

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

SEP 1 2006

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE WICHITA KS

Operator: License # 8490  
Name: Keen Oil Company  
Address: #1 Tam-O-Shanter Ct.  
City/State/Zip: Winfield, KS 67156  
Purchaser: Coffeyville Resources, L.L.C.  
Operator Contact Person: Lenore M. Keen  
Phone: (620) 221-6267  
Contractor: Name: MOKAT Drilling Inc.  
License: 5831

Wellsite Geologist: None  
Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, 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./SWD  
 Plug Back \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?) \_\_\_\_\_ Docket No. \_\_\_\_\_

7-31-06 8-2-06 9-3-06  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 019-26729-0000  
County: Chautauqua  
SE NW SW NE Sec. 29 Twp. 33 S. R. 12 East  West  
3465 feet from S N (circle one) Line of Section  
2110 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Pitts Well #: 5

Field Name: Peru - Sedan  
Producing Formation: Weiser  
Elevation: Ground: 820 Kelly Bushing: \_\_\_\_\_  
Total Depth: 1135 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 1135 Feet  
If Alternate II completion, cement circulated from \_\_\_\_\_  
feet depth to surface w/ 125 sx cmt.

Drilling Fluid Management Plan Drilling fluid field tested  
(Data must be collected from the Reserve Pit) by KCC Personnel

Chloride content 0 ppm Fluid volume 200 bbls  
Dewatering method used See pit closure form

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: Lenore M. Keen  
Title: Operator Date: September 5, 2006  
Subscribed and sworn to before me this 5th day of September,  
2006  
Notary Public: Kelly R. Wallace  
Date Commission Expires: 6-12-08

KELLY R. WALLACE  
Notary Public - State of Kansas  
My Appt. Expires 6-12-08

KCC Office Use ONLY

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