

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34027
Name: CEP Mid-Continent LLC
Address 1: 15 West Sixth Street, Suite 1100
Address 2: _____
City: Tulsa State: OK Zip: 74119 + 5415
Contact Person: Rodney Tate, D&C Engineer
Phone: (918) 877-2912, ext. 306
CONTRACTOR: License # (subcontractor for CEP-34027)
Name: Maverick Stimulation Co., LLC - 34233
Wellsite Geologist: Jeff Hudson
Purchaser: CEP Mid-Continent LLC

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: KanMap, Inc.
Well Name: Sauder 10-13

Original Comp. Date: 12-9-94 Original Total Depth: 1,115'
_____ 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.: _____
4-29-08 8-23-94 4-29-08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 125-29842-0001

Spot Description:
_____ NW _____ NW _____ SE Sec. 13 Twp. 33 S. R. 16 East West
2,310 Feet from North / South Line of Section
2,310 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Montgomery

Lease Name: SAUDER Well #: 10-13

Field Name: Coffeyville-Cherryvale

Producing Formation: Skinner

Elevation: Ground: 825' Kelly Bushing: _____

Total Depth: 1,115' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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. cm.}

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.: _____

WO-Dg-10/12/09

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.

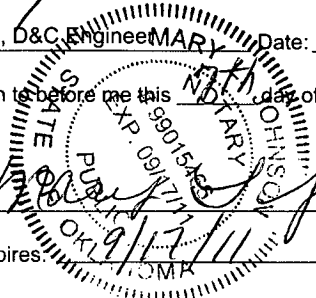
Signature: _____

Title: Rodney Tate, D&C Engineer Date: 10/7/09

Subscribed and sworn to before me this 15th day of October, 2009.

Notary Public: Mary Johnson

Date Commission Expires: _____



KCC Office Use ONLY

N Letter of Confidentiality Received
If Denied, Yes Date: _____

_____ Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution

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Operator Name: CEP Mid-Continent LLC Lease Name: SAUDER Well #: 10-13
 Sec. 13 Twp. 33 S. R. 16 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 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 Skinner 743' +82'
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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

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	Skinner	500 gal. 7.5% HCL, 6,550 gal. MavFoam C70,	743-746'
		80,000 Scf N2, 5,500# 16/30 Brady sand,	
		formation breakdown at 3,961 PSI	

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TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	KCC WICHITA
Date of First, Resumed Production, SWD or Enhr. 5-15-08 (then 16 Mcf, 24 Water)		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 Bbbs. 0	Gas Mcf 8	Water Bbbs. 2 (on 10-6-09)
		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: _____ _____
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Well No. Sauder #10-13
 Pod Kanmap
 Date 4/9/2008
 State Kansas
 County Montgomery
 Location SE/4 Sec 13 - T33S - R16E
 Surface Casing 7" @ 22'
 Production Casing 4-1/2" @ 1115'

CEP # 150068

Completed

Formation	Open Hole	Net Feet	Stg	Rec CH Perfs	Comments
Riverton	1056'-60'	4.0	1	1056'-59' 4spf, 12 holes	10# gel 500# 100M, 20,000 10/20 on 12/12/94

Completed

Formation	Open Hole	Net Feet	Stg	Rec CH Perfs	Comments
Weir Pitt	807'-12'	5.0	2	808'-12' 4spf, 16 holes	10# gel 1000# 100M, 15,000 10/20 on 12/12/94

Set a WRBP @ +/- 800'

Next Stage

Formation	Open Hole	Net Feet	Stg	Rec CH Perfs	Comments
Skinner	744'-46'	2.0	3	743'-46' 4spf, 12 holes	Foam 5000# @ 15 bpm

4-29-08

Defer

Formation	Open Hole	Net Feet	Stg	Rec CH Perfs	Comments
Crowburg	714'-16'	2.0			
Bevier	670'-72'	2.0			
Iron Post	651'-54'	3.0			

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MAY 05 2008
By _____

Invoice

DATE	INVOICE NO.
4/29/2008	9615

BILL TO
CEP Mid-Continent LLC

LOCATION
Sec. 13, T33S, R16E
Montgomery County, Kansas

MAIL TO DATE
MAY 06 2008
ACCOUNTING

Account # 1192332 Property 150068 Amount 12127.06 AFE 468134R SV 4/08

VENDOR # 10827

NSE 986 CEP 976 MCOS 985 IMMEDIATE OVERNITE

TERMS	WELL NAME
Net 30	CEP Sauder #10-13

ITEM	DESCRIPTION & UOM	QTY	RATE	AMOUNT
257	CL-57 (gal)	14	35.04	490.56T
582	Mavcide II	1	81.46	81.46T
2003	Mav-100 (lb)	150	11.04	1,656.00T
141	Breaker 503L (qt)	0.5	69.06	34.53T
142	GB-3 (lb)	1	4.71	4.71T
411	WF-1 (gal)	9	33.71	303.39T
4001	MAVCELL F	8	49.76	398.08T
303	Mavhib-3 (gal)	2	40.03	80.06T
5503	HCL 7.5% (gal)	500	0.97	485.00T
6800	N2 (scf/100)	800	2.04	1,632.00T
	Subtotal			5,165.79
Product	Product Discount		-31.00%	-1,601.39
7030	Sand 16/30 Brady (cwt)	55	16.01	880.55T
	Subtotal			880.55
10001	Equipment Mileage (Heavy) (per MI)	110	3.12	343.20
10010	Proppant Mileage (TN/MI)	125	1.25	156.25
13201	Acid Semi-Trailer (4 hr min) (per hr)	4	99.23	396.92
21120	Minimum Fracc Pump (Group) 750 HHP (unit)	1	1,807.31	1,807.31
31020	Blender (Group) 11-20 BPM (unit)	1	915.71	915.71
45010	Chemical Add Unit (CCAU) (unit)	1	737.10	737.10
47020	Sand Pumping Charge (cwt)	55	1.19	65.45
50030	Proppant Conc Charge (gal)	210	0.13	27.30
50040	Proppant Conc Charge (gal)	260	0.15	39.00
54100	Computer Control Van (unit)	1	2,268.00	2,268.00
56100	Mavfoam Pump Charge	1,807.31	0.10	180.73
56200	Mavfoam Blender Charge	915.71	0.10	91.57
56510	N2 Pump Chg (0-6000 PSI) (job)	1	1,814.40	1,814.40
57100	N2 Transport (hr)	4	85.05	340.20
	Subtotal			9,183.14
Service	Service Discount		-31.00%	-2,846.77
15900	Fuel surcharge	1	1,010.15	1,010.15
	Subtotal			1,010.15
	Sales Tax, Montgomery Cnty KS		7.55%	335.59

Reviewed by _____
Approved by _____
Approved by _____
Date Paid _____
Check No. _____

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Remit payment to Maverick Stimulation Co., LLC
88 Inverness Circle East, G-101 Englewood CO 80112

Total \$12,127.06



88 INVERNESS CIRCLE EAST G-101
 ENGLEWOOD, CO 80112
 PH (303) 757-7789 FAX (303) 757-7610

SERVICE ORDER - 9615

Date: 4/29/2008

Well Name: CEP SAUDER #10-13
 County - State: MONTGOMERY, KS
 Type Of Service: N2 FOAM FRAC
 Location: SEC 13 - T 33S - R 16E
 RRC #:
 Customer's Order #:

Customer: CEP MID-CONTINENT LLC
 LARRY CASEY
 Address: P.O. BOX 970
 SKIATOOK, OK 74070

AS a consideration, the above named Customer agrees to pay Maverick Stimulation Company, LLC. in accord with the rates and terms stated in Maverick Stimulation Company, LLC current price lists. Invoices are payable NET 30 (SEE 10.2) after date of invoice. Upon Customer's default in payment of Customers account by such date, Customer agrees to pay interest thereon after default at 18% per annum. In the event it becomes necessary to employ an attorney to enforce collection of said account, Customer agrees to pay all the collection costs and attorney fees. These terms and conditions shall be governed by the laws of the state where services are performed or equipment or materials are furnished.

Maverick Stimulation Company, LLC. warrants only title to the products, supplies and materials and that the same are free from defects in workmanship. THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED, MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE OR OTHERWISE WHICH EXTEND BEYOND THOSE STATED IN THE IMMEDIATELY PRECEDING SENTENCE. Maverick Stimulation Company, LLC., liability and Customer's exclusive remedy in any cause of action (whether in contract, tort, product liability, breach of warranty or otherwise) arising out of the sale or use of any products, supplies, or materials upon their return to Maverick Stimulation Company, LLC. is expressly limited to the replacement of such products, supplies or materials or, at Maverick Stimulation Company, LLC. option, to the allowance to the Customer of credit for the cost of such items. In no event shall Maverick Stimulation Company, LLC be liable for special, indirect, punitive or consequential damages.

CODE	QTY	UOM	DESCRIPTION	PRICE	TOTAL
257	14	GL	CL-57 LIQUID KCL REPLACEMENT	35.04	490.56
2003	150	LB	MAV-100 CMHPG GEL	11.04	1656.00
141	0.5	QT	BREAKER-503L LIQUID ENZYME BREAKER	69.06	34.53
142	1	LB	GB-3 OXIDATIVE BREAKER	4.71	4.71
411	9	GL	WF-1 FOAMER	33.71	303.39
4001	8	GL	MAVCELL F	49.76	398.08
303	2	GL	MAVHIB-3 ACID INHIBITOR (MODERATE TEMP)	40.03	80.06
5503	500	GL	HCL 7.5%	0.97	485.00
6800	800	CSCF	N2 NITROGEN	2.04	1632.00
7030	55	CWT	*SAND 16/30 BRADY	16.01	880.55
10001	110	UN/MI	EQUIPMENT MILEAGE (HEAVY) RND TRIP (PER MI)	3.12	343.20
10010	125	TN/MI	PROPPANT MILEAGE	1.25	156.25
13201	4	HR	ACID SEMI-TRAILER (2 HR. MIN)	99.23	396.92
21120	1	UNIT	MINIMUM FRAC PUMP (GROUP) 750 HHP	1807.31	1807.31
31020	1	UNIT	BLENDER (GROUP) 11 -20 BPM	915.71	915.71
45010	1	UNIT	CHEMICAL ADD UNIT (CAU)	737.10	737.10
47020	55	CWT	SAND PUMPING CHG. (16/30, 12/20, 10/20)	1.19	65.45
50030	210	GL	PROPPANT CONC. CHG. (6.1-8 PPG)	0.13	27.30
50040	260	GL	PROPPANT CONC. CHG. (8.1-10 PPG)	0.15	39.00
54100	1	UNIT	M A V COMPUTER CONTROL VAN	2268.00	2268.00
56100	1807.31	x 10%	MAVFOAM PUMP CHG. (ADD TO PUMP CHG.)	0.10	180.73
56200	915.71	x 10%	MAVFOAM BLENDER CHG. (ADD TO BLENDER CHG.)	0.10	91.57
56510	1	JOB	N2 PUMP CHG. (0-6000 PSI) (4K-8K SCF/MIN)	1814.40	1814.40
57100	4	HR	N2 TRANSPORT	85.05	340.20
15900	1	JOB	*FUEL SURCHARGE	1010.15	1010.15
582	1	LB	MAVCIDE II BIOCID	81.46	81.46

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Taxes:
 Agreed Price: 11,791.46

TRUCK NUMBER:
 DRIVER:
Tom Z. Norman
 MAVERICK STIMULATION CO, LLC

THIS JOB WAS SATISFACTORILY COMPLETED
 OPERATION OF EQUIPMENT WAS SATISFACTORY
 PERFORMANCE OF PERSONEL WAS SATISFACTORY
 YES NO

Don Steff
 CUSTOMER OR HIS AGENT SIGNATURE



MAYERICK
STIMULATION COMPANY, LLC

12701 ENERGY RD · FT. MORGAN, CO. 80701 · PH (970) 867-2766 · FAX (970) 867- 5922

CEP MID-CONTINENT LLC – SKIATOOK, OK
Coal Seam Frac Project

April 29, 2008

CEP – KANMAP - CEP SAUDER #10-13 Stage #3

SKINNER (743'-746', 4 spf), 12 shots total.

Started pump in with 210 gal gelled water. Followed with 500 gals of 7.5% HCl, and flushed with 420 gal gelled water. Started treatment with a pad of 1484 gallons of MavFoam C70, followed by 5066 gals of MavFoam C70 carrying 5500 lbs 16/30 Brady Sand at 0.25 to 3.0 ppg down hole. The job was flushed to the top perforation with 496 gal gelled water, and over flushed with 168 gal gelled water. A total of 80,000 SCF (including cool down) of N₂ was used.

Started pump-in, STP-89, BH-386. Followed with acid @ 3.0 bpm, STP-783, BH-1100 Started Flush, STP-798, BH-938. Started Pad, STP-643, BH-938. Initial FQ was 59. Sand stages were as follows: Started 0.25#, STP-1066, BH-1144, FQ-69. Started 0.5#, STP-1065, BH-1148, FQ-70. Started 1#, STP-1060, BH-1150, FQ-70. Started 2#, STP-1058, BH-1163, FQ-70. Started 3#, STP-1070, BH-1191, FQ-70. Started Flush, STP-1059, BH-1189, FQ-70. Average FQ was 70. Max pressure was 4000 psi. Average rate was 15 bpm at 1060 psi surface (1160 psi bottomhole). ISIP was 680 psi (FG = 1.34); 5 min = 586 psi, 10 min = 564 psi.

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1484
5066
6550



88 INVERNESS CIRCLE E. G-101
 ENGLEWOOD, CO 80112
 PH (303) 757-7789 FAX (303) 757-7610

STIMULATION REPORT PAGE 1

Date: 29-Apr-08

Well Name: SAUDER #10-13 Location: SEC.13, T33S, R16E Customer Rep: DON STAFFORD Field Order #: 09615

Stage: ST #3 Formation: SKINNER Treat Via: CASING Allowable Pressure Tbg: 4,000 Csg: Well Type: GAS

County: MONTGOMERY/KMAP State: KS Well Age: NEW PackerType: PackerDepth: Csg Size: 4.5

Type Of Service: N2 FOAM FRAC Csg Depth: Tbg Size: Tbg Depth: Liner Size:

Customer Name: CEP MID-CONTINENT LLC
 Address: LARRY CASEY
 P.O. BOX 970
 SKAITOOK OK 74070
 Liner Depth: Liner Top: Liner Bot: Total Depth:
 Open Hole: Csg Vol: BHT: 11.8 90

Remarks: 5,500 LBS. 16/30 BRADY
 80,000 SCF N2
 JOB PUMPED @ 15 BPM DOWNHOLE

Perf Depths:	Perfs:	TotalPerfs:
743	746	12
	0	
	0	
	0	
	0	
	0	

TIME	INJECTION RATE		PRESSURE		REMARKS	PROP (lbs)	FOAM/FLD (gls)	FLUID (bbls)
	FLUID	N2/CO2	STP	ANNULUS				
8:51	0.1	0	5	0	PRIME UP PRESS TEST TO = 4200 PSI	0	0	0.0
8:56	0.0	0	122	0	ST PUMP-IN	0	210	5.0
8:57	3.6	0	1568	0	BREAKDOWN @ 3961 PSI	0	0	0.0
8:58	0.5	0	771	0	ST ACID	0	500	12.0
9:00	0.1	0	2056	0	ST FLUSH	0	420	10.0
9:00	6.9	0	3039	1	ACID BRK @ 2940 PSI	0	0	0.0
9:01	5.2	0	684	0	ST PAD	0	1,484	10.6
9:04	4.8	4469	1065	0	ST .25# 16/30 BRADY	500	2,000	14.5
9:07	5.1	4509	1065	1	ST .5# 16/30 BRADY	500	1,000	7.1
9:09	4.8	4509	1059	0	ST 1# 16/30 BRADY	500	500	3.8
9:10	5.1	4382	1059	0	ST 2# 16/30 BRADY	1,400	700	5.0
9:11	6.5	4293	1070	1	ST 3# 16/30 BRADY	2,600	866	6.3
9:13	6.3	0	1056	1	ST FLUSH	0	496	11.8
9:13	14.2	0	965	0	ST OVERFLUSH	0	168	4.0
9:14	14.5	0	886	0	CUT FLUID - ISIP = 660 PSI	0	0	0.0
9:19	0.0	0	587	0	5 MIN = 586 PSI	0	0	0.0
9:24	0.0	0	564	0	10 MIN = 564 PSI	0	0	0.0

Total: 5,500 8,344 90.1

Summary

Max Fl. Rate Avg Fl. Rate Max Psi Avg Psi
 14.5 5.6 4,924 897

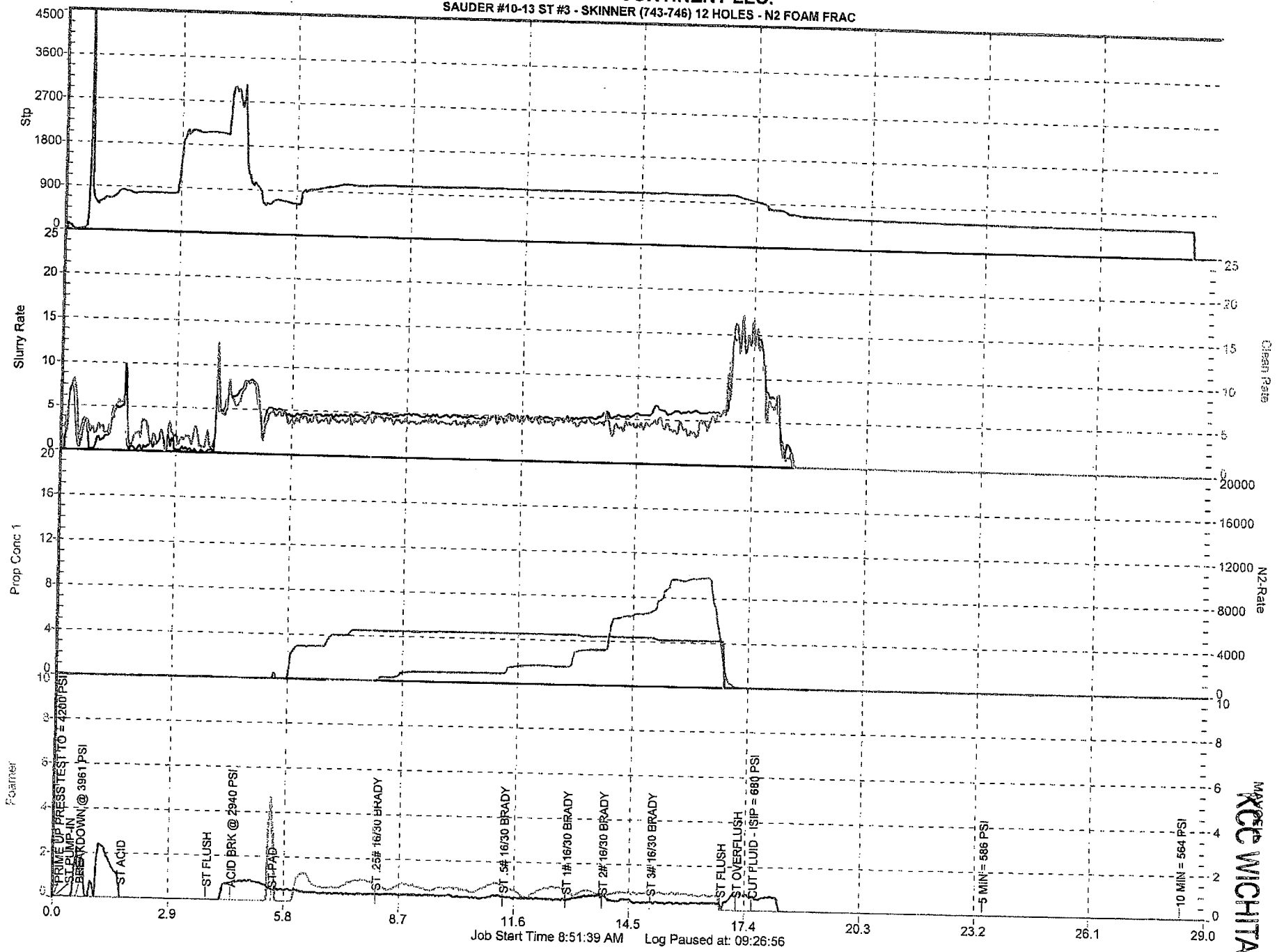
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Customer Acknowledgement: Service Rating: Satisfactory Unsatisfactory
 Treater: TERRY BOWMAN
 PRODUCTS USED: CL-57, MAV-100, BREAKER-503L, GB-3, WF-1, MAVCELL F, MAVCIDE II, MAVHIB-3, HCL 71/2%, 16/30 BRADY

CEP MID - CONTINENT LLC.
 SAUDER #10-13 ST #3 - SKINNER (743-746) 12 HOLES - N2 FOAM FRAC



MAX
 REC WICHITA

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