

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 # 34027
Name: CEP MIDCONTINENT LLC
Address 1: 15 W 6TH ST STE 1100
Address 2: _____
City: TULSA State: OK Zip: 74119+5415
Contact Person: VICKIE HARTER
Phone: (918) 877-2923
CONTRACTOR: License # 34126
Name: SMITH OILFIELD SERVICES
Wellsite Geologist: N/A
Purchaser: N/A

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.: _____
10-9-08 10-15-08 5-17-09
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 125-31710-0000
Spot Description: _____
NW SW NW Sec 25 Twp. 34 S. R. 14 East West
1485 Feet from North / South Line of Section
300 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: MONTGOMERY
Lease Name: KOGETZ Well #: 2510
Field Name: SUNSET
Producing Formation: ARBuckle
Elevation: Ground: 943 Kelly Bushing: _____
Total Depth: 2089 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 204 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1885
feet depth to: SURF w/ 300 sx cmt.

Drilling Fluid Management Plan AH II NR 10-12-09
(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.: _____

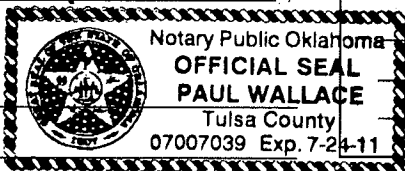
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Vickie Harter

Title: REG AFF. SPEC Date: 8-26-09

Subscribed and sworn to before me this 26th day of AUG

20 09
Notary Public: Paul Wallace



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

Date Commission Expires: _____

Operator Name: CED MIDCONTINENT LLC Lease Name: ROGER Well #: 25-10
Sec. 25 Twp. 34 S. R. 14 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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	OSWEGO	1005	-62
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	MULKY	1066	-123
List All E. Logs Run:		BEVIER	1099	-156
<u>CBL, GR,</u>		CROWBURG	1121	-178
<u>DIL, CDL</u>		MINERAL	1155	-212
		BARTLESVILLE	1351	-408
		MISSISSIPPI	1550	-607
		ARDUCLLE	1906	-963

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
<u>SURFACE</u>	<u>12"</u>	<u>9 5/8"</u>	<u>26#</u>	<u>204</u>	<u>CLASS A</u>	<u>35</u>	<u>NEAT</u>
<u>(PROD.)</u>	<u>7 7/8"</u>	<u>5 1/2"</u>	<u>15 1/2#</u>	<u>1885</u>	<u>CLASS A</u>	<u>300</u>	<u>BENTONITE, (GEL) PHENOSEAL, KOL SEAL, SALT,</u>

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
	<u>open hole completed</u>		

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SEP 21 2009
KCC WICHITA

TUBING RECORD:	Size: <u>3 1/2</u>	Set At: <u>1856</u>	Packer At: <u>1860</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	<u>SWD (NOT ON YET)</u>			
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:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 226675

Invoice Date: 10/20/2008 Terms:

Page 1

CEP MID-CONTINENT LLC
P.O. BOX 970
SKIATOOK OK 74070
(918)396-0817

RECEIVED
OCT 22 2008
By _____

KOGER 25-10 SWD
18151
10/16/08

MAIL TO
DATE
OCT 23 2008
ACCOUNTING

Part Number	Description	Qty	Unit Price	Total
1104	CLASS "A" CEMENT	16920.00	.1500	2538.00
1118B	PREMIUM GEL / BENTONITE	550.00	.1700	93.50
1107A	PHENOSEAL (M) 40# BAG)	80.00	1.1500	92.00
1110A	KOL SEAL (50# BAG)	1800.00	.4200	756.00
1111	GRANULATED SALT (50 #)	600.00	.3300	198.00
1126	OIL WELL CEMENT	80.00	17.0000	1360.00
1107A	PHENOSEAL (M) 40# BAG)	40.00	1.1500	46.00

Description	Hours	Unit Price	Total
419 CEMENT PUMP	1.00	925.00	925.00
419 EQUIPMENT MILEAGE (ONE WAY)	30.00	3.65	109.50
419 CASING FOOTAGE	1885.00	.20	377.00
486 MIN. BULK DELIVERY	1.00	315.00	315.00
518 MIN. BULK DELIVERY	1.00	315.00	315.00

IMMEDIATE

Account # 1192720870055 Property 6654.99 Amount 44081399 AFE 10/08 SV

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

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SEP 21 2009
KCC WICHITA

VENDOR # 10046
NSE 986 CEP 976 MCOS 985 IMMEDIATE OVERNITE

Parts: 5083.50 Freight: .00 Tax: 269.43 AR 7394.43
Labor: .00 Misc: .00 Total: 7394.43
Sublt: .00 Supplies: .00 Change: .00

DISCOUNT 739.44

Signed _____ Date 6654 99



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 18151
LOCATION BARTLESVILLE OK
FOREMAN DONALD TATE

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-16-08	3115	KOBER 25-10 SWD				MONTGOMERY
CUSTOMER CEP			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS			419	JAMES N		
CITY STATE ZIP CODE			486	SEAN G.		
			518	SEAN M C		

JOB TYPE LS HOLE SIZE 7 7/8 HOLE DEPTH _____ CASING SIZE & WEIGHT 5 1/2
CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 13.3/14.7 SLURRY VOL 1.75/1.45 WATER gal/sk 9/7 CEMENT LEFT in CASING _____
DISPLACEMENT 44 DISPLACEMENT PSI 600* MIX PSI 150* RATE 3-3/2 BPM

REMARKS: DISPLACE FIRST SHOE TO BTM 500* FILL W/ PACKER AND OPEN PORTS. RUN 5 BBL H₂O FOLLOWED BY GEL/1CM ESTABLISHING CIRC. RUN 180 SX CEP TOP CMT FOLLOWED BY 80 SX BTM CMT WASH OUT LINES AND RELEASE 2nd PLUG DISPLACING 44 BBL TO SET SHOE. KNOCK OFF WASH UP

PLUG DOWN 7:30 P.M

2300* CEMENT TO SURFACE

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925.00
5406	30	MILEAGE		109.50
5402	1885	FOOTAGE		377.00
5407	2	BULK TRUCK X2		630.00
1104	180 sx / 16,920	CLASS A CMT		2538.00
1118B	11 sx / 550*	GEL		93.50
1107A	25x / 80*	PHENO		92.00
1110A	36sx / 1800*	ROL SEAL		756.00
1111	12sx / 600*	SALT		198.00
1126	80sx / 7520	DWC BTM CMT		
1107A	15x / 40*	PHENO		136.00
				46.00
			5.136%	269.43
			SALES TAX	
			ESTIMATED TOTAL	7394.43

Ravin 3737

AUTHORIZATION Todd Wilson TITLE _____ DATE 10-16-08

226675