

IND

Form ACO-1
September 1999
Form Must Be Typed

COPY

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

Operator: License # 33707
Name: Coronado Kansas, LLC
Address: 8556 E 101st Street, Suite C
City/State/Zip: Tulsa OK 74133
Purchaser: _____
Operator Contact Person: Steve McDaniel
Phone: (918) 369-4000
Contractor: Name: C & E Services
License: 32854/3591
Wellsite Geologist: N/A

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: Layton Oil Co.

Well Name: McSpadden #4
Original Comp. Date: 1958 Original Total Depth: 2223
 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>3/6/06</u> | <u>3/8/06</u> | <u>3/9/06</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 04919101-0001
County: Elk
NW SE Sec. 18 Twp. 31 S. R. 10 East West
2180' feet from (S) / N (circle one) Line of Section
1900' feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: DJK Ranch, LP Well #: 1
Field Name: West Moline (?)

Producing Formation: Mississippi Chat
Elevation: Ground: 1195.6 Kelly Bushing: _____
Total Depth: 2226' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at N/A 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 WCR 10-23-08
(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: Mah D. Wilson
Title: President and CEO Date: 3/27/06
Subscribed and sworn to before me this 27th day of March,
2006.
Notary Public: Melody Boeckman
Date Commission Expires: _____
Commission # 05009617 Expires 10/17/09

KCC Office Use ONLY
____ Letter of Confidentiality Received
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution
RECEIVED
MAR 29 2006

KCC WICHITA

Operator Name: Coronado Kansas, LLC Lease Name: DJK Ranch, LP Well #: 1
 Sec. 18 Twp. 31 S. R. 10 East West County: Elk

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: Gamma Ray Cement Bond/VDL CCL | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Mississippi Chat Top 2190' Datum |
|--|--|

| CASING RECORD <input type="checkbox"/> New <input checked="" 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 |
| Production | N/A | 4 1/2" | N/A | 2106' | N/A | N/A | N/A |
| | | | | | | | |
| | | | | | | | |

| 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 |
|----------------|---|---|-------|
| | OPEN HOLE below 2190' | | |
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| | | | |
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| | | | | | |
|---|--------------------|--------------------|--|--------------------------|---|
| TUBING RECORD | | Size <u>2 3/8"</u> | Set At <u>1926'</u> | Packer At <u>N/A</u> | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumerd Production, SWD or Enhr. awaiting surface equipment | | | Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | | |
| Estimated Production Per 24 Hours | Oil Bbls. <u>2</u> | Gas Mcf <u>N/A</u> | Water Bbls. <u>0</u> | Gas-Oil Ratio <u>N/A</u> | Gravity <u>N/A</u> |

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

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OIL & GAS CONSERVATION DIVISION
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September 1999
Form Must Be Typed

Operator: License # 33707
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City/State/Zip: Tulsa OK 74133
Purchaser:
Operator Contact Person: Steve McDaniel
Phone: (918) 369-4000
Contractor: Name: C & E Services
License: 32854/3591
Wellsite Geologist: N/A

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: Layton Oil Co.

Well Name: McSpadden #4
Original Comp. Date: 1958 Original Total Depth: 2223
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.

3/6/06 3/8/06 3/9/06
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 04919101-0001
County: Elk
NW SE Sec. 18 Twp. 31 S. R. 10 East West
2180' feet from S / N (circle one) Line of Section
1900' feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: DJK Ranch, LP Well #: 1
Field Name: West Moline (?)

Producing Formation: Mississippi Chat
Elevation: Ground: 1195.6 Kelly Bushing:
Total Depth: 2226' Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at N/A 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)
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.:

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Signature: Mah D. Wilson
Title: President and CEO Date: 3/27/06
Subscribed and sworn to before me this 27th day of March
20 06

Notary Public: Melody Boeckman
Date Commission Expires:
Notary Public
State of Oklahoma
Commission # 05009617 Expires 10/17/09

KCC Office Use ONLY
Letter of Confidentiality Received
If Denied, Yes Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
RECEIVED
MAR 29 2006

KCC WICHITA

Operator Name: Coronado Kansas, LLC Lease Name: DJK Ranch, LP Well #: 1
 Sec. 18 Twp. 31 S. R. 10 East West County: Elk

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: Gamma Ray Cement Bond/VDL CCL | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Mississippi Chat Top 2190' Datum |
|--|--|

| CASING RECORD <input type="checkbox"/> New <input checked="" 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 |
| Production | N/A | 4 1/2" | N/A | 2106' | N/A | N/A | N/A |
| | | | | | | | |
| | | | | | | | |

| 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 |
|----------------|---|--|-------|
| | OPEN HOLE below 2190' | | |
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| | | | |
| | | | |

| | | | | |
|--|----------------|--|------------------|---|
| TUBING RECORD | Size 2 3/8" | Set At 1926' | Packer At N/A | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumerd Production, SWD or Enhr. awaiting surface equipment | | Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | | |
| Estimated Production Per 24 Hours | Oil Bbls. 2 | Gas Mcf N/A | Water Bbls. 0 | Gas-Oil Ratio N/A Gravity N/A |

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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 KCC WICHITA