

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS DIVISION

REVISED 4-9-2007
Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5399
Name: American Energies Corporation
Address: 155 North Market, Suite 710
City/State/Zip: Wichita, KS 67202
Purchaser: Coffeyville Resources
Operator Contact Person: Alan L. DeGood
Phone: (316) (316) 263-5785
Contractor: Name: Warren Drilling
License: 33724
Wellsite Geologist: Doug Davis
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. _____
12/11/2006 12/11/06 12/26/06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API NO. 15 - 15-115-051-25595-0000
County: Ellis
90°N C SE - NW - NW Sec. 5 T. 11 S. R. 18 East West
1890' feet from S / N (circle one) Line of Section
1980' feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Saline River Grazing Well #: R-2
Field Name: Richards
Producing Formation: Lansing/Kansas City
Elevation: Ground: 2070' Kelly Bushing: 2076'
Total Depth: 3750' Plug Back Total Depth: 3630'
Amount of Surface Pipe Set and Cemented at 8 5/8" 23# set @ 212 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1405' Feet
If Alternate II completion, cement circulated from surface
feet depth to 1405 w/ 300 sx cmt.

Drilling Fluid Management Plan Amended Oct 2 KGR 6/27/07
(Data must be collected from the Reserve Pit)
Chloride content 4400 ppm Fluid volume 950 bbls
Dewatering method used Evaporation and Backfill
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 Kansas Corporation Commission, 150 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: Alan L. DeGood
Title: Alan L. DeGood, President Date: 4/6/07
Subscribed and sworn to before me this 6 day of April 2007
Notary Public: Karen E. Houseberg
Date Commission Expires 9/11/10

NOTARY PUBLIC - State of Kansas
KAREN E. HOUSEBERG
Appt. Exp. 9/11 2010

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION

APR 09 2007

CONSERVATION DIVISION
WICHITA, KS

Operator Name: American Energies Corporation Lease Name: Saline River Grazing Well: R-2
 Sec. 5 Twp. 11S S. R. 18W Vest County: Ellis

INSTRUCTIONS: Show important tops and bas of formations penetrated. Detail all cores. Report all final copies of drill stem tests giving interval test, 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 charts(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 Yes No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run Yes No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: Gamma Ray Correlation Log, Dual Induction Compensated Neutron Density Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum Name Top <input checked="" type="checkbox"/> Sample Datum See attached Drilling Report
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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	12 1/4"	8 5/8"	23#	212'	Common	150	3% CaCl, 2% gel
Production Bottom Stg	7 7/8"	4 1/2"	9.5#	3745'	Class A	150 sx	10% salt
Production - Top Stg	7 7/8"	4 1/2"	9.5#	3745'	60/40 poz	300 sx	

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

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2 SPF	3460-3466	3500 gallons 15% NE	3298'
2 SPF	3510-3512, 3486-3488, 3471, 3449-3451		
2 SPF	3372-3374, 3351-3353, 3320-3322		

TUBING RECORD Size <u>2 3/8"</u> Set At <u>3560'</u> Packer At <u>3520'</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No CONSERVATION DIVISION WICHITA, KS
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Date of First, Resumed Production, SWD or Enhr. <u>1/22/07</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls <u>4</u>	Gas Mcf <u>0</u>	Water Bbls <u>70</u>	Gas-Oil Ratio	Gravity
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Disposition of Gas: Vented Sold Used on Lease Open Hole Perf Dually Comp. Commingled

METHOD OF COMPLETION: Other Specify _____

(If vented, Sumit ACO-18.)