

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 # 34121
Name: CEC Operations, LLC
Address 1: 800 Main Place, Suite 208
Address 2: _____
City: Winfield State: KS Zip: 67156 + _____
Contact Person: Bruce Satterthwaite
Phone: (620) 221-0700
CONTRACTOR: License # 34190
Name: Vision Oil and Gas Services, LLC
Wellsite Geologist: Dan Johnson
Purchaser: ConocoPhillips

API No. 15 - 035-24323-00-00
Spot Description: _____
E2 NE SW Sec. 30 Twp. 34 S. R. 3 East West
1980 Feet from North / South Line of Section
2310 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Cowley

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.)

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Lease Name: Warren Sons Well #: 1 TomTom
Field Name: Murphy
Producing Formation: Cleveland
Elevation: Ground: 1165' Kelly Bushing: 1170'
Total Depth: 3530' Plug Back Total Depth: 3514'
Amount of Surface Pipe Set and Cemented at: 309' 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.

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.: _____
12/4/08 12/14/08 2/2/09
Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan Alt I ngr 9-1-09
(Data must be collected from the Reserve Pit)
Chloride content: 600 ppm Fluid volume: 200 bbls
Dewatering method used: Evaporation
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: Bruce Satterthwaite
Title: Managing Partner Date: 8/20/09
Subscribed and sworn to before me this 20 day of August, 2009.
Notary Public: Mary Ann Graham
Date Commission Expires: 11/21/2012

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

MARY ANN GRAHAM
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 11/21/2012

Operator Name: CEC Operations, LLC Lease Name: Warren Sons Well #: 1 TomTom
 Sec. 30 Twp. 34 S. R. 3 East West County: Cowley

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: CNL/CDL, DIL, MEL, SCBL	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Stalnaker</td> <td></td> <td></td> </tr> <tr> <td>Layton</td> <td></td> <td></td> </tr> <tr> <td>Cleveland</td> <td>3030</td> <td>(-1860)</td> </tr> <tr> <td>Bartlesville</td> <td>3400</td> <td>(-2230)</td> </tr> <tr> <td>Mississippian</td> <td>3458</td> <td>(-2288)</td> </tr> </table>	Name	Top	Datum	Stalnaker			Layton			Cleveland	3030	(-1860)	Bartlesville	3400	(-2230)	Mississippian	3458	(-2288)
Name	Top	Datum																	
Stalnaker																			
Layton																			
Cleveland	3030	(-1860)																	
Bartlesville	3400	(-2230)																	
Mississippian	3458	(-2288)																	

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	309'	Class "A"	175	3%CaCl, 2%gel
Production	7 7/8	4 1/2	10 1/2	3528	Thicket, 60/40 pozmix	200, 125	2%gel, 3%CaCl

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				
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> KANSAS CORPORATION COMMISSION AUG 21 2009 RECEIVED </div>				

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 spf	3458-3464'	500 gal 15% mca	3458-3464'
	CIBP @ 3455"	500 gal 15% mca	3400-3408'
4 spf	3400-3408'		
	CIBP @ 3120'	500 gal 15% mca	3030-42'
4 spf	3030-3042'	9,000# 20/40 sand frac	3030-42'

TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>3045'</u> Packer At: <u>None</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>2/2/09</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 Bbls. <u>55</u>	Gas Mcf <u>75</u>	Water Bbls. <u>20</u> 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3030-3042'</u>
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CONSOLIDATED
Oil Well Services, L.L.C.

ENTERED

TICKET NUMBER 13700
LOCATION El Dorado
FOREMAN Lee

PO Box 884, Chanute, KS 66720
620-431-8210 or 800-467-8876

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-14-08	3135	Tan Tan Window #1	30	345	3E	Lawrence

CUSTOMER		TRUCK #		DRIVER	
C.C. Operations LLC		446	Jacob		
MAILING ADDRESS		491	Robby		
800 Midwest St 303		442	Conrad		
CITY	STATE	ZIP CODE			
Winfield	Ks	67156			

JOB TYPE	HOLE SIZE	HOLE DEPTH	CASING SIZE & WEIGHT
Production	7 7/8	3530	4 1/2
CASING DEPTH	DRILL PIPE	TUBING	OTHER
3228			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING
15.0			
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	RATE
103			5.6 bbls

REMARKS: Job by Mr. Lee - Rigged up - Backe (Circulation) - 1000 lbs of
Lite weight 4 1/2" pipe - Taper with 200 sks Thick - set + 52 gal/gal -
Flusher 2 1/2" 8 1/2" - Displacement with 52.24 bbls water to mud line at
1100 lbs - Robinson Flat head

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	65	MILEAGE	3.65	237.25
5408	1080	ft. Rods over 2500ft	.20	216.00
1136A	200	skt Thick Set	17.00	3400.00
1131	125	skt 60/40 Lite	11.35	1418.75
1110A	1375	lbs Hansen	.42	577.50
1118A	1000	lbs Gel	.17	170.00
1107	75	lbs Mo-sen	2.10	157.50
1102	180	lbs CMC-2	.75	135.00
1135	50	lbs CFL-110	7.50	375.00
5407A	65	Bulk Dr. Run by 11.7.18 in 25 x	1.20	78.00
5408	20-12	lbs 2000 lb cement over 4 hrs		240.00
4161	1	4 1/2" 1000 Flat Size	273.00	273.00
4153	1	4 1/2" Latch 200	221.00	221.00
4103	4	3/4" Cement Head	208.00	832.00
4109	8	Thick Cent	40.00	320.00
				1316.25
			SALES TAX	451.04
			ESTIMATED TOTAL	1767.29

Form 1/27

208004

AUTHORIZATION

TITLE

DATE

UNCONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 19671
LOCATION El Dorado
FOREMAN W. [unclear]

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-457-8576

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
12-6-08	3135	Tan Tan [unclear]	30	345	3E	Lawley	
CUSTOMER CEC Operations LLC			TRUCK #	DRIVER	TRUCK #	DRIVER	
MAILING ADDRESS 500 Main St Ste 303			467	Jeff			
CITY Winfield			515	Greg			
STATE Ks							
ZIP CODE 67156							
JOB TYPE	SURFACE	HOLE SIZE	12 1/4	HOLE DEPTH	320	CASING SIZE & WEIGHT	8 3/8
CASING DEPTH	315	DRILL PIPE		TUBING		OTHER	
SLURRY WEIGHT	15.0	SLURRY VOL		WATER gal/sk	7.10	CEMENT LEFT in CASING	30#
DISPLACEMENT	19.68	DISPLACEMENT PSI	150	MIX PSI	-0-	RATE	5 1/2 bbl/s
REMARKS							
Safety Meeting - Ripped up and broke Circulation - mixed							
175 sks Class A + 3% CaCl2 + 12% Gel + 34 lb Flo-Seal - Released Aug							
and Displaced 18 1/2 bbls - Circulated Cement with 9 bbls displaced							

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	725.00	725.00
5406	65	MILEAGE	3.65	237.25
11045	175	sks CLASS	13.50	2362.50
1102	525	lbs CaCl2	.75	393.75
1107	131	lbs Flo-Seal	2.10	275.10
118A	350	lbs Gel	.17	59.50
5407A	65	Bulk Detachable x 8.75 ft x	1.00	652.50
4432	1	8 3/8 Top Window Plug	77.00	77.00
Subtotal				4826.60
			SALES TAX	183.75
			ESTIMATED TOTAL	4996.35

Form 3737

201943

AUTHORIZATION _____ TITLE _____ DATE _____