

**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**

**ORIGINAL
AMENDED**

*cont'd
5/11/08
KCC*

Operator: License # 4150-33365
 Name: COLT ENERGY, INC. LAYNE ENERGY OPERATING, LLC
 Address: P. O. BOX 388
 City/State/Zip: IOLA, KS 66749
 Purchaser: ONBOK
 Operator Contact Person: DENNIS KERSHNER
 Phone: (620-365-3111)
 Contractor Name: MCPHERSON DRILLING
 License: 5675
 Wellsite Geologist: JIM STEGEMAN
 Designate Type Of Completion:
 New Well ReEntry Workover
 Oil SWD SKOW Temp Abd
 Gas ENHR SIGW
 Dry Other (Curr, 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 Entr/SWD
 Plug Back _____ Plug Back Total Depth _____
 Cased/Logged _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Entr.?) _____ Docket No. _____
 11-19-2001 _____ 11-21-2001 _____ 3-22-02 _____
 Spud Date or Completion Date _____ Date Reached TD _____ Completion Date or Recompletion Date _____

API No. 15-125-30,067-0000
 County: MONTGOMERY
 AP SE-NW-NW-NW Sec. 9 Twp. 31 S. R. 17 X. E
4780 feet from S Line of Section
4880 feet from E Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 Circle one SE
 Lease Name: JD PRIESS Well #: 9-1WDW
 Field Name: CHERRYVALE-COFFEYVILLE
 Producing Formation: ARBUCKLE
 Elevation: Ground: UNKNOWN Kelly Bushing: _____
 Total Depth: 1457 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 20 Feet
 Multiple Staging Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II Completion, cement circulated from 1307
 feet depth to SURFACE w/ 216 cc cement.

Drilling Fluid Management Plan (Data Collected From Pit)
 Chloride Content 1000 ppm Fluid Volume 80 bbls
 Dewatering method used PUMPED OUT PUSH IN
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S R _____ E _____ W
 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 said two of this form will be held confidential for a period of 12 months if requested in writing and submitted with this form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well reports shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 with all temporary 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: 4-04-02
 Subscribed and sworn to before me this 5th day of April
2002
 Notary Public: Shirley A. Stoller
 Date Commission Expires: 1-20-2004

KCC Office Use Only
 Letter of Confidentiality Attached
 If Denied, Yes _____ Date _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

SHIRLEY A. STOLLER
 Notary Public - State of Kansas
 My Comm. Expires 1-20-2004

RECEIVED
 KANSAS CORPORATION COMMISSION

APR 23 2008

CONSERVATION DIVISION
 WICHITA, KS

Operator Name COLT ENERGY, INC. Lease Name JD FRIESS Well # 9-1WDW
 Sec. 9 Twp. 31 S. R. 17 X 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 Yes No
 (Attach Additional Sheets)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
SEE ATTACHED DRILLERS LOG

Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)
 List All E. Logs Run:

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	11"	8 5/8	24	20	PORTLAND	4	
PRODUCTION	6 3/4	4 1/2	10.5	1307	50/50 POZMIX	216	

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/F	PERFORATION RECORD - Bridge Plug Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	
		Depth	
	OPEN HOLE - Arbuckle 1307'-1457'	500GAL 15% HCl.	1307'- 1457'

TUBING RECORD		Set At	Factor At	Liner Run	Yes	No
Date of First SWD	3-22-02	Producing Method:	Flowing	Pumping	Gas Lift	
Estimated Production/24hrs	Oil	Bbls	Gas Mcf	Water	BELS	Gas-Oil Ratio
Gravity						

Disposition Of Gas Vented Sold Used on Lease Open Hole Perf Dually Compl. Commingled Other (Specify) _____

Production Interval _____

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