

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32073
 Name: Thompson oil company
 Address: 2260 North Dakota Road
 City/State/Zip: Iola Kansas 66749
 Purchaser: Coffeyville Resources
 Operator Contact Person: Jerry Thompson
 Phone: (620) 3631045
 Contractor: Name: McPherson drilling
 License: 5495
 Wellsite Geologist: _____
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

08/14/2008	08/17/2008	08/17/2008
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date


API No. 15 - 001-29801-0000
 County: Allen
ne - se - nw - sw Sec. 15 Twp. 24 S. R. 18 East West
3925 feet from (S) / N (circle one) Line of Section
3125 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: Monfort Well #: 22
 Field Name: Iola
 Producing Formation: Bartlesville
 Elevation: Ground: _____ Kelly Bushing: _____
 Total Depth: 923 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 20ft Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 847ft
 feet depth to surface w/ 100 ATP2 - Dlg - 12/12/08 ^{5x cmt.}
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.: _____

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: Jerrme A Thompson
 Title: owner Date: 10/15/2008
 Subscribed and sworn to before me this 15 day of October,
 2008.
 Notary Public: Sheryl Harris
 Date Commission Expires: 8/7/09

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

 SHERYL HARRIS
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 8/7/09

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OCT 24 2008
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Thompson oil company Lease Name: Monfort Well #: 22
 Sec. 15 Twp. 24 S. R. 18 East West County: Allen

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 type="checkbox"/> Yes <input checked="" 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
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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	11	8.5	21	20ft	type 2	6	
longstring	6.75	4.5	9.5	847ft	quickset	100	

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

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TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumerd 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 **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify) _____

Hurricane Services, Inc.
Cementing & Circulating Division
P.O. Box 782228
Wichita, KS 67278-2228

FED ID # 47
Shop # (620) 437-2661
Cellular # (620) 437-7582
Office # (316) 685-5908
Office Fax # (316) 685-5926

MC ID # 165290

Shop Address: 3613A Y Road
Madison, KS 66860

Customer:
THOMPSON OIL CO.
JEROME A. THOMPSON
2260 N DAKOTA RD
IOLA KS 66749

Invoice Date 8/18/2008
Invoice # 12361
Lease Name MONFORT
Well # 22
County: ALLEN

Date	Description	Hrs/Qty	Rate	Total
8/15/2008	Drove to location, rigged up and cemented longstring per attached Service ticket #2674.			
	Quick set cement	100.00	14.40	1,440.00T
	Flocele - 1/4 lb per sack	25.00	1.75	43.75T
	Gel flush	200.00	0.20	40.00T
	Water truck #193	5.00	80.00	400.00
	Bulk truck mileage	1.00	322.85	322.85
	Pump charge	1.00	700.00	700.00
	Pump truck mileage - One way	50.00	3.00	150.00

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Sales Tax (6.3%) \$96.00

Total \$3,192.60

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!

FED ID#
 MC ID # 165290
 Shop # 620 437-2661
 Cellular # 620 437-7582
 Office # 316 685-5908
 Office Fax # 316-685-5926
 Shop Address: 3613A Y Road
 Madison, KS 66860

Hurricane Services, Inc.
 P.O. Box 782228
 Wichita, KS 67278-2228

Cement, Acid or Tools
 Service Ticket
 02674

DATE 8-15-08

COUNTY Allen CITY _____

CHARGE TO Thompson Oil Company
 ADDRESS 2260 N. Dakota Rd. CITY Tola ST Ks. ZIP 66749
 LEASE & WELL NO. Monfort #22 CONTRACTOR Bill McPherson
 KIND OF JOB Longstring SEC. 15 TWP. 24 RNG. 18E
 DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
100 sks	QuickSet cement		1,440.00
25 lbs	Flocele 1/4" P 1 1/2" SK.		43.75
200 lbs	Gel Flush		40.00
	BULK CHARGE		
5.87 Tons	BULK TRK. MILES		322.85
50	PUMP TRK. MILES		150.00
5	Hrs Water Truck #193		400.00
	PLUGS		
		6.32 SALES TAX	95.99
		TOTAL	3192.59

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T.D. _____
 SIZE HOLE 6 3/4" - Ann Hole
 MAX. PRESS. _____
 PLUG DEPTH _____
 PLUG USED _____

CSG. SET AT 847' VOLUME 13.7 Bbls
 TBG SET AT _____ VOLUME _____
 SIZE PIPE 4 1/2" - 9.516
 PKER DEPTH _____
 TIME FINISHED _____

REMARKS: Rig up to 4 1/2" casing, Pumped 15 Bbl. water Ahead, 10 Bbl. Gel Flush, followed with 35 Bbl. water. - Circulate Gel around To condition Hole. - Pump 5 Bbls dye water. Mixed 100 sks QuickSet cement w/ 1/4" P 1 1/2" SK of Flocele, Displaced cement with 13 1/4 Bbls water. Final Pumping at 350 PSI > ISAP at 250 PSI - close casing in w/ 250 PSI (Approx. 35 cement left in casing.) Good cement returns to surface w/ 7 1/2 Bbl. slurry

EQUIPMENT USED

NAME Kelly Kimberlin ✓ UNIT NO. 185
Brad Butler
 HSI REP.

NAME Jerry #91, Clayton #193 ✓ UNIT NO. _____
 Witnessed by Jerry Thompson
 OWNER'S REP.