

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

RECEIVED
NOV 03 2004
KCC WICHITA

Operator: License # 6433
Name: Paul J. Buck
Address: P.O. Box 68
City/State/Zip: Sedan, KS 67361
Purchaser: Coffeyville Resources
Operator Contact Person: P.J. Buck
Phone: (620) 725-3636
Contractor: Name: Blue Ribbon Drilling Co., LLC
License: 33081
Wellsite Geologist: Thomas H. Oast

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. _____

<u>8-11-04</u>	<u>8-13-04</u>	<u>8-19-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 019-26642-00-00
County: Chautauqua
NW - NE- NW- NW Sec. 34 Twp. 34 S. R. 10 East West
5115 feet from (S) / N (circle one) Line of Section
4400 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW

Lease Name: Buck Well #: 15

Field Name: Elgin Oil & Gas

Producing Formation: Layton

Elevation: Ground: 1043 Kelly Bushing: NA

Total Depth: 1560 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 40 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1545

feet depth to surface w/ 200 sx cmt.

Drilling Fluid Management Plan *Alt II KPR 2/12/08*
(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: [Signature]

Title: operator Date: November 2, 2004

Subscribed and sworn to before me this 2nd day of November

2004

Notary Public: [Signature]

Date Commission Expires: _____

NOTARY PUBLIC, State of Kansas
TIM DOTY
My Appt. Exp. 4-8-2006

KCC Office Use ONLY

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

Operator Name: Paul J. Buck Lease Name: Buck Well #: 15

Sec. 34 Twp. 04 S. 10 East West County: Chautauqua

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

Log Formation (Top), Depth and Datum Sample

Name Top Datum

see attached

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	# Sacjs Used	Type and Percent Additives
surface	10 3/4	8 5/8		40'	portland		
production	6 3/4	4 1/2	9.5#	1545'	50/50 poz	200	

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
2	1123-1127	15% HCL Acid 1000 gal.	1123-1127

TUBING RECORD

Size 2 3/8 Set At 1130' Packer At _____ Liner Run Yes No

Date of First, Resumerd Production, SWD or Enhr. 8-25-04

Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. <u>3</u>	Gas Mcf	Water Bbls. <u>2</u>	Gas-Oil Ratio	Gravity
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Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify)

(If vented, Sumit ACO-18.)

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 1672
 LOCATION Bartlesville
 FOREMAN Tracy L. Williams

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-16-04	1430	Buck #15	27	34S	10E	Chautauque
CUSTOMER P.J. Buck						
MAILING ADDRESS						
CITY		STATE	ZIP CODE			

TRUCK #	DRIVER	TRUCK #	DRIVER
418	Tim		
391	Jason B		
403	Tom		
428	Kirk		

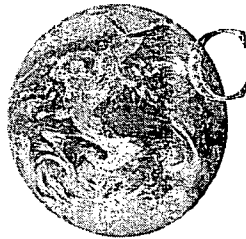
JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH 1560 CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 1545 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL 1,328 WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 24.5 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Washed down joint + ran 25sk of gel with some hulls. lost circulation + pumped 110 bbl of water before circulation returned. Rigged up to cement + waited for more water. Pumped water until got circulation again (25 bbl). Ran 200sk of 50/50 pozmix with 5# gilsonite + 2% salt + 1/4" Flo. Shut down + washed up behind plug. Pumped plug to bottom + set shoe. Shut in.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Production Casing		710.00
5406	50	MILEAGE		112.50
5402	1545			231.75
1105	1sk	Cottonseed Hulls		13.60
1107	25sk	Flo Seal		80.00
1110	205sk	Gilsonite		407.00
1111	500#	Granulated Salt		130.00
1118	6sk	Premium Gel		74.40
1123	2500gal	City Water		86.25
1124	200sk	50/50 pozmix		130.00
4404	1	4 1/2" Rubber Plug		35.00
5501C	4 hrs	Transport		336.00
5502C	4 hrs	80 Vac		312.00
5407	min	Ton Mileage		225.00
			6.3%	SALES TAX 138.99
				ESTIMATED TOTAL 4277.49

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AUTHORIZATION _____ TITLE 192112 DATE _____



**CONSOLIDATED
OIL WELL
SERVICES, INC.**
AN INFINITY COMPANY

211 W. 14th, P.O. Box 884 Chanute, KS 66720 • 620/431-9210 • 1-800/467-8678

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INVOICE DATE	INVOICE NO.
08/17/04	00192112

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BUCK, P. J.
111 W. MAIN
P.O. BOX 68
SEDAN KS 67361

CONSOLIDATED OIL WELL SERVICES
3387 BALDWIN CIRCLE
CHICAGO IL 60674

PD

TERMS: Net 30 Days
A Finance Charge computed at 1%
per month (annual percentage rate of
12%) will be added to balances over
30 days.

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ACCOUNT NO.	P.O. NO.	LOCATION	LEASE AND WELL NO.	DATE OF JOB	JOB TICKET NO.		
1430	0302	40	BUCK-15	08/16/2004	1672		
ITEM NUMBER			DESCRIPTION	UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE
5401			CEMENT PUMPER	1.0000	710.0000	EA	710.00
5406			MILEAGE CHARGE	50.0000	2.3500	EA	117.50
5402			CASING FOOTAGE	1545.0000	.1500	EA	231.75
1105			COTTONSEED HULLS	1.0000	13.6000	SK	13.60
1107			FLO-SEAL (25#)	2.0000	40.0000	SK	80.00
1110			GILSONITE (50#)	20.0000	20.3500	SK	407.00
1111			GRANULATED SALT (80#)	500.0000	.2600	LB	130.00
1118			PREMIUM GEL	6.0000	12.4000	SK	74.40
1123			CITY WATER	7.5000	11.5000	EA	86.25
1124			50/50 POZ CEMENT MIX	200.0000	6.9000	SK	1380.00
4404			4 1/2" RUBBER PLUG	1.0000	35.0000	EA	35.00
5501C			WATER TRANSPORT (CEMENT)	4.0000	84.0000	HR	336.00
5502C			80 VACUUM TRUCK (CEMENT)	4.0000	78.0000	HR	312.00

(continued on next page)

GROSS INVOICE	TAX	
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ORIGINAL INVOICE

PLEASE PAY