

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 32851
Name: L & G Petroleum Operating LLC
Address: 1396 So. Dakota Rd
City/State/Zip: Iola, KS 66749
Purchaser: Coffeyville Resources
Operator Contact Person: Randy Stanley
Phone: (620) 365-7435
Contractor: Name: NA
License: _____

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Wellsite Geologist: _____
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: Carmel Energy Inc.
Well Name: West Riggs 70B

Original Comp. Date: 10/14/84 Original Total Depth: 928.1
 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. _____

10/12/1984 1 10-14-84
Spud Date of Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 001 27020 -00-02
County: Allen
____ NE Sec. 9 Twp. 24 S. R. 18 East West
5033 feet from (S) N (circle one) Line of Section
660 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: West Riggs Well #: 70B

Field Name: Carlyle
Producing Formation: Bartlesville
Elevation: Ground: 999.6 Kelly Bushing: _____
Total Depth: 928.1 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20 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/ _____ ^{sq cmt.}
wo-Dlg-10/1/09

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.: _____

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: Randy Peters
Title: Assistant Manager Date: Nov. 9, 2005
Subscribed and sworn to before me this 9th day of November,
2005.
Notary Public: Leslie D. Littlepage
Date Commission Expires: 2-15-09

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
No Cement Tics - Did not reenter
Kept as prod.

NOTARY PUBLIC - State of Kansas
LESLIE D. LITTLEPAGE
My Appt. Expires 2-15-09

Operator Name: L & G Petroleum Operating LLC Lease Name: West Riggs Well #: 70B
 Sec. 9 Twp. 24 S. R. 18 East West County: Allen

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Bartlesville 908-933
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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
Surface	13	8 5/8	28#	20 ft	A	7	
Production Casing	6.75	4 1/2	9.5#	897.3 ft	A	150	2% gel

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
	Open Hole		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
	2 3/8" Guide 1" Prod	875'		
Date of First, Resumerd Production, SWD or Enhr.		Producing Method		
11/8/84		<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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

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

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TYPE AFFIDAVIT OF COMPLETION FORM **ACO-1 WELL HISTORY**
SIDE ONE **Compt.** _____

(Rules 82-3-130 and 82-3-107) **DOGKET NO.** NP _____
This form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ninety (90) days after the completion of a well, regardless of how the well was completed.

FOR INFORMATION REGARDING THE NUMBER OF COPIES TO BE FILED AND APPLICATIONS REQUIRING COPIES OF ACO-1 FORMS SEE PAGE TWO (2), SIDE TWO (2) OF THIS FORM.
F _____ Letter requesting confidentiality attached.

C _____ Attach ONE COPY of EACH wireline log run (i.e. electrical log, sonic log, gamma ray neutron log etc.)***Check here if NO logs were run _____ y_____

PLEASE FILL IN ALL INFORMATION. IF NOT AVAILABLE, INDICATE. IF INFORMATION LATER BECOMES AVAILABLE, SUBMIT BY LETTER.

LICENSE # 7969 **- EXPIRATION DATE** 7 Of 1985
OPERATOR Carmel Energy Inc. **API NO.** 15-001-27020
ADDRESS Box 125 **COUNTY** Allen
Iola, Kansas 66749 **FIELD** Carlyle Pool
**** CONTACT PERSON** Bill Sailor **PROD. FORMATION** Bartlesville
PHONE 316-365-6049 **Indicate if new pay.** _____
PURCHASER Eureka Crude Purchasing **LEASE** West Riggs
ADDRESS Box 190 **WELL NO.** 70B
Eureka, Kansas 67045 **WELL LOCATION** _____
DRILLING CONTRACTOR K-II Enterprises **247 Ft. from North Line and**
ADDRESS Box 72 **660 Ft. from East Line of (E)**
Piqua, Kansas 66761 **the NE (Qtr.) SEC 9 TWP 24 RGE 10 (N)**

PLUGGING CONTRACTOR None
ADDRESS _____

WELL PLAT (Office Use Only)

			X

KCC
KGS
SWD/REP _____
PLG. _____
NGPA _____

TOTAL DEPTH 928.1' **PRTD** Same
SPUD DATE 10/12/84 **DATE COMPLETED** 10/14/84
ELEV: GR 999.6 **DF** _____ **KB** _____

DRILLED WITH (SANDER) (ROTARY) (AIR) TOOLS.
DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE OPM 1784
Amount of surface pipe set and cemented 20' **DV Tool Used?** None.

TYPE OF COMPLETION THIS AFFIDAVIT APPLIES TO: (Circle ONE) - (Oil) Shut-in Gas, Gas, Dry, Disposal, Injection, Temporarily Abandoned. IF OWWO, indicate type of re-completion _____ Other completion _____ NGPA filing _____

ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATIONS PROMULGATED TO REGULATE THE OIL AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH.

A F F I D A V I T

William E. Sailor, being of lawful age, hereby certifies that:
I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct.

William E. Sailor
(Name)

SUBSCRIBED AND SWORN TO BEFORE ME this 26th day of November, 1984.

LINDA C. TROXEL
Notary Public
State of Kansas

Linda C. Troxel
(NOTARY PUBLIC)
Linda C. Troxel

MY COMMISSION EXPIRES: July 1st, 1986. **STATE COMPLETION COMMISSION APPOINTMENT**

** The person who can be reached by phone regarding any questions concerning this information.

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ACO-1 Well History

Side TWO

(E)

OPERATOR Carmel Energy Inc. LEASE NAME West Riggs SEC 9 TWP 24 RGE 18
 WELL NO 70B

FILL IN WELL INFORMATION AS REQUIRED:

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

Show Geological markers, logs run, or other Descriptive information.

Formation description, contents, etc.	Top	Bottom	Name	Depth
X Check if no Drill Stem Tests Run. Check if samples sent Geological Survey.	0	5	Soil & Clay	
	5	33	Lime	
	33	98	Shale	
	98	145	Lime	
	145	232	Shale	
	232	347	Lime	
	347	518	Shale	
	518	540	Lime w/ Shale	
	540	551	Lime	
	551	611	Shale	
	611	645	Lime	
	645	658	Shale	
	658	694	Lime	
	694	700	Shale	
	700	704	Lime	
	704	709	Shale	
709	714	Sandy/Shale		
714	908	Shale		
	908	933.6	Sand/Lime Stks.	

If additional space is needed use Page 2

Report of all strings set — surface, intermediate, production, etc. **CASING RECORD (New) or (Used)**

Purpose of string	Size hole drilled	Size casing in" (in O.D.)	Weight lb./ft.	Setting depth	Type cement	Sacks	Type and percent additives
Surface	13"	8 5/8"	28	20	Class A	7	-----
Erod. Casing	6 3/4"	4 1/2"	9.5	897.3	Class A	150	2% Gel

LINER RECORD			PERFORATION RECORD		
Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval
None			None		

TUBING RECORD		
Size	Setting depth	Packer set at
2 3/8"	930	None

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
None	

Date of first production	Producing method (Flowing, pumping, gas lift, etc.)	Gravity
11/8/84	Pumping	19.7

Estimated Production - I.P.	Oil	Gas	Water	Gas-oil ratio
bbbl	mcg	mcg	mcg	ccps
1.5	None	None	95%	21

Disposition of gas (vented, used on lease or sold): **None**

Perforations: **None**

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