

8103/08

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5150
 Name: COLT ENERGY, INC
 Address: P O BOX 388
 City/State/Zip: IOLA, KS 66749
 Purchaser: ONE OK
 Operator Contact Person: DENNIS KERSHNER
 Phone: (620) 365-3111
 Contractor: Name: WELL REFINED DRILLING CO, INC
 License: 33072
 Wellsite Geologist: JIM STEGEMAN
 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. _____

6/23/06	6/26/06	11/19/07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

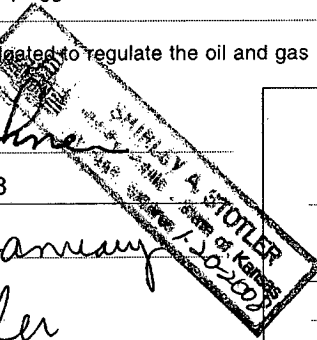
API No. 15 - 125-31,038 - 00-00
 County: MONTGOMERY
 NE SE SW SW Sec. 19 Twp. 33 S. R. 17 East West
630 feet from (S) N (circle one) Line of Section
4000 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: BELCHER Well #: 14-19
 Field Name: COFFEYVILLE-CHERRYVALE
 Producing Formation: PENNSYLVANIA COALS
 Elevation: Ground: 746 Kelly Bushing: _____
 Total Depth: 1062 Plug Back Total Depth: 1055.7
 Amount of Surface Pipe Set and Cemented at 36 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 1062
 feet depth to SURFACE w/ 110 sx cmt.

Drilling Fluid Management Plan AIT INH 8-29-08
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 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: Dennis Kershner
 Title: OFFICE MANAGER Date: 1/3/08
 Subscribed and sworn to before me this 4th day of January
20 08
 Notary Public: Shirley A Stotler
 Date Commission Expires: 1-20-2008



KCC Office Use ONLY

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

RECEIVED
 KANSAS CORPORATION COMMISSION

JAN 07 2008

CONSERVATION DIVISION
WICHITA, KS

Operator Name: CQLT ENERGY, INC Lease Name: BELCHER Well #: 14-19
 Sec. 19 Twp. 33 S. R. 17 East West County: MONTGOMERY

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: HIGH RESOLUTION COMPENSATED DENSITY/ NEUTRON, DUAL INDUCTION SFL/GR, GAMMA RAY/NEUTRON/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum DRILLERS LOG ATTACHED <div style="text-align: center; font-size: 2em; font-weight: bold; opacity: 0.5;">CONFIDENTIAL</div>
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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	24	21.6	PORTLAND	6	
PRODUCTION	6 3/4	4 1/2	10.5	1055.75	THICK SET	110	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <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 <i>(Amount and Kind of Material Used)</i>	
			Depth
4	889-892,951-955	250GAL 15%HCL, 9500# 20/40 SAND	889-955
4	611-615,671-674,693-695,755-757	250GAL 15%HCL, 10,000# 20/40 SAND	611-757
4	477-481,512-516,529-553,563-565	250GAL 15%HCL, 9300# 20/40 SAND	477-565

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr.	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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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KANSAS CORPORATION COMMISSION

JAN 07 2008

KANSAS

CORPORATION COMMISSION

Kathleen Sebelius, Governor Thomas E. Wright, Chairman Michael C. Moffet, Commissioner Joseph F. Harkins, Commissioner

August 11, 2008

COLT ENERGY INC
PO BOX 388
IOLA, KS 66749-0388

RE: API Well No. 15-125-31038-00-00
BELCHER 14-19
NESESWSW, 19-33S-17E
MONTGOMERY County, Kansas

Dear Operator:

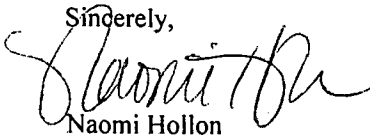
An affidavit of completion form (ACO-1) on the above referenced well was received on August 07, 2006. Technical review finds that the ACO-1 is incomplete. The information requested below, or an amended/corrected ACO-1, must be submitted by August 29, 2008. Only the current ACO-1 form will be accepted (Form ACO-1, Rev. 9-99), and only the lines marked below apply.

- | | |
|---|--|
| <input type="checkbox"/> All drilling and completion information. No ACO-1 has been received as of this date. | <input type="checkbox"/> TD and Completion date. (Month, Day, Year) |
| <input type="checkbox"/> Must be notarized and signed. | <input type="checkbox"/> Must have Footages from nearest outside corner of section. |
| <input type="checkbox"/> Must have the ORIGINAL HARD COPY of ACO-1. | <input type="checkbox"/> Side two on back of ACO-1 must be completed. |
| <input type="checkbox"/> We do not accept fax copies. | <input type="checkbox"/> Must have final copies of DST's/Charts. |
| <input type="checkbox"/> Must be put on new form and typed. | <input type="checkbox"/> All original complete open and cased hole wireline logs run. |
| <input type="checkbox"/> API # or date when original well was first drilled. | <input type="checkbox"/> A copy of geological reports compiled by wellsite geologist. |
| <input type="checkbox"/> Contractor License #. | <input checked="" type="checkbox"/> A copy of all cement job logs showing type, amounts and additives used to cement casing strings, squeeze and/or to plug and abandon. (Note: Cement tickets must be from company providing the cement, not necessarily the contractor.) |
| <input type="checkbox"/> Designate type of Well Completion. | <input type="checkbox"/> Any commingling information; File on the ACO-4 form. |
| <input type="checkbox"/> If Workover/Re-entry, need old well information, including original completion date. | <input type="checkbox"/> Anything HIGHLIGHTED on ACO-1. |
| <input type="checkbox"/> Spud date. (Month, Day, Year) | |
| <input type="checkbox"/> Other: | |

K.C.C. regulation 82-3-107 provides confidentiality, upon written request, for a period of one year from the date of such letter request. Confidentiality rights are waived if the ACO-1 remains incomplete, or is not timely filed (within 120 days from the well's spud date) including: electric logs, geologist's wellsite reports, driller's logs, and Kansas Geological Survey requested samples.

Do not hesitate to call the Kansas Corporation Commission, Conservation Division, at (316) 337-6200 if there are any questions. PLEASE RETURN THIS FORM AND ANY ENCLOSURES WITH YOUR REPLY. Note: If the intent is incorrect, you need to file a corrected intent.

Sincerely,



Naomi Hollon
Production Department

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AUG 18 2008

CONSERVATION DIVISION
WICHITA, KS

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 10214
 LOCATION Eureka
 FOREMAN Brad Butler

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-26-06	1828	Belcher #14-19				Montgomery
CUSTOMER COIT Energy			Well Ref. Drilling Co.			
MAILING ADDRESS P.O. Box 388			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Tola			463	Alan		
STATE Ks.			436	J.P.		
ZIP CODE			442	Rick P.		

JOB TYPE Misc Pump / Loss Circ HOLE SIZE 6 3/4" HOLE DEPTH 1062' CASING SIZE & WEIGHT 4 1/2" - 11.6 lb
 CASING DEPTH 1056' DRILL PIPE 4 1/2" TUBING _____ OTHER PBTD 1053'
 SLURRY WEIGHT 13.4 lb SLURRY VOL 34 Bbls WATER gal/sk 8.0 CEMENT LEFT in CASING 3'
 DISPLACEMENT 16³ Bbls DISPLACEMENT PSI 600 PSI 1100 Pump Plug RATE _____

REMARKS: Safety Meeting: Rig up to Drill Pipe - Pumped 100 Bbls water at 6 BPM w/ 400 PSI - Shut down - well Dead
Pull Drill Pipe out of hole - well start Blowing Again - Pumped 40 Bbls water at 6 BPM - shut down - well Dead
Kept Hole full with water while Pull Drill Pipe out of hole while Rigging up Loggers - well start Blowing Again
Ran casing > Rig up to 4 1/2" casing, Break circulation with 20 Bbls water, Pumped 15 Bbl Gel Flush
5 Bbl water, 20 Bbl Metasilicate, Pumped water - well Blew Gel out of hole, Pumped 80 Bbls water at 9 BPM
with 300 PSI - over came Gas on well - we had good circulation while Pumping at 4 BPM
Mixed 110 SKs Thick Set cement w/ 8" P/SK of KDI-SEAL at 13.4 lb P/Gal. Shut down wash pump plug
Release Plug - Displace Plug with 16 1/2 Bbls water - Final pumping at 600 PSI - Pumped Plug in 1100 PSI - wait 2 minutes
Release Pressure - Float Held - close casing in with 0 PSI - Good cement returns to surface with 7 Bbl slurry
Job complete - Tear down

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		
5406	0	MILEAGE <u>2nd Job of 2</u>	800.00	800.00
			3.15	n/c
1126 A	110 SKs	Thick Set cement		
1110 A	900 lbs	KDI-SEAL 8" P/SK	14.65	1611.50
1118 A	300 lbs	Gel Flush	1.36	324.00
1102	80 lbs	CACL ₂	.14	42.00
1111 A	100 lbs	Metasilicate Preflush	.64	51.20
5407 A	6.05 Ton	40 miles - Bulk Truck	1.65	165.00
			1.05	254.10
4404	1	4 1/2" Top Rubber Plug	40.00	40.00
5609	3 Hrs.	Miss Pump > Kill Well	152.00	456.00
5502	5 Hrs.	80 Bbl. VAC TRK.	90.00	450.00
		"Thank You"		
		Sub Total		4193.80
		SALES TAX	5.32	118.39
		ESTIMATED TOTAL		4312.19

AUTHORIZATION Witnessed by Glenn

TITLE CO. Rep

DATE _____

COLT

ENERGY, INC.

CORPORATE OFFICE

*P.O. Box 388 • 1112 Rhode Island Rd. • Iola, Ks. 66749
Phone (620) 365-3111 • Fax (620) 365-3170*

August 14, 2008

Naomi Holton
KCC Conservation Office
Production Department
130 S. Market, Room 2078
Wichita, Kansas 67202-1286

Dear Naomi:

Enclosed please find a copy of your letter dated August 11, 2008 regarding the cement ticket for Belchner 14-19 located 19-33-17 Montgomery County, KS.. I have enclosed a copy of the ticket..

If you have any questions, contact me at 620-365-3111.

Sincerely,
COLT ENERGY, INC.
Shirley Stotler
Shirley Stotler
Production Clerk
ss
Encl.

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KANSAS CORPORATION COMMISSION

AUG 18 2008

CONSERVATION DIVISION
WICHITA, KS