

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5150
Name: COLT ENERGY, INC
Address 1: PO BOX 388
Address 2: 1112 RHODE ISLAND RD
City: IOLA State: KS Zip: 66749 + 0 3 8 8
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111
CONTRACTOR: License # 5989
Name: FINNEY DRILLING COMPANY
Wellsite Geologist: JIM STEGEMAN
Purchaser: COFFEYVILLE RESOURCES, 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.)

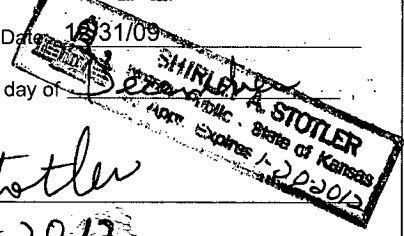
If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr. Conv. to SWD
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Docket No.: _____
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: P+A 11/13/09
11/13/09 11/16/09 DRY/ PLUGGED
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 031-22,470-0000
Spot Description: NE SE SWNE
Sec. 11 Twp. 23 S. R. 16 East West
3245 Feet from North / South Line of Section
1485 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: COFFEY
Lease Name: BEARD/SKELTON "1" Well #: 28
Field Name: NEOSHO FALLS - LEROY
Producing Formation: LOWER SQUIRREL
Elevation: Ground: 985 Kelly Bushing: ----
Total Depth: 978 Plug Back Total Depth: NONE
Amount of Surface Pipe Set and Cemented at: 41.75 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: DRY/PLUGGED
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan P+A A+II NWL
(Data must be collected from the Reserve Pit) 1-20-10
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: NO FLUID - PIT PUSHED IN
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: Dennis Kershner
Title: OFFICE MANAGER Date: 12/31/09
Subscribed and sworn to before me this 31st day of December
2009
Notary Public: Shirley A. Stotler
Date Commission Expires: 1-20-2012



KCC Office Use ONLY
 Letter of Confidentiality Received
if Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received **RECEIVED**
 UIC Distribution
JAN 04 2010

Operator Name: COLT ENERGY, INC Lease Name: BEARD/SKELTON "1" Well #: 28
 Sec. 11 Twp. 23 S. R. 16 East West County: COFFEY

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 checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum DRILLERS LOG ENCLOSED
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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
SURFACE	12 1/4	7"	19	41.75	50/50 POZ	44	
PRODUCTION	5 5/8			NONE			

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
	NONE DRY/PLUGGED		

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. DRY/PLUGGED		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: <input type="checkbox"/> Vented <input 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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COLT

ENERGY, INC.

CORPORATE OFFICE

P.O. Box 388 • 1112 Rhode Island Rd. • Iola, Ks. 66749-0338
Phone (620) 365-3111 • Fax (620) 365-3170

12-31-09

KCC Conservation Office
130 S Market, Room 2078
Wichita, Kansas 67202-1286

To Whom It May Concern:

Enclosed please find copies of Well Plugging Record CP-4 and Well Completion Form ACO-1 and necessary logs & forms for the following wells located in Montgomery County:

(ACO) ✓ Marchant D2 ✓ Flanders D2
(ACO)

Wells located in Coffey County as follows:

✓ Beard/Skelton"1" 28 ✓ Beard "1" E7 ✓ Beard/Skelton"3" 33-1
(ACO) (ACO) (ACO)
✓ Beard/Skelton"1" 26
(ACO)

Also enclosed you will find copies of CDP5 Exploration & Production Waste Transfer and CDP4 Closure of Surface Pit for the Beard/Skelton"3" 33-1.

If you have any questions, contact Shirley Stotler at 620-365-3111.

Sincerely,

COLT ENERGY, INC.

Shirley Stotler

Shirley Stotler

Production Clerk

Ss

Encl.

RECEIVED

JAN 04 2010

KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 22462
LOCATION Ottawa KS
FOREMAN Fred Mader

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
11/17/09	1828	Beard/Skelton #28	NE 11	23	16	CF
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE						

Colt Energy Inc.

1112 Rhode Island

Iola

KS

66749

506

Fred

368

Ken

237

Arlen

JOB TYPE Plug HOLE SIZE 5 7/8 HOLE DEPTH 1010' CASING SIZE & WEIGHT N/A
 CASING DEPTH 0 DRILL PIPE 2 7/8 EUE TUBING OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING Full
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish circulation thru drill pipe. Mix + Pump 20 SKS
Per Mix Cement. Spot @ TD. Pull drill pipe to 580'
Spot 20 SKS cement. Pull drill pipe to 250'
Fill to surface. Pull remaining drill pipe + Top of
well. 85 SKS 50/50 Per Mix Cement Total 6% Gel.

Customer Supplied H₂O
Finney Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE <u>Plug</u>		870 ⁰⁰
5406	50 mi	MILEAGE <u>Pump Truck</u>		172 ⁵⁰
5407A	178.5	<u>Ton Mileage</u>		207 ⁰⁶
1124	80 SKS	50/50 Per Mix Cement		740 ⁰⁰
1118B	428 ⁰⁰	Premium Gel		684 ⁸⁸
				RECEIVED
				NOV 23 2009
				IAN 04 2010
				KCC WICHITA
				5.3%
				SALES TAX
				ESTIMATED
				TOTAL

Ravin 3737

42⁸⁵
2100⁸⁰

AUTHORIZATION Garry Decker was have TITLE _____ DATE _____
(muddy)