

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 # 3830
Name: AX&P, Inc.
Address: 20147 CR 200
Neodesha, Ks 66757
City/State/Zip:
Purchaser: Coffeyville Resources
Operator Contact Person: J.J. Hanke
Phone: (620) 325-5212
Contractor: Name: Mokat Drilling (P.W.)
License: 5831
Wellsite Geologist: Mike McClenning

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. _____

4-12-06 4-13-2006 5-30-2006
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 125-30997-00-00
County: Montgomery
SE NW Sec. 24 Twp. 34 S. R. 15x East West
2950 feet from (S) N (circle one) Line of Section
2970 feet from E (NW) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Gillman Well #: W-3
Field Name: Jefferson-Sycamore
Producing Formation: Wayside Sand
Elevation: Ground: 820' Kelly Bushing: _____
Total Depth: 423' 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 419'
feet depth to surface 5-w/ 50 sx cmt.
Alt 2 - Dig - 11-06-08

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: [Signature]
Title: _____ Date: 6/26/06
Subscribed and sworn to before me this 26th day of June
20 06
Notary Public: [Signature]

ELIZABETH A. BILYEU
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 5-18-09

Date Commission Expires: _____

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

RECEIVED
JUN 30 2006
KCC WICHITA

Operator Name: AX&P, Inc. Lease Name: Gillman Well #: W3
 Sec. 24 Twp. 34 S. R. 15 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 <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Damma Raty - Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Wayside 365 Pawne
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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	12"	8 5/8"		20'	port1	2	-0-
Production	6 3/4"	4 1/2"		436'	port1.	50	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
2	Wayside sand	acid / gel frac	387'

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First Resumerd Production, SWD or Enhr. 6/5/06		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. 1	Gas Mcf min	Water Bbls. 25	Gas-Oil Ratio	Gravity 36

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Submit ACO-18.) Other (Specify) _____

CONSOLIDATED OIL WELL SERVICES, INC.
P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 06735
LOCATION BU
FOREMAN Steve Johnson

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE <u>4-20-06</u>	CUSTOMER #	WELL NAME & NUMBER <u>Gillman W-3</u>	SECTION <u>24</u>	TOWNSHIP <u>34S</u>	RANGE <u>15E</u>	COUNTY <u>Mb</u>
CUSTOMER <u>AX: P (ATKOKAN)</u>			TRUCK # <u>418</u>	DRIVER <u>Tim</u>	TRUCK #	DRIVER
MAILING ADDRESS			<u>460</u>	<u>Apki</u>		
CITY	STATE	ZIP CODE	<u>454-791</u>	<u>Richard</u>		

JOB TYPE Long string HOLE SIZE 6 7/8 HOLE DEPTH 423' CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 419' DRILL PIPE TUBING OTHER
 SLURRY WEIGHT SLURRY VOL WATER gal/sk CEMENT LEFT in CASING 0
 DISPLACEMENT DISPLACEMENT PSI MIX PSI RATE 4.2

REMARKS: Ran 2 gal. Followed by 50 ss Cement w/additives.
Washed lines pumped plug to bottom set shoe.

(circulated cement to surface)

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE <u>Long string</u>		800.00
5406	35	MILEAGE		110.25
5407	min	Bulk delivery		275.00
5402	419'	Footage		71.23
5501C	3 hrs.	Transport		294.00
1104S	50 ss	Cement		562.50
1107	20 #	Pheno seal		36.00
1110	250 #	Gilsonite		115.00
1111	150 #	SALT		43.50
1118B	300 #	GEL		42.00
1127	3000 gals.	city water		38.40
1404	1	4 1/2 Rubber Plug		40.00
		RECEIVED		62
		JUN 30 2006	SALES TAX	46.50
			ESTIMATED TOTAL	2474.40

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