

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

Operator: License # 33887
Name: Coffeyville Resources Nitrogen Fertilizers, LLC
Address: P. O. Box 5000
City/State/Zip: Coffeyville, KS 67337
Purchaser: NA
Operator Contact Person: Douglas E. Robker

Phone: (620) 252-4452
Contractor: Name: Bill's Water Drilling

License: 33860
Wellsite Geologist: NA

Designate Type of Completion: CONSERVATION DIVISION WICHITA, KS
_____ 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. _____

6/25/07	6/26/07	8/7/07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - NA 125 - 31298-0000
County: Montgomery

NW SE NE Sec. 36 Twp. 34 S. R. 16 ☒ East ☐ West
1645 _____ feet from S / (N) (circle one) Line of Section

1285 _____ feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Coffeyville Resources Well #: CP-3

Field Name: NA

Producing Formation: NA

Elevation: Ground: 720 Kelly Bushing: NA

Total Depth: 250 ft Plug Back Total Depth: NA

Amount of Surface Pipe Set and Cemented at NA 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/ _____

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume _____ bbls

Dewatering method used Collected in portable tank; slow drain thru screen.

Location of fluid disposal if hauled offsite:

Operator Name: NA

Lease Name: NA 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: Douglas E. Robker

Title: Environmental Engineer Date: August 8, 2008

Subscribed and sworn to before me this 8th day of August, 2008.

Notary Public: Paula Rae Benson

Date Commission Expires: 08/04/2010

KCC Office Use ONLY

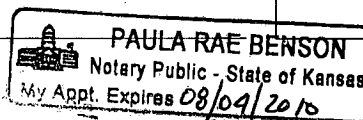
_____ Letter of Confidentiality Received

If Denied, Yes ☐ Date: _____

_____ Wireline Log Received

_____ Geologist Report Received

_____ UIC Distribution



Operator Name: Coffeyville Resources Nitrogen Fertilizers, LLC Lease Name: Coffeyville Resources Well #: CP-3
 Sec. 36 Twp. 34 S. R. 16 ☒ 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)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☐ Yes ☒ No
 (Submit Copy)

List All E. Logs Run:

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

CASING RECORD ☒ New ☐ 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
Plastic Conductor Pipe	14"	8"	NA	25'	NA	NA	100% Bentonite Grout

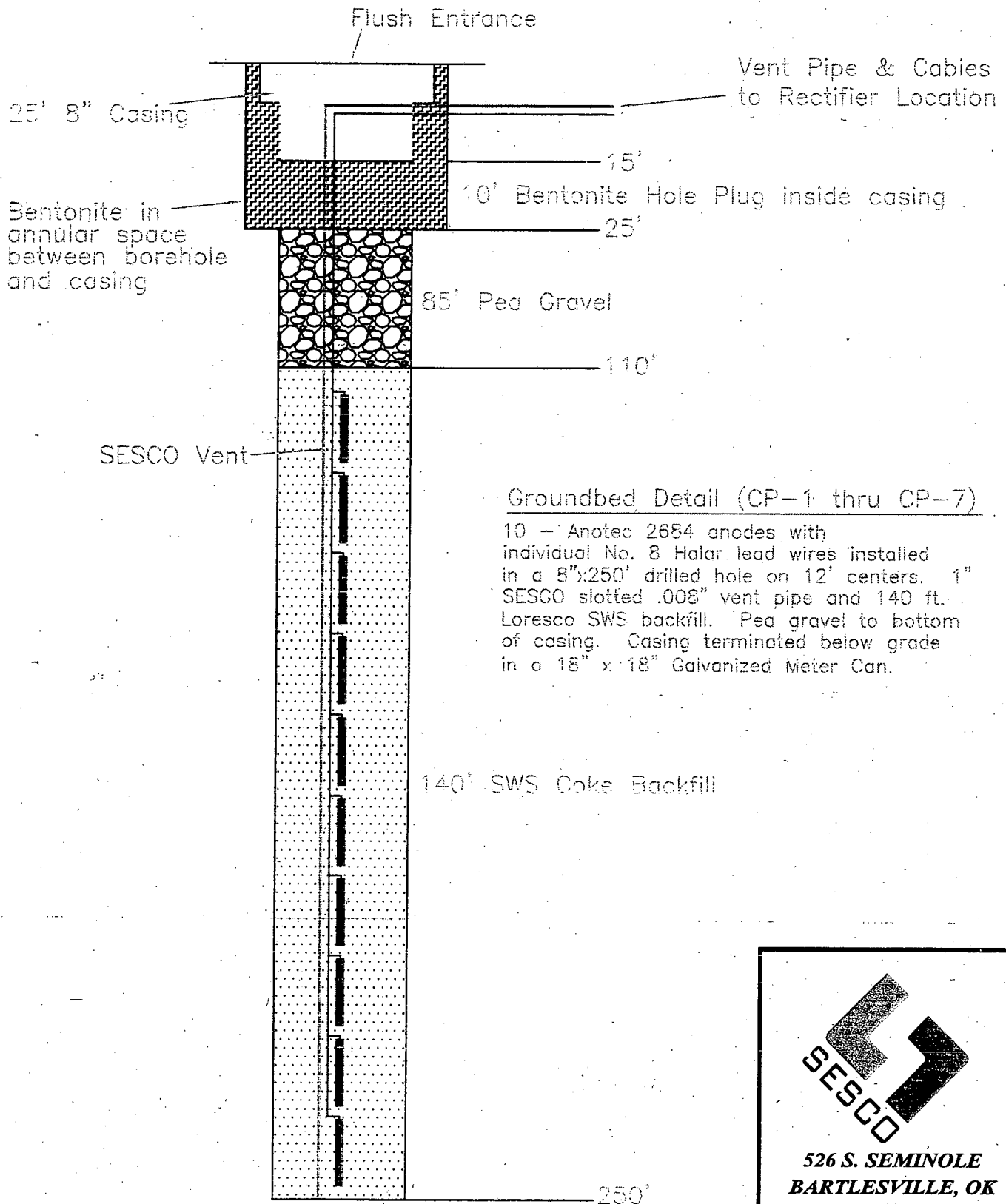
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

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

TUBING RECORD		Size	Set At	Packer At	Liner Run ☐ Yes ☐ No
Date of First, Resumed Production, SWD or Enhr.		Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas	METHOD OF COMPLETION	Production Interval
☐ Vented ☐ Sold ☐ Used on Lease (If vented, Submit ACO-18.)	☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled ☐ Other (Specify) _____	_____

SESCO Deepwell



526 S. SEMINOLE
BARTLESVILLE, OK
74003