

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

*KCC
my
6/11/08*

Operator: License # 33874
Name: Custer Oil & Gas, LLC
Address: Post Office Box 628
City/State/Zip: Barnsdall, Oklahoma 74002
Purchaser: Coffeyville Resources
Operator Contact Person: N
Phone: (918) 847-2531
Contractor: Name: M.O.K.A.T. Drilling
License: 5831
Wellsite Geologist: Dustin Kerbs

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. _____

4-11-08	4-15-08	4-15-08
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-31567-0000
County: Montgomery
E2 W2 SW NE Sec. 12 Twp. 34 S. R. 13 East West
1980 _____ feet from S (N) (circle one) Line of Section
2140 _____ feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Fobian Well #: 08-25
Field Name: Wayside Havana
Producing Formation: Wayside, Pennsylvanian Coal, Bartlesville, Miss Chat
Elevation: Ground: 789.1 Kelly Bushing: _____
Total Depth: 600 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 20'
feet depth to surface w/ 4 _____ sx cmt.

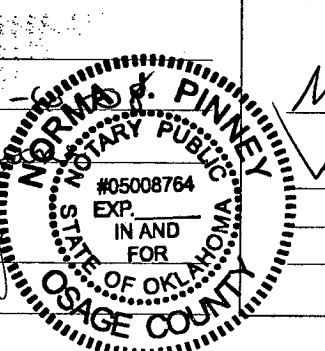
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: Rick's Tank Truck Service
Lease Name: Sheet Lease License No.: 159972
Quarter NE Sec. 11 Twp. 28 S. R. 13 East West
County: Washington Docket No.: 1439

Alt 2 - Dlg - 6/30/08

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: Paul Phillips
Title: Agent Date: 6-6
Subscribed and sworn to before me this 6th day of June
20 08.
Notary Public: Norma J. Pinney
Date Commission Expires: 9-19-09



KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION

JUN 09 2008

Operator Name: Custer Oil & Gas, LLC Lease Name: Fobian Well #: 08-25
 Sec. 12 Twp. 34 S. R. 11 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 Sidewall Neutron Log Dual Induction LL3/GR Log Gamma Ray Cement Bond CCL VDL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Big Salt</td> <td>360</td> <td></td> </tr> <tr> <td>Red Sand</td> <td>527</td> <td></td> </tr> </table>	Name	Top	Datum	Big Salt	360		Red Sand	527	
Name	Top	Datum								
Big Salt	360									
Red Sand	527									

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
	8 5/8	7"	20lb	20'	REG	4	
	6 1/4	4 1/2"	9.5	580	50/50 poz mix	100	2% gel, 2% CaCl ₂ , flo seal

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
10	525-530	12 gal KCL, 5000 lb sand, 12,000 water	

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 CONSERVATION DIVISION
 WICHITA, KS

TUBING RECORD Size _____ Set At _____ Packer At _____	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 4-15-08	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours Oil Bbls. <u>20'</u> Gas Mcf <u>trace</u> Water Bbls. <u>30</u> Gas-Oil Ratio _____ Gravity _____	

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled _____

Production Interval Other (Specify) _____

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

TICKET NUMBER 13899
 LOCATION Eureka
 FOREMAN Troy Strickler

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-16-08	6314	Fobign #08-25				MO
CUSTOMER Performance Group			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS P.O. Box 628			520 Cliff			
CITY STATE ZIP CODE Barnesville OK			502 Phillip			
			437 Jim			

JOB TYPE Logging HOLE SIZE 6 3/4" HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2"
 CASING DEPTH 580' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.9" SLURRY VOL 25861 WATER gal/sk 6.1 CEMENT LEFT in CASING 0'
 DISPLACEMENT 9.4861 DISPLACEMENT PSI 400 MIX PSI 900mp Pfy RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2" casing. Break Circulation w/ 10861 Fresh water. Pump lost Gel-Flush w/ Hulls. 5861 water. Mixed 100sk 50/50 Poz-mix Cement w/ 2% Gel, 2% Cacl2, 4" Kal-Seal P/sk, 3" Cal-Seal P/sk, 1/4" Flocele, 1/2% FL-110, 1/4% CAF-38 @ 13.9" P/sk. Wash out Pump lines. Release Plug. Displace w/ 9.4861 water. Final Pumping Pressure 400 PSI. Bump Plug to 900 PSI. Wait 2mins. Release Pressure Float did not hold. Bump Plug to 600 PSI. Shut casing in. Good Cement to surface = 8861 slurry to Pit.

Job Complete.

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	875.00	875.00
5406	40	MILEAGE	3.45	138.00
1124	100sk	50/50 Poz-mix Cement	9.30	930.00
1118A	170"	Gel 2%	.16"	27.20
1102	170"	Cacl2 2%	.70"	119.00
1110A	400"	Kal-Seal 4"/sk	.40"	160.00
1101	300"	Cal-Seal 3"/sk	.35"	105.00
1107	25"	Flocele 1/4"/sk	1.92"	49.50
1135	40"	CFL-110 1/2%	7.15"	286.00
1146	20"	CAF-38 1/4%	7.30"	146.00
1118A	300"	Gel Flush	.16"	48.00
1105	50"	Hulls	.37"	18.50
5407	4.2 Tons	Ten-Mileage	m/c	300.00
4404	1	4 1/2 Top Rubber Plug	42.00	42.00
5502C	4 hrs	80861 Use Truck	94.00	376.00
1123	3000gal	City water	12.30/gal	369.00
		Sub Total		3660.10
		Thank You!	5.2%	SALES TAX
				ESTIMATED TOTAL
				3764.57

AUTHORIZATION witnessed by Paul

281309
 TITLE Partner

DATE _____