  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 063-21765-00-00  
Spot Description: \_\_\_\_\_  
SW  NW  NE  Sec. 6 Twp. 14 S. R. 31  East  West  
1299 Feet from  North /  South Line of Section  
2555 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Gove  
Lease Name: Hess Well #: 1  
Field Name: Maurice  
Producing Formation: Johnson  
Elevation: Ground: 2995 Kelly Bushing: 3000  
Total Depth 4794 Plug Back Total Depth: 4794  
Amount of Surface Pipe Set and Cemented at: 218 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: 2446 Feet  
If Alternate II completion, cement circulated from: 2446  
feet depth to: surface w/ 550 sx cmt.

Drilling Fluid Management Plan Air II nr 5-1-09  
(Data must be collected from the Reserve Pit)  
Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls  
Dewatering method used: Allowed to air dry  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

**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.

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: Rodger D. Wells  
Title: Owner Date: 4-16-09  
Subscribed and sworn to before me this 16<sup>th</sup> day of April,  
20 09.  
Notary Public: Sueverly G. Schenker  
Date Commission Expires: March 22, 2013

**KCC Office Use ONLY**

Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

NOTARY PUBLIC  
STATE OF KANSAS  
3-22-2013

Operator Name: Pioneer Resources Lease Name: Hess Well #: 1  
 Sec. 6 Twp. 14 S. R. 31  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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

| Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>(Attach Additional Sheets)<br><br>Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>(Submit Copy)<br><br>List All E. Logs Run: <u>CNCDL, DIL, MEL, Sonic</u> | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Datum</th> </tr> </thead> <tbody> <tr> <td>Anhy.</td> <td>2480</td> <td>+520</td> </tr> <tr> <td>Heeb.</td> <td>3989</td> <td>-989</td> </tr> <tr> <td>Lans.</td> <td>4020</td> <td>-1029</td> </tr> <tr> <td>Paw.</td> <td>4468</td> <td>-1468</td> </tr> <tr> <td>Ft. Scott</td> <td>4498</td> <td>-1498</td> </tr> <tr> <td>Cher.</td> <td>4521</td> <td>-1521</td> </tr> <tr> <td>Johnson</td> <td>4607</td> <td>-1507</td> </tr> <tr> <td>Morrow SH</td> <td>4619</td> <td>-1619</td> </tr> <tr> <td>Miss.</td> <td>4665</td> <td>-1665</td> </tr> </tbody> </table> | Name  | Top | Datum | Anhy. | 2480 | +520 | Heeb. | 3989 | -989 | Lans. | 4020 | -1029 | Paw. | 4468 | -1468 | Ft. Scott | 4498 | -1498 | Cher. | 4521 | -1521 | Johnson | 4607 | -1507 | Morrow SH | 4619 | -1619 | Miss. | 4665 | -1665 |
|--|---|-------|-----|-------|-------|------|------|-------|------|------|-------|------|-------|------|------|-------|-----------|------|-------|-------|------|-------|---------|------|-------|-----------|------|-------|-------|------|-------|
| Name   | Top   | Datum |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |
| Anhy.  | 2480  | +520  |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |
| Heeb.  | 3989  | -989  |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |
| Lans.  | 4020  | -1029 |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |
| Paw.   | 4468  | -1468 |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |
| Ft. Scott  | 4498  | -1498 |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |
| Cher.  | 4521  | -1521 |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |
| Johnson  | 4607  | -1507 |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |
| Morrow SH  | 4619  | -1619 |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |
| Miss.  | 4665  | -1665 |     |       |       |      |      |       |      |      |       |      |       |      |      |       |           |      |       |       |      |       |         |      |       |           |      |       |       |      |       |

| CASING RECORD <input 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   | 12                | 8 5/8                     | 14               | 218           | common         | 150          | 3% Poz                     |
| Production  | 8                 | 5 1/2                     | 15.5             | 4794          | Common         | 175          | 3% Poz                     |

| ADDITIONAL CEMENTING / SQUEEZE RECORD  |                  |                |             |                            |
|--|------------------|----------------|-------------|----------------------------|
| Purpose:   | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><input type="checkbox"/> Plug Off Zone |                  |                |             |                            |

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br>(Amount and Kind of Material Used) |          |           |
|----------------|---|---|----------|-----------|
|                |   |   |          | Depth     |
| 4              | 4607-4612   | 500 Gal. MCA  | 1500 Gal | 4607-4612 |
| 4              | 4596-4600   | 15% NFE   |          | 4596-4600 |

|  |                     |   |
|--|---------------------|---|
| TUBING RECORD: Size: <u>2 7/8</u> Set At: <u>4716</u> Packer At: |                     | Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| Date of First, Resumed Production, SWD or Enthr. <u>4-6-09</u>   |                     | Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) |
| Estimated Production Per 24 Hours                                | Oil Bbls. <u>60</u> | Gas Mcf <u>26</u> Water Bbls. <u>26</u> Gas-Oil Ratio <u>34</u> Gravity <u>34</u>   |

|   |   |  |
|---|---|--|
| DISPOSITION OF GAS:<br><input checked="" type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br>(If vented, Submit ACO-18.) | METHOD OF COMPLETION:<br><input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL:<br><u>4607-4612</u><br><u>4596-4600</u> |
|---|---|--|