

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 3532
Name: CMX, Inc.
Address 1: 1551 N. Waterfront Parkway, Suite 150
Address 2: _____
City: Wichita State: KS Zip: 67206 + _____
Contact Person: Douglas H. McGinness II
Phone: (316) 269-9052
CONTRACTOR: License # 30606
Name: Murfin Drilling Company, Inc.
Wellsite Geologist: Ken LeBlanc
Purchaser: NA

Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
_____ Oil _____ SWD _____ SIOW _____
_____ 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.: _____
1/30/2009 2/6/2009 3/19/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 151-22321-0000
Spot Description: _____
NE SE SW NE Sec. 7 Twp. 29 S. R. 15 East West
2250 Feet from North / South Line of Section
1350 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Pratt
Lease Name: Kerr Estate Well #: 1
Field Name: Wildcat
Producing Formation: NA
Elevation: Ground: 2041 Kelly Bushing: 2053
Total Depth: 5000 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 392 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 cmf.

Drilling Fluid Management Plan P+A Ait I NUR
(Data must be collected from the Reserve Pit) 10-5-09
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: President Date: 9/9/09
Subscribed and sworn to before me this 9th day of September,
20 09.
Notary Public: [Signature]
Date Commission Expires: 2/7/2012

KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION
SEP 17 2009

DONNA L. MAY-MURRAY
Notary Public - State of Kansas
My Appt. Expires 2/7/2012

CONSERVATION DIVISION
WICHITA, KS

Operator Name: CMX, Inc. Lease Name: Kerr Estate Well #: 1
 Sec. 7 Twp. 29 S. R. 15 East West County: Pratt

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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: CNDL, DIL <input checked="" type="checkbox"/>	<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>Heebner Shale</td> <td>3952</td> <td>-1899</td> </tr> <tr> <td>Lansing</td> <td>4128</td> <td>-2075</td> </tr> <tr> <td>BKC</td> <td>4493</td> <td>-2440</td> </tr> <tr> <td>Marmaton</td> <td>4506</td> <td>-2453</td> </tr> <tr> <td>Cherokee Shale</td> <td>4610</td> <td>-2557</td> </tr> <tr> <td>Viola</td> <td>4703</td> <td>-2650</td> </tr> <tr> <td>Simpson Sand</td> <td>4853</td> <td>-2800</td> </tr> </table>	Name	Top	Datum	Heebner Shale	3952	-1899	Lansing	4128	-2075	BKC	4493	-2440	Marmaton	4506	-2453	Cherokee Shale	4610	-2557	Viola	4703	-2650	Simpson Sand	4853	-2800
Name	Top	Datum																							
Heebner Shale	3952	-1899																							
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Cherokee Shale	4610	-2557																							
Viola	4703	-2650																							
Simpson Sand	4853	-2800																							

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	24#	392'	60/40 Poz	350	3% CaCl ₂ , 2% gel
Production	7 7/8	4 1/2	10.5#	3520'	ASC	340	10% salt

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
4	3382-3385	300 gal 15% MCA	
	3300'--CIBP		
4	2753-2760	1300 gals 15% MCA	

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CONSERVATION DIVISION
WICHITA, KS

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. _____		Producing Method: <input type="checkbox"/> Flowing <input 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: <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.

740 W WICHITA
P.O. Box 32
Russell, KS 67665

Invoice

Date	Invoice #
2/2/2009	1355

Bill To
CMX INCORPORATED 1551 N WATERFRONT PKY SUITE 150 WICHITA KS 67206

P.O. No.	Terms	Project
	Net 30	

Quantity	Description	Rate	Amount
210	common	12.00	2,520.00T
140	POZ	6.50	910.00T
6	GEL	20.00	120.00T
11	Calcium	50.00	550.00T
88	Celloseal	2.00	176.00T
367	handling	2.00	734.00
7,340	.08 * 367 SACKS * 20 MILES	0.08	587.20
1	8 5/8 wooden plug	69.00	69.00T
1	surface pipes 0-500ft	500.00	500.00
20	pump truck mileage charge	6.00	120.00
943	discount 15% if paid within 30 days DISCOUNT HAS ALREADY BEEN DEDUCTED	-1.00	-943.00
	LEASE: KERR ESTATE WELL #1 Pratt county Sales Tax	6.30%	273.74

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SEP 17 2009
CONSERVATION DIVISION
WICHITA, KS

Thank you for your business. Dave

Total \$5,616.94



24 S. Lincoln Street
 P.O. Box 31
 Russell, KS 67665-2906
 Voice: (785) 483-3887
 Fax: (785) 483-5566

INVOICE

Invoice Number: 118125
 Invoice Date: Feb 8, 2009
 Page: 1

Bill To:
CMX, Inc. 1551 N. Waterfront PKW STE #15 Wichita, KS 67206

Customer ID	Well Name# or Customer P.O.	Payment Terms	
CMX	Kerr Estate #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1	Medicine Lodge	Feb 8, 2009	3/10/09

Quantity	Item	Description	Unit Price	Amount
350.00	MAT	ASC Class A	18.60	6,510.00
500.00	MAT	Mud Clean	1.27	635.00
6.00	MAT	Cla Pro	31.25	187.50
165.00	MAT	FL-160	13.30	2,194.50
414.00	SER	Handling	2.40	993.60
15.00	SER	Mileage 414 sx @ .10 per sk per mi	41.40	621.00
1.00	SER	Production Casing	2,011.00	2,011.00
15.00	SER	Mileage Pump Truck	7.00	105.00
1.00	EQP	Packer Shoe	1,491.00	1,491.00
1.00	EQP	Latch Down Plug	405.00	405.00
8.00	EQP	Centralizers	51.00	408.00
2.00	EQP	Basket	169.00	338.00
1.00	EQP	Thread Lock Kit	34.00	34.00

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 KANSAS CORPORATION COMMISSION

SEP 17 2009

CONSERVATION DIVISION
 WICHITA, KS

ALL PRICES ARE NET, PAYABLE
 30 DAYS FOLLOWING DATE OF
 INVOICE. 1 1/2% CHARGED
 THEREAFTER. IF ACCOUNT IS
 CURRENT, TAKE DISCOUNT OF

\$ 3983.40

ONLY IF PAID ON OR BEFORE

Mar 10, 2009

Subtotal	15,933.60
Sales Tax	768.79
Total Invoice Amount	16,702.39
Payment/Credit Applied	
TOTAL	16,702.39

ALLIED CEMENTING CO., LLC. 34169

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Medicine Lodge, KS

DATE <u>2-8-09</u>	SEC. <u>7</u>	TWP. <u>29S</u>	RANGE <u>15W</u>	2-7 CALLED OUT <u>4:00 PM</u>	2-7 ON LOCATION <u>6:30 PM</u>	2-8 JOB START <u>3:00 AM</u>	2-8 JOB FINISH <u>3:45 AM</u>
KERR Estate LEASE		WELL # <u>1</u>	LOCATION <u>54 + croft B/7, S 1/4 S,</u>		COUNTY <u>PRATT</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			W INTO				

CONTRACTOR MURFIN #2

TYPE OF JOB Production casing

HOLE SIZE 7 7/8" T.D. 5,000'

CASING SIZE 4 1/2" 10.5" DEPTH 3,520'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 1,800# MINIMUM 100

MEAS. LINE _____ SHOE JOINT 21.5'

CEMENT LEFT IN CSG. 21.5'

PERFS. _____

DISPLACEMENT 56 1/2 BBL 2% KCL

OWNER CMX

CEMENT

AMOUNT ORDERED 350 SX CLASS A ASC + 1.5% FL-160, 500 GAL mud clean, 6 GAL clPro

COMMON _____	@ _____	_____
POZMIX _____	@ _____	_____
GEL _____	@ _____	_____
CHLORIDE _____	@ _____	_____
ASC <u>350 A</u>	@ <u>18.60</u>	<u>6510.00</u>
<u>Mud Clean 500 gal.</u>	@ <u>1.27</u>	<u>635.00</u>
<u>clPro 6 gal</u>	@ <u>31.25</u>	<u>187.50</u>
<u>FL-160 165 #</u>	@ <u>13.30</u>	<u>2194.50</u>
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
HANDLING <u>414</u>	@ <u>2.40</u>	<u>993.60</u>
MILEAGE <u>15 X 414 X .10</u>		<u>621.00</u>
TOTAL		<u>11141.60</u>

EQUIPMENT

PUMP TRUCK CEMENTER Thomas DeMorrow

414-302 HELPER Raymond R.

BULK TRUCK

363-249 DRIVER LARRY J

BULK TRUCK

_____ DRIVER _____

REMARKS:

Pipe on bottom, break circulation, Pump Preflush
3 BBL Fresh, 500 GAL mud clean, 3 BBL Fresh,
76Vg RAT + mouse w/ 25 SX CLASS A ASC 4.5%
FL-160, Pump cement - 325 SX CLASS A ASC 4.5% FL-160,
Stop Pumps, wash Pump & slides, Release Plug, Start
Displacement, seal off, slow rate, Pump Plug,
Float held, Displaced w/ 56 1/2 BBL 2% KCL
Thank you

SERVICE

DEPTH OF JOB <u>3,520'</u>		
PUMP TRUCK CHARGE _____		<u>2011.00</u>
EXTRA FOOTAGE _____	@ _____	_____
MILEAGE <u>15</u>	@ <u>7.00</u>	<u>105.00</u>
MANIFOLD _____	@ _____	_____
RECEIVED KANSAS CORPORATION COMMISSION		

CHARGE TO: CMX

STREET _____

CITY _____ STATE _____ ZIP _____

SEP 17 2009

TOTAL 2116.00

4 1/2" CONSERVATION DIVISION
WICHITA, KS
PLUG & FLOAT EQUIPMENT

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

Packer shoe	1	@ <u>1491.00</u>	<u>1491.00</u>
Latch Down Plug	1	@ <u>405.00</u>	<u>405.00</u>
Centralizers	8	@ <u>51.00</u>	<u>408.00</u>
Basket	2	@ <u>169.00</u>	<u>338.00</u>
Thread lock kit	1	@ <u>34.00</u>	<u>34.00</u>
TOTAL			<u>2676.00</u>

PRINTED NAME HAROLD J BENERIVE

SIGNATURE [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES [Crossed out]

DISCOUNT [Crossed out] IF PAID IN 30 DAYS

ANY APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING



24 S. Lincoln Street
 P.O. Box 31
 Russell, KS 67665-2906

Voice: (785) 483-3887
 Fax: (785) 483-5566

INVOICE

Invoice Number: 118476

Invoice Date: Mar 19, 2009

Page: 1

Bill To:

CMX, Inc.
 1551 N. Waterfront PKW STE #15
 Wichita, KS 67206

Customer ID	Well Name# or Customer P.O.	Payment Terms	
CMX	Kerr Estate #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1	Medicine Lodge	Mar 19, 2009	4/18/09

Quantity	Item	Description	Unit Price	Amount
90.00	MAT	Class A Common	13.50	1,215.00
60.00	MAT	Pozmix	7.55	453.00
20.00	MAT	Gel	20.25	405.00
170.00	SER	Handling	2.25	382.50
1.00	SER	Minimum Handling Mileage Charge	300.00	300.00
1.00	SER	Old Hole Plug	875.00	875.00
15.00	SER	Mileage Pump Truck	7.00	105.00

ALL PRICES ARE NET, PAYABLE
 30 DAYS FOLLOWING DATE OF
 INVOICE. 1 1/2% CHARGED
 THEREAFTER. IF ACCOUNT IS
 CURRENT, TAKE DISCOUNT OF

\$ 933.87

ONLY IF PAID ON OR BEFORE

Apr 18, 2009

Subtotal	3,735.50
Sales Tax	235.34
Total Invoice Amount	3,970.84
Payment/Credit Applied	
TOTAL	3,970.84

ALLIED CEMENTING CO., LLC. 33318

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge, KS

DATE <u>3-19-09</u>	SEC. <u>7</u>	TWP. <u>29S</u>	RANGE <u>15W</u>	CALLED OUT <u>7:00 A.M.</u>	ON LOCATION <u>9:45AM</u>	JOB START	JOB FINISH
LEASE <u>Kepp ESTATE</u>	WELL # <u>#1</u>	LOCATION <u>54+ Croft Black Top</u>			COUNTY <u>McPh</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD <input type="radio"/> NEW (Circle one)		<u>5 1/4 S, W. 10</u>					

CONTRACTOR _____ OWNER CMX

TYPE OF JOB O.H.P.

HOLE SIZE 7 7/8 T.D. 2,000

CASING SIZE 4 1/2 DEPTH 2,000

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 200# MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT Fresh Water

CEMENT

AMOUNT ORDERED 150sx 60' 40' 4%
Gel 15sx Gel 300# HULLS
(did not use HULLS)

COMMON <u>A</u>	<u>90 sx</u>	@ <u>13.50</u>	<u>1215.00</u>
POZMIX	<u>60 sx</u>	@ <u>7.55</u>	<u>453.00</u>
GEL	<u>20 sx</u>	@ <u>20.25</u>	<u>405.00</u>
CHLORIDE	_____	@ _____	_____
ASC	_____	@ _____	_____

RECEIVED	_____	_____	_____
KANSAS CORPORATION COMMISSION	_____	_____	_____
SEP 17 2009	_____	_____	_____
CONSERVATION DIVISION	_____	_____	_____
WICHITA, KS	_____	_____	_____
HANDLING	<u>170</u>	@ <u>2.25</u>	<u>382.50</u>
MILEAGE	<u>170/15/1.10</u>		<u>300.00</u>
TOTAL			<u>2755.50</u>

EQUIPMENT

PUMP TRUCK CEMENTER David W. Ready P.

352 HELPER Cal B.

BULK TRUCK

353-290 DRIVER Bill M.

BULK TRUCK

_____ DRIVER _____

REMARKS:

1st plug 950' Load Hole w/ Gel pump
50sx cement Displace with 11.57 Bbls water

2nd plug 420' Load Hole pump 60 sx cement
Displace with 2.46 Bbls water

3rd plug circulate cement to surface from 60'
with 20 sx cement .44 Displace

CHARGE TO: CMX

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>950'</u>	_____	_____
PUMP TRUCK CHARGE	_____		<u>875.00</u>
EXTRA FOOTAGE	_____	@ _____	_____
MILEAGE	<u>15</u>	@ <u>7.00</u>	<u>105.00</u>
MANIFOLD	_____	@ _____	_____
TOTAL			<u>980.00</u>

PLUG & FLOAT EQUIPMENT

_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
TOTAL _____		

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME X Preston L. Deiting

SIGNATURE X [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES [Scribbled]

DISCOUNT [Scribbled] IF PAID IN 30 DAYS