

~~X~~ AMENDED 4-8-09 KANSAS CORPORATION COMMISSION
TO REPORT PRODUCTION OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34027
Name: CEP Mid-Continent LLC
Address 1: 15 West Sixth Street, Suite 1400
Address 2: _____
City: Tulsa State: OK Zip: 74119 + 5415
Contact Person: David F. Spitz, Engineering Manager
Phone: (918) 877-2912, ext. 309
CONTRACTOR: License # 34126 / 33821 33832
Name: Smith Oilfield Svcs. (to KOP) / Pense Bros. Drlg. (horizontal portion)
Wellsite Geologist: Rodney Tate
Purchaser: CEP Mid-Continent LLC
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 Dry Other Well drilled but not yet completed.
(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.: 108-CONS-184-CHOR
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: _____
8-1-08 8-6-08 11/18/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 125-31707-01-00
Spot Description: _____
SW NW SW Sec. 32 Twp. 32 S. R. 17 East West
1,377 Feet from North / South Line of Section
406 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Montgomery
Lease Name: KNISLEY Well #: 32-5
Field Name: Coffeyville-Cherryvale
Producing Formation: Weir-Pitt
Elevation: Ground: 808' Kelly Bushing: _____
Total Depth: 2,670' Plug Back Total Depth: 2,586'
Amount of Surface Pipe Set and Cemented at: 62' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 820'
feet depth to: surface w/ 106 sx cmt.

Drilling Fluid Management Plan AH II NUR 5-18-09
(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.: _____

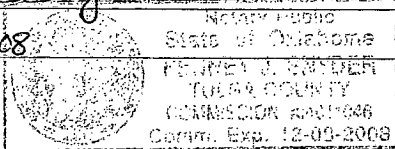
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Engineering Manager Date: 11-24-08

Subscribed and sworn to before me this 24th day of November
20 08

Notary Public: [Signature]
Date Commission Expires: 12-8-08



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

RECEIVED
APR 21 2009

mailed 11-25-08 KCC WICHITA

Operator Name: CEP Mid-Continent LLC Lease Name: KNISLEY Well #: 32-5
 Sec. 32 Twp. 32 S. R. 17 East West County: Montgomery

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Oswego	506'	302'
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mulky Shale	575'	233'
List All E. Logs Run:		Weir-Pitt	797'	11'
Comp. Neutron Pel Density, DIR, GR, CBL		Bartlesville	843'	-35'
CCL, VDL		Rowe	948'	-140'
		Riverton	1,009'	-201'
		Mississippi Chat	1,020'	-212'

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	11"	8-5/8"	20#	62'	Portland	5	Neat
Production	6-3/4"	4-1/2"	10.5#	915'	Class "A"	100	1000# Kol-seal, 300# salt 400#
Perf. Casing		3-1/2"	9.3#	2,586'			Bentonite gel, 80# phenoseal

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
	(None)		

TUBING RECORD:	Size: <u>2-3/8"</u>	Set At: <u>760.49'</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	<u>12-16-08</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 <u>0</u> Bbls.	Gas <u>144</u> Mcf	Water <u>86</u> Bbls.	Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 checked="" type="checkbox"/> Other (Specify) <u>HORIZONTAL</u>	PRODUCTION INTERVAL: _____ _____
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