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ORIGINAL

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

Operator: License # 33741  
Name: Energex Kansas, Inc. (formerly Midwest Energy, Inc.)  
Address: Commerce Plaza 1 Center, 7300 W. 110th Street, 7th Floor  
City/State/Zip: Overland Park, KS 66210  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Marcia Littell  
Phone: (913) 693.4608  
Contractor: Name: Thornton Air Rotary, LLC  
License: 33606  
Wellsite Geologist: David C. Smith

Designate Type of Completion:

☒ New Well ☐ Re-Entry ☐ Workover  
☐ Oil ☐ SWD ☐ SIOW ☐ 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. \_\_\_\_\_

10/23/07	10/26/07	10/26/07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 001- 29653-0000  
County: Allen  
SW NW SE Sec. 26 Twp. 24 S. R. 17 ☒ East ☐ West  
1785 feet from (S) / N (circle one) Line of Section  
2200 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE (SE) NW SW  
Lease Name: Specht Well #: 3  
Field Name: Iola  
Producing Formation: Cherokee Coals  
Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_  
Total Depth: 1265' Plug Back Total Depth: 1255'  
Amount of Surface Pipe Set and Cemented at 22' Feet  
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from 1255'  
feet depth to surface w/ 150 sx cmt.

**Drilling Fluid Management Plan** DA 7-1-08

(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: Marcia Littell  
Title: Compliance Coordinator Date: 06/02/08

Subscribed and sworn to before me this 2nd day of June  
2008  
Notary Public: Maureen Elton  
Date Commission Expires: 9/18/2010

Maureen Elton Notary Public State of Kansas My Appt Expires <u>9/18/2010</u>	<b>KCC Office Use ONLY</b>  Letter of Confidentiality Received If Denied, Yes <input type="checkbox"/> Date: _____ <input type="checkbox"/> Wireline Log Received <input type="checkbox"/> Geologist Report Received <input type="checkbox"/> UIC Distribution
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KANSAS CORPORATION COMMISSION  
**JUN 04 2008**  
CONSERVATION DIVISION  
WICHITA, KS

Operator Name: Energex Kansas, Inc. (formerly Midwest Energy, Inc.) Lease Name: Specht Well #: 3  
 Sec. 26 Twp. 24 S. R. 17 ☒ East ☐ West County: Allen

**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)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No  
 (Submit Copy)

List All E. Logs Run:

Gamma Ray Neutron & Cement Bond, Dual Induction  
 Differential Temperature, Density Neutron Hi-Resolution

☐ Log Formation (Top), Depth and Datum ☐ Sample  
 Name Top Datum

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#	22'	Portland	4	
Production	6 3/4"	4 1/2"	9.5#	1255'	O.W.C.	150	8# kol-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
4 SPF	1079-1085', 1088-1092', 1097-1100'	200# 20/40 sand, 5400# 12/20 sand, 260 bbls. water	1079-1100'
		500 gal. 15% HCL acid	

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.		Producing Method			
		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	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 ☐ Other (Specify) \_\_\_\_\_

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