

Handwritten signature/initials

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33335

Name: IA Operating, Inc.

Address 1: 9915 W. 21st Street, Ste B

Address 2: _____

City: Wichita State: KS Zip: 67205 + _____

Contact Person: Hal Porter

Phone: (316) 721-0036

CONTRACTOR: License # 30606

Name: Murfin Drilling Co., Inc.

Wellsite Geologist: Randall Kilian

Purchaser: Coffeyville Resources

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil SWD SIOW
- Gas ENHR SIGW
- CM (Coal Bed Methane) Temp. Abd.
- 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. Conv. to SWD

Plug Back: _____ Plug Back Total Depth _____

Commingled Docket No.: _____

Dual Completion Docket No.: _____

Other (SWD or Enhr.?) Docket No.: _____

9/17/08 9/24/08 1/02/09

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 167-23490-0000

Spot Description: _____

NE SW NE Sec. 30 Twp. 11 S. R. 15 East West

1740 Feet from North / South Line of Section

1780 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Russell

Lease Name: Schmitt Well #: 30-1

Field Name: Wildcat

Producing Formation: Cong. Sand and LKC

Elevation: Ground: 1737' Kelly Bushing: 1742'

Total Depth: 3400 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 913 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 Air I Nur 3-9-09
(Data must be collected from the Reserve Pit)

Chloride content: 91,000 ppm Fluid volume: 800 bbls

Dewatering method used: Evaporation/Backfill

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: Robert DeLuan

Title: Vice President Date: 1-20-09

Subscribed and sworn to before me this 20 day of January

20 09

Notary Public: Julie Burrows

Date Commission Expires: March 10, 2009

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: 2/25/09

Wireline Log Received

Geologist Report Received

WIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION

JULIE BURROWS
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 3-10-09

JAN 22 2009

CONSERVATION DIVISION
WICHITA, KS

For follow up on 2/24/09 KCM

Operator Name: IA Operating, Inc. Lease Name: Schmitt Well #: 30-1
 Sec. 30 Twp. 11 S. R. 15 East West County: Russell

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:
**Geologist's Well Report, Compensated
 Density/Neutron Log, Dual Induction Log, Micro Log**

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Anhydrite	908	+834
Topeka	2683	-941
Heebner Shale	2932	-1190
Toronto	2953	-1211
Lansing	2980	-1238
Cong. Sh	3318	-1576
Total Depth	3398	1656

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 / 14"	8 5/8"	23#	913	Common	425	3% CC, 2% gel
Production	7 7/8"	5 1/2"	15.5#	3399	Common	150	10% salt, 2% gel, WFR-2 500 gal

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate				
<input checked="" 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	3296-3300	250 gal 15% MCA, retreat w 500 gal 15% MCA	
4	3192-96, 3145-48	250 gal 15% MCA, retreat w 500 gal 15% MCA	
4	3054-58	250 gal 15% MCA, retreat w 500 gal 15% MCA	

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>3325</u> Packer At:		Liner Run: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First Resumed Production, SWD or Enhr. <u>11/22/08</u> <u>1/22/09</u>	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>48</u>	Gas Mcf <u>5</u> Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: RECEIVED KANSAS CORPORATION COMMISSION
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IA Operating, Inc.
9915 W. 21st Street North, Ste B
Wichita KS 67205

Email: Hal.porter@imperialamericanoil.com

Phone: 316-721-0036 (office)
Hal's Cell: 316-841-1312

Fax: 316-721-0047
Toll Free: 866-892-0036 (rings at office)

January 20, 2009

Kansas Corporation Commission
Conservation Division
130 South Market #2078
Wichita, KS 67212

Re: Schmitt 30-1
API: 15-167-23490-0000
Confidentiality Letter

Gentlemen:

We enclose ACO-1 on the subject well, along with attachments.

We hereby request that all data allowed by statute and regulations be kept confidential for the period allowed under the Rules and Regulations.

Very truly yours,

IA Operating, Inc.



Bob Swann
Vice President

RECEIVED
KANSAS CORPORATION COMMISSION

JAN 22 2009

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 34575

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT
Russell

DATE <u>9-18-08</u>	SEC. <u>30</u>	TWP. <u>11</u>	RANGE <u>15</u>	CALLED OUT	ON LOCATION	JOB START <u>4:00 p.m.</u>	JOB FINISH <u>5:00 p.m.</u>
LEASE <u>Schnitt</u>		WELL # <u>30-1</u>	LOCATION <u>Fairport Stop Sign 1 N</u>		COUNTY <u>Russell</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>E into</u>				

CONTRACTOR Martin 16

TYPE OF JOB Surface

HOLE SIZE _____ T.D. 9'14"

CASING SIZE 8 5/8 23# DEPTH 9'13"

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 11.5'

CEMENT LEFT IN CSG. 11.5'

PERFS. _____

DISPLACEMENT 57'48"

EQUIPMENT

PUMP TRUCK CEMENTER Craig

366 HELPER Matt

BULK TRUCK

423 DRIVER Doug

BULK TRUCK

_____ DRIVER _____

REMARKS:

Baffle Plat set @ ~~80~~ 90' - 50

Cement Circulated!

Thanks!

CHARGE TO: J.A. Operating

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME AFD

SIGNATURE Amy Ibel

OWNER _____

CEMENT

AMOUNT ORDERED 425 Com 30% cc 2% o/gel

COMMON	<u>425</u>	@	<u>13.50</u>	<u>5737.50</u>
POZMIX		@		
GEL	<u>8</u>	@	<u>20.25</u>	<u>162.00</u>
CHLORIDE	<u>15</u>	@	<u>51.50</u>	<u>772.50</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>448</u>	@	<u>2.25</u>	<u>1,008.00</u>
MILEAGE	<u>110/sk/mile</u>			<u>448.00</u>
TOTAL				<u>8,128.00</u>

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 991.00

EXTRA FOOTAGE 614 @ 1.75 460.50

MILEAGE 10 @ 7.50 75.00

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 1,526.50

PLUG & FLOAT EQUIPMENT

1 8 5/8 Baffle Plate 148.00

1 solid Rubber Plug @ 110.00

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL 258.00

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 22 2009
CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 35007

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell

DATE <u>9-24-08</u>	SEC. <u>30</u>	TWP. <u>11</u>	RANGE <u>15</u>	CALLED OUT	ON LOCATION	JOB START <u>5:30 a.m.</u>	JOB FINISH <u>6:30 a.m.</u>
LEASE <u>Schmit</u>		WELL # <u>30-1</u>	LOCATION <u>Fairport West to Stop Sign</u>		COUNTY <u>Russell</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>			<u>1/11 Einto</u>				

CONTRACTOR Martin 16

TYPE OF JOB Production String

HOLE SIZE _____ T.D. 3400

CASING SIZE 5 1/2 15.5# DEPTH 3399

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 19.45

CEMENT LEFT IN CSG. 19.45

PERFS. _____

DISPLACEMENT 80 1/2 BL

EQUIPMENT _____

PUMP TRUCK # 417 CEMENTER Craig
HELPER Matt

BULK TRUCK # 378 DRIVER Mike / Chad

BULK TRUCK # _____ DRIVER _____

OWNER _____

CEMENT AMOUNT ORDERED 180 com 10% Salt 2% Gel 500 gal WFR-2

COMMON <u>180</u>	@ <u>13.50</u>	<u>2430.00</u>
POZMIX _____	@ _____	_____
GEL <u>3</u>	@ <u>20.25</u>	<u>60.75</u>
CHLORIDE _____	@ _____	_____
ASC _____	@ _____	_____
<u>Salt 17</u>	@ <u>21.25</u>	<u>361.25</u>
<u>WFR2 500</u>	@ <u>1.10</u>	<u>550.00</u>
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
HANDLING <u>200</u>	@ <u>2.25</u>	<u>450.00</u>
MILEAGE <u>SR/mi/10</u>	_____	<u>300.00</u>
TOTAL		<u>4152.00</u>

REMARKS:

Insert set @ 3379.
Rathole 30.5k.
Plug landed 1500psi.
Float held!

Thanks!

CHARGE TO: I.A. Operating

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 1957.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 15 @ 7.50 112.50

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 2069.50

PLUG & FLOAT EQUIPMENT

<u>1 5/2 Float shoe Blue</u>	_____	<u>515.00</u>
<u>20 Searchers</u>	@ <u>71.00</u>	<u>1420.00</u>
<u>1 Latch down Assembly</u>	@ _____	<u>449.00</u>
<u>6 Centralizers</u>	@ <u>55.00</u>	<u>330.00</u>
_____	@ _____	_____
_____	@ _____	_____
TOTAL		<u>2714.00</u>

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME _____

SIGNATURE [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

RECEIVED
KANSAS CORPORATION COMMISSION

JAN 22 2009

CONSERVATION DIVISION
WICHITA, KS