

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

2/12/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33699
Name: T-N-T ENGINEERING, INC.
Address 1: 3711 MAPLEWOOD, STE. 201
Address 2: _____
City: WICHITA FALLS State: TX Zip: 76308 + _____
Contact Person: HAL GILL or STEPHANIE BLACK-SMITH
Phone: (940) 691-9157

CONTRACTOR: License # 33493
Name: AMERICAN EAGLE DRILLING, LLC
Wellsite Geologist: JIM MUSGROVE

Purchaser: COFFEYVILLE

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.: _____
12/12/2009 12/19/2009 01/20/2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 051-25937-0660

Spot Description: _____

NW SW NE SE Sec. 15 Twp. 13 S. R. 18 East West

1720 Feet from North / South Line of Section

1320 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: ELLIS

Lease Name: PFEIFER 15 Well #: 1

Producing Formation: MARVIN

Producing Formation: ARBUCKLE

Elevation: Ground: 2131 Kelly Bushing: 2138

Total Depth: 3800 Plug Back Total Depth: 3750

Amount of Surface Pipe Set and Cemented at: 208 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1422 Feet

If Alternate II completion, cement circulated from: 1422

feet depth to: SURFACE w/ 350 sx 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.: _____

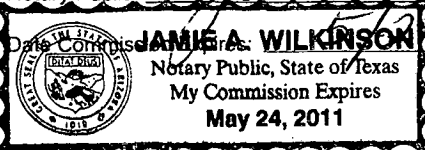
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Hal Gill
Title: KANSAS AREA ENGINEER Date: 2/12/10

Subscribed and sworn to before me this 12 day of February,
20 10

Notary Public: Jamie A. Wilkinson



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