

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 # 32933  
Name: Todd Miller  
Address 1: 402 W Elm  
Address 2: \_\_\_\_\_  
City: Sedan State: KS Zip: 67361 + \_\_\_\_\_  
Contact Person: Todd Miller  
Phone: ( 620 ) 725-3631  
CONTRACTOR: License # 5831  
Name: Mokat  
Wellsite Geologist: Alan Brown  
Purchaser: Coffeyville Resources  
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.)*

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.: \_\_\_\_\_  
June 15 2009      June 15 2009      June 21 2009  
Spud Date or      Date Reached TD      Completion Date or  
Recompletion Date                Recompletion Date

API No. 15 - 019-26967-00-00  
Spot Description: \_\_\_\_\_  
nw nw se sw Sec. 8 Twp. 32 S. R. 12  East  West  
1150 Feet from  North /  South Line of Section  
1505 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Chautauqua  
Lease Name: Baalmann Well #: B2  
Field Name: Hale-Inge  
Producing Formation: Layton  
Elevation: Ground: N/a Kelly Bushing: \_\_\_\_\_  
Total Depth: 829 Plug Back Total Depth: 827  
Amount of Surface Pipe Set and Cemented at: 40 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 827  
feet depth to: surface w/ 90 sx cmt.

**Drilling Fluid Management Plan** AH II NUR 10-5-09  
*(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: Todd J Miller  
Title: Operator Date: 9/9/09  
Subscribed and sworn to before me this 9 day of Sept,  
2009.  
Notary Public: Rory C Walker  
Date Commission Expires: 11/13/12

| KCC Office Use ONLY |   |
|---------------------|---|
| <u>N</u>            | Letter of Confidentiality Received                  |
|                     | If Denied, Yes <input type="checkbox"/> Date: _____ |
|                     | Wireline Log Received                               |
|                     | Geologist Report Received                           |
|                     | UIC Distribution                                    |

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Operator Name: Todd Miller Lease Name: Baalmann Well #: B2  
 Sec. 8 Twp. 32 S. R. 12  East  West County: Chautauqua

**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<br>(Attach Additional Sheets)<br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>(Submit Copy)<br><br>List All E. Logs Run: | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br>Name Top Datum |
|--|---|

| CASING RECORD <input type="checkbox"/> New <input checked="" 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 |
| Longstring  | 6 3/4             | 4 1/2                     | 10.5              | 827           | thickset       | 90           |                            |
|   |                   |                           |                   |               |                |              |                            |
|   |                   |                           |                   |               |                |              |                            |

| ADDITIONAL CEMENTING / SQUEEZE RECORD  |                  |                |             |                            |
|--|------------------|----------------|-------------|----------------------------|
| Purpose:   | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><input type="checkbox"/> Plug Off Zone |                  |                |             |                            |
|  |                  |                |             |                            |

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br>(Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| 2              | 792 to 798  | 250 gal acid 5000lbs sand   |       |
| 2              | 774 to 782  | same  |       |
|                |   |   |       |
|                |   |   |       |

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|                |                    |                    |                     |   |
|----------------|--------------------|--------------------|---------------------|---|
| TUBING RECORD: | Size: <u>2 7/8</u> | Set At: <u>790</u> | Packer At: <u> </u> | Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No |
|----------------|--------------------|--------------------|---------------------|---|

|  |  |
|--|--|
| Date of First, Resumed Production, SWD or Enhr. <u> </u> | Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <u> </u> |
| Estimated Production Per 24 Hours                        | Oil Bbls. <u>2</u> <u>200</u><br>Gas Mcf <u> </u><br>Water Bbls. <u>200</u><br>Gas-Oil Ratio <u> </u><br>Gravity <u>28</u>   |

|  |  |  |
|--|--|--|
| DISPOSITION OF GAS:<br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br>(If vented, Submit ACO-18.) | METHOD OF COMPLETION:<br><input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><input type="checkbox"/> Other (Specify) <u> </u> | PRODUCTION INTERVAL:<br><u> </u><br><u> </u> |
|--|--|--|



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 21302  
LOCATION EUREKA  
FOREMAN Rick Ledford

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

| DATE   | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE   | COUNTY |
|--|------------|--------------------|---------|----------|---------|--------|
| 6-15-09  |            | Baalmann B-2       |         |          |         | Chaut. |
| CUSTOMER: <u>Black Dog Energy</u>                            |            |                    | TRUCK # | DRIVER   | TRUCK # | DRIVER |
| MAILING ADDRESS: <u>3500 N. Harrison</u>                     |            |                    | 463     | Shannon  |         |        |
| CITY: <u>Shawnee</u> STATE: <u>OK</u> ZIP CODE: <u>74804</u> |            |                    | 543     | DAVE     |         |        |
|  |            |                    | 436     | J.P.     |         |        |

JOB TYPE longstop HOLE SIZE 6 7/8" HOLE DEPTH 830' CASING SIZE & WEIGHT 4 1/2"  
 CASING DEPTH 825' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.4" SLURRY VOL \_\_\_\_\_ WATER gal/sk 8.0 CEMENT LEFT in CASING 0  
 DISPLACEMENT 13 DISPLACEMENT PSI 400 RATE \_\_\_\_\_

REMARKS: Safety meeting. Rig up to 4 1/2" casing. Break circulation 2/20.  
Blk fresh water. Pump 4 sks gel flush. 10 Blk water spacer, 6 Blk dye water  
Mixed 90 sks thickset cement w/ 1/4" flacle <sup>per sk</sup> @ 13.1" pol. w/out.  
pump + lines shut down, release plug. Displace w/ 13' Blk fresh water. Final  
pump pressure 400 PSI. Pump plug to 800 PSI. wait 2 minutes. release  
pressure. float hold. Good cement returns to surface. 6 Blk slurry to pit.  
Job complete. Rig down.

Thank You

| ACCOUNT CODE       | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL   |
|--------------------|-------------------|------------------------------------|------------|---------|
| 5401               | 1                 | PUMP CHARGE                        | 870.00     | 870.00  |
| 5406               | #                 | MILEAGE 2nd well or 2              | n/c        | n/c     |
| 1126A              | 90 sks            | thickset cement                    | 16.00      | 1440.00 |
| 1107               | 25"               | 1/4" flacle <sup>per sk</sup>      | 1.97       | 49.25   |
| 1118A              | 200"              | gel flush                          | 16         | 32.00   |
| 5502C              | 3.5 hrs           | 80 Blk var. trav                   | 91.00      | 329.00  |
| 1123               | 1500 gals         | city water                         | 14.00/1000 | 21.00   |
| 5407               | 11.95             | ten-mileage bulk trav              | n/c        | 296.00  |
| 11204              | 1                 | 4 1/2" top rubber plug             | 43.00      | 43.00   |
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| <b>SEP 10 2009</b> |                   |                                    |            |         |
| <b>KCC WICHITA</b> |                   |                                    |            |         |
|                    |                   | subtotal                           |            | 3080.25 |
|                    |                   | -5% disc                           |            | -154.01 |
|                    |                   | subtotal                           |            | 2926.24 |
|                    |                   | 6.3% SALES TAX                     |            | 99.87   |
|                    |                   | ESTIMATED TOTAL                    |            | 3026.11 |

AUTHORIZATION Todd Miller TITLE Operator DATE \_\_\_\_\_