

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 # 33429
Name: ELDEN AMBROSIER
Address: RR 3 BOX 68
City/State/Zip: NORTON KS 67654-3082
Purchaser: COFFEYVILLE RESOURCES
Operator Contact Person: ELDEN AMBROSIER
Phone: (785) 877-3082
Contractor: Name: WARREN DRILLING LLC
License: 33724

Wellsite Geologist: MARK TORR
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. _____

11-14-2007	11-19-2007	12-26-07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23374-00-00
County: GRAHAM
NE NE Sec. 19 Twp. 8 S. R. 22 East West
610 feet from S / N (circle one) Line of Section
550 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: AMBROSIER Well #: 3
Field Name: _____

Producing Formation: LANSING KANSAS CITY
Elevation: Ground: 2111 Kelly Bushing: _____
Total Depth: 3700 Plug Back Total Depth: 1751
Amount of Surface Pipe Set and Cemented at 224 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1751
feet depth to 0 w/ 400 sx cmt.

Drilling Fluid Management Plan
(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.: _____

ALT 2 - Dlg - 6/19/08

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 this 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: Elden Ambrosier
Title: OPERATOR Date: 03-28-08
Subscribed and sworn to before me this 29th day of March,
2008.
Notary Public: Rita A. Anderson
Date Commission Expires: January 21, 2012

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____ **RECEIVED**
 Wireline Log Received **KANSAS CORPORATION COMMISSION**
 Geologist Report Received **MAR 31 2008**
 UIC Distribution

**CONSERVATION DIVISION
WICHITA, KS**

RITA A. ANDERSON
NOTARY PUBLIC
STATE OF KANSAS
My App. Exp. 1-21-12



Operator Name: ELDEN AMBROSIER Lease Name: AMBROSIER Well #: 3
 Sec. 19 Twp. 8 S. R. 22 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 checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: DUAL INDUCTION LOG COMPENSATED DENSITY/NEUTRON MICRO LOG	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input 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>ANHYDRITE TOP</td> <td>1742</td> <td>+ 377</td> </tr> <tr> <td>ANHYDRITE - BASE</td> <td>1775</td> <td>+ 344</td> </tr> <tr> <td>HEEBNER</td> <td>3330</td> <td>-1211</td> </tr> <tr> <td>TORONTO</td> <td>3353</td> <td>-1234</td> </tr> <tr> <td>LANSING-KC</td> <td>3369</td> <td>-1250</td> </tr> <tr> <td>BASE KANSAS CITY</td> <td>3584</td> <td>-1465</td> </tr> <tr> <td>LTD</td> <td>3696</td> <td>-1577</td> </tr> <tr> <td>RTD</td> <td>3700</td> <td>-1581</td> </tr> </table>	Name	Top	Datum	ANHYDRITE TOP	1742	+ 377	ANHYDRITE - BASE	1775	+ 344	HEEBNER	3330	-1211	TORONTO	3353	-1234	LANSING-KC	3369	-1250	BASE KANSAS CITY	3584	-1465	LTD	3696	-1577	RTD	3700	-1581
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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 1/4"	8 5/8"	20	229	COM	160	3% CC; 2% GEL
PRODUCTION	7 7/8"	5 1/2"	6.5	3962	ASC	150	10% SALT, 500 GAL WFR-2

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
4	3400' - 3405'	500 GAL 15% MGA	3405

TUBING RECORD		Size <u>2 7/8</u>	Set At <u>3670</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <u>12-26-07</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>60</u>	Gas Mcf <u>0</u>	Water Bbls. <u>80</u>	Gas-Oil Ratio	Gravity

Disposition of Gas <input checked="" 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 (Specify) _____	Production Interval
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RECEIVED
KANSAS CORPORATION COMMISSION

MAR 31 2008



ALLIED

CEMENTING CO., LLC
Cementing & Acidizing Services

#7 - 442

INVOICE

24 S. Lincoln Street
P.O. Box 31
Russell, KS 67665-2906
Voice: (785) 483-3887
Fax: (785) 483-5566

#7
ok # 442

Invoice Number: 111298
Invoice Date: Nov 20, 2007
Page: 1

Bill To:
Elden Ambrosier
RR 3 Box 68
Norton, KS 67654-0068

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Ambro	Ambrosier #3	Net 30-Days	
Sales Rep ID	Camp Location	Service Date	Due Date
	Russell	Nov 20, 2007	12/20/07

Quantity	Item	Description	Unit Price	Amount
160.00	MAT	Common Class A	11.10	1,776.00
3.00	MAT	Gel	16.65	49.95
5.00	MAT	Chloride	46.60	233.00
168.00	SER	Handling	1.90	319.20
70.00	SER	Mileage 168 sx @.09 per sk per mi	15.12	1,058.40
1.00	SER	Surface	815.00	815.00
70.00	SER	Mileage Pump Truck	6.00	420.00
1.00	EQP	Wooden Plug	60.00	60.00

(Signature)
12-11-07
442

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 473.15

ONLY IF PAID ON OR BEFORE

Dec 20, 2007

Subtotal	4,731.
Sales Tax	117.
Total Invoice Amount	4,849
Payment/Credit Applied	- 473
TOTAL	4,849

RECEIVED
KANSAS CORPORATION COMMISSION

MAR 31 2008

CONSERVATION DIVISION
WICHITA, KS

4376



24 S. Lincoln Street
 P.O. Box 31
 Russell, KS 67665-2906
 Voice: (785) 483-3887
 Fax: (785) 483-5566

INVOICE

Invoice Number: 111360
 Invoice Date: Nov 27, 2007
 Page: 1

Bill To:

Elden Ambrosier
 RR 3 Box 68
 Norton, KS 67654-0068

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Ambro	E.Ambrosier #3	Net 30 Days	
Sales Rep ID	Camp Location	Service Date	Due Date
	Russell	Nov 27, 2007	12/27/07

Quantity	Item	Description	Unit Price	Amount
150.00	MAT	ASC Class A	13.75	2,062.50
14.00	MAT	Salt	19.20	268.80
500.00	MAT	WFR-2	1.00	500.00
164.00	SER	Handling	1.90	311.60
70.00	SER	Mileage 164 sx @.09 per sk per mi	14.76	1,033.20
1.00	SER	Production String - Bottom Stage	1,610.00	1,610.00
70.00	SER	Mileage Pump truck	6.00	420.00
1.00	EQP	Float Shoe	470.00	470.00
7.00	EQP	Centralizers	50.00	350.00
1.00	EQP	Basket	165.00	165.00
1.00	EQP	2-Stage Tool	4,000.00	4,000.00
1.00	EQP	Latch Down Plug Assembly	410.00	410.00

ALL PRICES ARE NET, PAYABLE
 30 DAYS FOLLOWING DATE OF
 INVOICE. 1 1/2% CHARGED
 THEREAFTER. IF ACCOUNT IS
 CURRENT, TAKE DISCOUNT OF

\$ 1160.11

ONLY IF PAID ON OR BEFORE

Dec. 27, 2007

Subtotal	11,601.10
Sales Tax	456.56
Total Invoice Amount	12,057.66
Payment/Credit Applied	
TOTAL	12,057.66

RECEIVED
 KANSAS CORPORATION COMMISSION

MAR 31 2008

CONSERVATION DIVISION
 WICHITA, KS

1160.11
 10,897.



ALLIED

CEMENTING CO., LLC
Cementing & Acidizing Services

24 S. Lincoln Street
P.O. Box 31
Russell, KS 67665-2906
Voice: (785) 483-3887
Fax: (785) 483-5566

INVOICE

Invoice Number: 111361
Invoice Date: Nov 27, 2007
Page: 1

PR 12-17-07
OK# 452

Bill To:

Elden Ambrosier
RR 3 Box 68
Norton, KS 67654-0068

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Ambro	E.Ambrosier #3	Net 30 Days	
Sales Rep ID	Camp Location	Service Date	Due Date
	Russell	Nov 27, 2007	12/27/07

Quantity	Item	Description	Unit Price	Amount
240.00	MAT	Common Class A	11.10	2,664.00
160.00	MAT	Pozmix	6.20	992.00
20.00	MAT	Gel	16.65	333.00
100.00	MAT	Flo Seal	2.00	200.00
420.00	SER	Handling	1.90	798.00
70.00	SER	Mileage 420 sx @.09 per sk per mi	37.80	2,646.00
1.00	SER	Production String - Top Stage	955.00	955.00

PR

\$18,859.24
due # 2018.91

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

Subtotal	8,588.00
Sales Tax	232.49
Total Invoice Amount	8,820.49
Payment/Credit Applied	
TOTAL	8,820.49

\$ 858.80

ONLY IF PAID ON OR BEFORE

Dec 27, 2007

RECEIVED
KANSAS CORPORATION COMMISSION

MAR 31 2008

CONSERVATION DIVISION
WICHITA, KS

855.80
7961.69