

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

11/02/11

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5135
 Name: John O. Farmer, Inc.
 Address: P.O. Box 352
 City/State/Zip: Russell, KS 67665
 Purchaser: Coffeyville Resources, LLC
 Operator Contact Person: Marge Schulte
 Phone: (785) 483-3145, Ext. 214 **CONFIDENTIAL**
 Contractor: Name: WW Drilling, LLC **NOV 02 2009**
 License: 33575
 Wellsite Geologist: Steven P. Murphy **KCC**

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW 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. _____

| 8-5-09 | 8-12-09 | 8-31-09 |
|-----------------------------------|-----------------|---|
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 065-23,565-00-00
 County: Graham
NE SW SE SE Sec. 20 Twp. 7 S. R. 21 East West
550 feet from S / N (circle one) Line of Section
940 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Johnson Well #: 1
 Field Name: (wildcat)
 Producing Formation: Lansing & Arbuckle
 Elevation: Ground: 2097' Kelly Bushing: 2102'
 Total Depth: 3690' Plug Back Total Depth: 3657'
 Amount of Surface Pipe Set and Cemented at 219 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 3688
 feet depth to surface w/ 370 sx cmt.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)

Chloride content 17,000 ppm Fluid volume 900 bbls
 Dewatering method used evaporation
 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: John O. Farmer II
 Title: President Date: 11-2-09
 Subscribed and sworn to before me this 2nd day of November
 20 09.
 Notary Public: Margaret A. Schulte
 Date Commission Expires: 1-27-13

KCC Office Use ONLY

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

RECEIVED
NOV 04 2009

KCC WICHITA