

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 # 9067
Name: DaMar Resources, Inc.
Address: 234 W. 11th St.
City/State/Zip: Hays, KS 67601
Purchaser: Coffeyville Resources, Inc.
Operator Contact Person: Curtis R. Longpine
Phone: (785) 625-0020
Contractor: Name: Southwind Drilling
License: 33350
Wellsite Geologist: Jim Musgrove

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. _____

<u>5/9/26</u>	<u>5-29-06</u>	<u>6/6/06</u>	<u>7/3/06</u>
Spud Date or	Date Reached TD	Completion Date or	Recompletion Date
Recompletion Date			

*per oper
KCC-Dlg*

API No. 15 - 185-23362 -60-60

County: Stafford

SW SE SW SE Sec. 19 Twp. 22 S. R. 13 East West

100 feet from (S) N (circle one) Line of Section

1950 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE (SE) NW SW

Lease Name: Grimes West Unit Well #: 1

Field Name: Wildcat

Producing Formation: Lansing-Kansas City

Elevation: Ground: 1907 Kelly Bushing: 1916

Total Depth: 3914 Plug Back Total Depth: 3885

Amount of Surface Pipe Set and Cemented at 468 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

*ALT IWHM
12-11-07*

Chloride content 3000 ppm Fluid volume 4500 bbls

Dewatering method used suction & evaporation

Location of fluid disposal if hauled offsite:

Operator Name: Bob's Oil Service

Lease Name: Teichmann License No.: 32408

Quarter _____ Sec. 16 Twp. 22 S. R. 12 East West

County: Stafford Docket No.: D-23,722

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: [Signature]

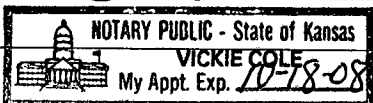
Title: Geologist Date: 9/25/06

Subscribed and sworn to before me this 25 day of September

2006

Notary Public: [Signature]

Date Commission Expires: _____



KCC Office Use ONLY

N Letter of Confidentiality Received
If Denied, Yes Date: _____

_____ Wireline Log Received

_____ Geologist Report Received

_____ UIC Distribution

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Operator Name: DaMar Resources, Inc. Lease Name: Grimes West Unit Well #: 1
 Sec. 19 Twp. 22 S. R. 13 East West County: Stafford

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 <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: See attached logs & geo reports	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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 1/4"	8 5/8"	23	468	common	425	2% gel 3% cc
production	7 7/8"	5 1/2"	14#	3907	EA-2	175	

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 (Amount and Kind of Material Used)	Depth
4	3482-3488	2250 gal mud acid	

TUBING RECORD	Size Set At	Packer At	Liner Run
	2 3/8" 3874	none	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr. 7/14/06	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
	70	trace	15		

Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" 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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ALLIED CEMENTING CO., INC. 18496

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
GREAT BEND

DATE <u>05-27-06</u>	SEC. <u>19</u>	TWP <u>22S</u>	RANGE <u>13W</u>	CALLED OUT <u>5:00 AM</u>	ON LOCATION <u>8:00 PM</u>	JOB START <u>7:00 AM</u>	JOB FINISH <u>7:00 PM</u>
<u>GRIMES West</u> LEASE	<u>Unit</u> WELL #	LOCATION <u>N-17-281 3S 2 1/2W</u>			COUNTY <u>STAFFORD</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR SOUTHWIND DILL PC 2 OWNER DAMAR RESOURCES

TYPE OF JOB SURFACE JOB

HOLE SIZE 12 1/4' T.D. 470'

CASING SIZE 8 5/8" 23# DEPTH 468'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 20'

PERFS. _____

DISPLACEMENT 285 BS

CEMENT

AMOUNT ORDERED 425 SA (COMMON) 3% BCC
2% BCC

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

REMARKS:

RAN 23# 8 5/8" TO FT BROOK
CIRCULATION W/ RIG

MIN 425 SA (COMMON) 3% BCC 2% BCC
CEMENT CALCULATED

SERVICE

DEPTH OF JOB 468'

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

CHARGE TO: DAMAR RESOURCES

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

1-Top 8 5/8" Wood

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE LeRoyne Tresner

LEROYNE TRESNER
PRINTED NAME

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JOB LOG

SWIFT Services, Inc.

DATE 6-7-66 PAGE NO. 7

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
Damar Resources		#1		Grimes West Unit		Cement Logging		10122	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	0150							on loc w/FE	
	0245							Tks on loc	
								5 1/2" x 14" x 3913' x 17' 55"	
								RTD 3914' LTD 3913'	
								Cent 1, 4, 7, 10, 13, 16, 19	
	0230							Start FE.	
	0445							Break circulation	
	0505	7	3/2					Plug RH 9 MH 15 sks / 10 sks	
	0515	4	0			200		Start Preflush 500 gal Mud Flush 20 bbl KCL Flush	
	0523	5	32/0			300		Start Cement 175 sks EA-2	
	0531		42					End Cement	
								Wash P & L	
								Drop Plug	
	0535	6.5	0			200		Start Displacement	
	0545	6	65			300		catch Cement	
	0551		95			800/200		land Plug	
								Release Pressure	
								Floater Held	

Thank you
Nick, Josh, & Sean

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