

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

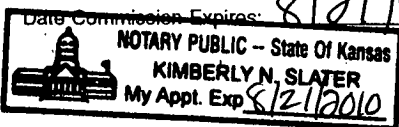
Operator: License # 32705
Name: Raney Oil Company, LLC
Address: 3425 Tam O'Shanter Dr.
City/State/Zip: Lawrence, KS 66047
Purchaser: Coffeyville Resources
Operator Contact Person: Thomas Raney
Phone: (785) 749-0672
Contractor: Name: TR Services
License: 33346
Wellsite Geologist: Duane Stecklein
Designate 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: J. B. Collins
Well Name: Miller #9
Original Comp. Date: 7/84 Original Total Depth: 3905
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back 3870 Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
12/26/06 12/27/06 1/3/07
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - ~~065-04678-00~~ 01004-00-02
County: Graham
SE SW SW Sec. 3 Twp. 10 S. R. 21 East West
330 feet from (S) N (circle one) Line of Section
4290 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Miller Well #: 9
Field Name: Cooper
Producing Formation: Arbuckle
Elevation: Ground: 2237 Kelly Bushing: 2242
Total Depth: 3905 Plug Back Total Depth: 3870
Amount of Surface Pipe Set and Cemented at 200 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 cml.
Drilling Fluid Management Plan WD NH 6 19-08
(Data must be collected from the Reserve Pit)
Chloride content 5000 ppm Fluid volume 250 bbls
Dewatering method used let dry
Location of fluid disposal if hauled offsite:
Operator Name: n/a
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: member Raney O.I., LLC
Title: member Date: 1.4.07
Subscribed and sworn to before me this 4th day of Jan
2007
Notary Public: Kimberly N Slater
8/21/2010



KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 08 2007
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Raney Oil Company, LLC Lease Name: Miller Well #: 9
 Sec. 3 Twp. 10 S. R. 21 East West County: Graham

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heeb</td> <td>3440</td> <td>-1198</td> </tr> <tr> <td>LKC</td> <td>3480</td> <td>-1238</td> </tr> <tr> <td>Cong</td> <td>3755</td> <td>-1513</td> </tr> <tr> <td>Arb</td> <td>3807</td> <td>-1565</td> </tr> <tr> <td>TD</td> <td>3905</td> <td>-1663</td> </tr> </table>	Name	Top	Datum	Heeb	3440	-1198	LKC	3480	-1238	Cong	3755	-1513	Arb	3807	-1565	TD	3905	-1663
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CASING RECORD <input 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
Surf		8 5/8		200	Comm	175	
Prod		5 1/2		3905	Comm	150	
Liner		4 1/2		3816	Comm	225	

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				N/A

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
4	3812-3818		
4	3824-3830		

TUBING RECORD	Size 2 3/8	Set At	Packer At	Liner Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 1/07		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil Bbls. 20	Gas Mcf	Water Bbls. 200	Gas-Oil Ratio Gravity

Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other <i>(Specify)</i>	Production Interval
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RECEIVED
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JAN 08 2007
 CONSERVATION DIVISION
 WICHITA, KS