

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32933
Name: Todd Miller dba Speedy Well Service
Address 1: 402 West Elm
Address 2: _____
City: Sedan State: Ks Zip: 67361 + _____
Contact Person: Todd Miller
Phone: (620) 725-3631
CONTRACTOR: License # na
Name: na
Wellsite Geologist: na
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 convert to producer
(Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:
Operator: MB Oil
Well Name: Jontra #1
Original Comp. Date: 5/7/79 Original Total Depth: 2013
____ 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.: E-20,965
10/1/07 replaced tubing 10/2/07
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 049-20620-000102
Spot Description: _____
~~SE~~ ~~SW~~ ~~SW~~ ~~SW~~ Sec. 26 Twp. 31 S. R. 10 East West
271 990 Feet from North / South Line of Section
4636 4290 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner: *per oper KCC-Dig*
 NE NW SE SW

County: Elk
Lease Name: Jontra Well #: 1
Field Name: Webb
Producing Formation: Mississippi
Elevation: Ground: 1095 Kelly Bushing: na
Total Depth: 2013 Plug Back Total Depth: 2012
Amount of Surface Pipe Set and Cemented at: _____ Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: na Feet
If Alternate II completion, cement circulated from: na
feet depth to: na w/ na ^{sx cmt} wo-Dig-5/13/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: na ppm Fluid volume: na bbls
Dewatering method used: na
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: Tom D. Nordell, Agent
Title: Agent Date: 5/11/09
Subscribed and sworn to before me this 11th day of May, 2009.
Notary Public: Sondra Nordell
Date Commission Expires: November 24, 2011

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

SONDRA NORDELL
Notary Public - State of Kansas
My Appt. Expires 11-24-11

KANSAS CORPORATION COMMISSION

MAY 13 2009
RECEIVED

Operator Name: Todd Miller dba Speedy Well Service Lease Name: Jontra Well #: 1
 Sec. 26 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: <p style="margin-left: 20px;">none</p>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Mississippi</td> <td>1980</td> <td>+15</td> </tr> </table>	Name	Top	Datum	Mississippi	1980	+15
Name	Top	Datum					
Mississippi	1980	+15					

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
Surface		12 1/2		200'	portland	40	
Production		4 1/2		2012'	portland	125	
	we did not	run any pipe	we replaced	tubing and	started	producing.	

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				
	we did not	perforate or cement	we replaced	tubing and started producing.

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
2	perf 1982 to 1988	none	na

TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>1800'</u> Packer At: <u>none</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>10/3/07</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>3</u>	Gas Mcf <u>none</u>	Water Bbls. <u>100</u> Gas-Oil Ratio <u>3%</u> Gravity <u>30</u>

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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