

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

OPERATOR: License # 33335
Name: IA Operating, Inc.
Address 1: 9915 W. 21st Street, Ste B
Address 2: _____
City: Wichita State: KS Zip: 67205 + _____
Contact Person: Robert D. Swann
Phone: (316) 721-0036
CONTRACTOR: License # 30606
Name: Murfin Drilling Co., Inc.
Wellsite Geologist: Randall Kilian
Purchaser: Coffeyville Resources
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 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. Conv. to SWD
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Docket No.: _____
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: _____
5/30/09 6/04/09 7/02/09
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 051-25866-0000
Spot Description: _____
SE NE SE Sec. 26 Twp. 11 S. R. 16 East West
1940 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ellis
Lease Name: Sharon Well #: 26-4
Well Name: Chrisler East
Producing Formation: LKC and Toronto
Elevation: Ground: 1739' Kelly Bushing: 1744'
Total Depth: 3469' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 908' 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/ _____ sx cmt.

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Drilling Fluid Management Plan AIT I NCR 8-31-09
(Data must be collected from the Reserve Pit)
Chloride content: 84,000 ppm Fluid volume: 900 bbls
Dewatering method used: Evaporation/Backfill
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: Robert D. Swann
Title: Vice President Date: 8-11-09
Subscribed and sworn to before me this 11 day of August,
2009.
Notary Public: Julie Burrows
Date Commission Expires: March 19, 2013

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

JULIE BURROWS
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 3-19-13

Operator Name: IA Operating, Inc. Lease Name: Sharon Well #: 26-4
 Sec. 26 Twp. 11 S. R. 16 East West County: Ellis

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Geologist's Well Report, Mico Log, Compensated Density/Neutron Log, Dual Induction Log, Dual Receiver Cement Bond 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</td> <td>904'</td> <td>+840</td> </tr> <tr> <td>Topeka</td> <td>2668'</td> <td>-924</td> </tr> <tr> <td>Toronto</td> <td>2933'</td> <td>-1189</td> </tr> <tr> <td>Lansing</td> <td>2964'</td> <td>-1217</td> </tr> <tr> <td>Marmaton</td> <td>3223'</td> <td>-1479</td> </tr> <tr> <td>Arbuckle</td> <td>3378'</td> <td>-1634</td> </tr> <tr> <td>Total Depth</td> <td>3468'</td> <td>-1724</td> </tr> </table>	Name	Top	Datum	Anhydrite	904'	+840	Topeka	2668'	-924	Toronto	2933'	-1189	Lansing	2964'	-1217	Marmaton	3223'	-1479	Arbuckle	3378'	-1634	Total Depth	3468'	-1724
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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"	23#	908'	Common	400	3%CC, 2%gel
Production	7 7/8"	5 1/2"	15.5#	3465'	Common	150	3%CC, 2%gel

ADDITIONAL CEMENT PLUGS				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	2920'	Common	100	
___ Plug Back TD				
<input checked="" type="checkbox"/> Plug Off Zone	2725'	Common	150	

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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	3057-63,3045-53,	250 gal 15% MCA, retreat w/500 gal 15% MCA, 750 gal 15% MCA	
4	2990-94, 2963-68,2934-37	250 gal 15% MCA, retreat w/1500 gal 15% MCA	
4	2697-2705	250 gal 15% MCA, retreat w/500 gal 15% MCA	

TUBING RECORD:	Size: <u>2 3/8"</u>	Set At: <u>3107</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>7/04/09</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 Bbfs. <u>12</u>	Gas Mcf <u>0</u>	Water Bbfs. <u>86</u>	Gas-Oil Ratio <u>34</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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QUALITY OILWELL CEMENTING, INC. Will file

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3170

Date	Sec.	Twp.	Range	County	State	On Location	Finish
							3:00 AM
Lease	Well No.		Location				
Contractor	Owner			To Quality Oilwell Cementing, Inc.			
Type Job	You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.						
Hole Size	T.D.		Charge To				
Csg.	Depth		Street				
Tbg. Size	Depth		City State				
Drill Pipe	Depth		The above was done to satisfaction and supervision of owner agent or contractor.				
Tool	Depth						
Cement Left in Csg.	Shoe Joint		CEMENT				
Press Max.	Minimum		Amount Ordered				
Meas Line	Displace		Common				
Perf.			Poz. Mix				
EQUIPMENT			Gel.				
Pumptrk	No.	Cementor	Calcium				
		Helper	Mills				
Bulktrk	No.	Driver	Salt				
		Driver	Flowseal				
Bulktrk	No.	Driver					
		Driver					
JOB SERVICES & REMARKS							
Pumptrk Charge	900.00		500 bu 1 1/2" Finish		400.00		
Mileage	138.00						
Footage							
Total		1038.00	Handling		407.75		
Remarks:			Mileage		172.75		
			Pump Truck Charge		9038.00		
FLOAT EQUIPMENT							
Guide Shoe		1			169.00		
Centralizer		8			320.00		
Baskets					215.00		
AFU Inserts					1500.00		
					900.00		
					63.00		
Rotating Head							
Squeez Mainfold							
					Tax 179.78		
					Discount (1433.00)		
					Total Charge 5123.75		
Signature							

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Quality Oilwell Cementing

QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3175

Date	Sec.	Twp.	Range	County	State	On Location	Finish
6-15-09				Lebanon	Kansas		12:45 PM
Lease	Well No.		Location				
Contractor	Well No.		Location				
Type Job	T.D.		Owner				
Hole Size	Depth		To Quality Oilwell Cementing, Inc.				
Csg.	Depth		You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.				
Tbg. Size	Depth		Charge To				
Drill Pipe	Depth		Street				
Tool	Depth		City				
Cement Left in Csg.	Shoe Joint		State				
Press Max.	Minimum		The above was done to satisfaction and supervision of owner agent or contractor.				
Meas Line	Displace		Amount Ordered				
Perf.	EQUIPMENT		Common				
Pumptrk	No.	Cementer	CEMENT				
Bulktrk	No.	Helper	100 Cms 30 CC				
Bulktrk	No.	Driver	Zinc Oxide				
Bulktrk	No.	Driver	Gel				
Bulktrk	No.	Driver	Calcium				
JOB SERVICES & REMARKS			Mills				
Pumptrk Charge	Total		Salt				
Mileage	Total		Flowseal				
Footage	Total		KANSAS CORPORATION COMMISSION				
Remarks:	Total		AUG 12 2009				
Remarks:	Total		RECEIVED				
Remarks:	Total		Handling				
Remarks:	Total		Mileage				
Remarks:	Total		Pump Truck Charge				
Remarks:	Total		FLOAT EQUIPMENT				
Remarks:	Total		Guide Shoe				
Remarks:	Total		Centralizer				
Remarks:	Total		Baskets				
Remarks:	Total		AFU Inserts				
Remarks:	Total		Rotating Head				
Remarks:	Total		Squeez Mainfold				
Signature	Total		Tax				
Signature	Total		Discount				
Signature	Total		Total Charge				

Quality Oilwell
Cementing

QUALITY OILWELL CEMENTING, INC.

Will File

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3140

Date	Sec.	Twp.	Range	County	State	On Location	Finish
8/11/09							12 3/4
Lease	Well No.	Location					
Squaw	267	[Redacted]					
Contractor	Owner			To Quality Oilwell Cementing, Inc.			
Type Job	You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.						
Hole Size	T.D.	Charge To					
Csg.	Depth	I.H. Operating					
Tbg. Size	Depth	Street					
Drill Pipe	Depth	City					
Tool	Depth	State					
Cement Left in Csg.	Shoe Joint	The above was done to satisfaction and supervision of owner agent or contractor.					
Press Max.	Minimum	CEMENT					
Meas Line	Displace	Amount Ordered 150 @ 84					
Perf.		Common 150 @ 10" 1500.00					
EQUIPMENT				Poz. Mix			
Pumptrk	No.	Cementer		Gel.			
		Helper		Calcium 5 @ 42.00 210.00			
Bulktrk	No.	Driver		Mills			
		Driver		Salt			
Bulktrk	No.	Driver		Flowseal			
		Driver					
JOB SERVICES & REMARKS				KANSAS CORPORATION COMMISSION			
Pumptrk Charge	2nd Squeeze	450.00	AUG 12 2009				
Mileage	23 @ 8.00	188.00	RECEIVED				
Footage							
	Total	588.00	Handling 155 @ 2.00				
Remarks:			Mileage 23 @ 10.87 per mile 250.00				
			Pump Truck Charge 588.00				
FLOAT EQUIPMENT							
			Guide Shoe				
			Centralizer				
			Baskets				
			AEU Inserts				
			Rotating Head				
			Squeeze Mainfold				
			Tax 171.16				
			Discount (672.00)				
			Total Charge 2407.16				

Quality Oilwell Cementing

Signature