

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 # 9067
 Name: DaMar Resources, Inc.
 Address 1: P. O. Box 70
 Address 2: _____
 City: Hays State: KS Zip: 67601 + _____
 Contact Person: Curtis R. Longpine
 Phone: (785) 625-0020
 CONTRACTOR: License # 30606
 Name: Murfin Drilling Co., Inc.
 Wellsite Geologist: Jim Musgrove
 Purchaser: Coffeyville Resources, LLC
 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.: _____

<u>10/06/2009</u>	<u>10/12/2009</u>	<u>11/13/2009</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25914-0000
 Spot Description: _____
SE NW NW SE Sec. 3 Twp. 14 S. R. 16 East West
2140 Feet from North / South Line of Section
2020 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Ellis
 Lease Name: Pfeifer 'A' Trust Well #: 1
 Field Name: Wildcat
 Producing Formation: Lansing-Kansas City
 Elevation: Ground: 1941' Kelly Bushing: 1946'
 Total Depth: 3540' Plug Back Total Depth: 3516'
 Amount of Surface Pipe Set and Cemented at: 262 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: 1042' Feet
 If Alternate II completion, cement circulated from: 1042'
 feet depth to: surface w/ 200 sx cmt.

Drilling Fluid Management Plan Air II NR 3-23-10
 (Data must be collected from the Reserve Pit)
 Chloride content: 8000 ppm Fluid volume: 3000 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: [Signature]
 Title: Vice President/Geologist Date: 3-16-10
 Subscribed and sworn to before me this 16th day of MARCH
20 10
 Notary Public: [Signature]
 Date Commission Expires: 10-18-2012

KCC Office Use ONLY

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

RECEIVED
 KANSAS CORPORATION COMMISSION



MAR 17 2010
 CONSERVATION DIVISION
 WICHITA, KS

Operator Name: DaMar Resources, Inc. Lease Name: Pfeifer 'A' Trust Well #: 1
 Sec. 3 Twp. 14 S. R. 16 East West County: Ellis

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 checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual induction, dual compensated porosity, microresistivity, sonic bond	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See attached geo report
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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"	8 5/8"	23#	262'	poz 60/40	165	3% cc 2% gel
Production	7 7/8"	5 1/2"	14#	3539'	EA-2	130	---

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
4	3464-3467'	375 gal acid	
4	3276-3278' & 3262-3264'	125 gal acid	
4	3250-3254' & 3205-3209'	250+500+400+850=2000 gal acid	
	bridge plug @ 3450		

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>3441'</u> Packer At: <u>none</u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>11/24/2009</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls. <u>45</u> Gas Mcf <u>---</u> Water Bbls. <u>25</u> 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3205-3278 OA</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

MAR 17 2010

RECEIVED
 KANSAS CONSERVATION DIVISION

QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3003

Date	Sec.	Twp.	Range	County	State	On Location	Finish
11/13/09							
Lease <i>Pieper Trust</i>		Well No. <i>A-1</i>		Location <i>Walker Hwy S + E 10th</i>			
Contractor <i>Expresswell Service</i>				Owner			
Type Job <i>port collar</i>				To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Hole Size		T.D.		Charge To <i>Damon</i>			
Csg. <i>5 1/2</i>		Depth		Street			
Tbg. Size <i>2 1/2</i>		Depth		City			
Drill Pipe		Depth		State			
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.			
Cement Left in Csg.		Shoe Joint		<i>used 200 CEMENT</i>			
Press Max.		Minimum		Amount Ordered <i>2250-MBC by Alowsee Rpa</i>			
Meas Line		Displace		Common <i>200 @ 13.00</i>		<i>2600.00 @ 5k</i>	
Perf.				Poz. Mix			
EQUIPMENT							
Pumptrk <i>9</i>	No.	Cementer Helper		Gel.			
Bulktrk <i>4</i>	No.	Driver		Calcium			
Bulktrk <i>pu</i>	No.	Driver		Mills			
Bulktrk <i>pu</i>	No.	Driver		Salt			
JOB SERVICES & REMARKS							
Pumptrk Charge <i>port collar</i>		<i>750.00</i>		Flowseal <i>50 @ 2.00</i>		<i>100.00</i>	
Mileage <i>12 @ 7.00</i>		<i>84.00</i>		<i>1 sand @ 12.00</i>		<i>12.00</i>	
Footage							
		Total <i>834.00</i>		Handling <i>226 @ 2.00</i>		<i>452.00</i>	
Remarks: <i>tested tubing & casing @ 1000 psi & held opened tool got air mixed 200ML & air cement to surface. Closed tool recheck @ 1000 psi & held ran 3 ft & wash clean. Ran to plug & wash sand off.</i>				Mileage		<i>300.00</i>	
				Pump Truck Charge		<i>834.00</i>	
FLOAT EQUIPMENT							
				Guide Shoe			
				Centralizer			
				Baskets			
				AFU Inserts			
				Rotating Head			
				Squeeze Mainfold			
				Tax		<i>115.01</i>	
				Discount		<i>(859.00)</i>	
				Total Charge		<i>3554.01</i>	

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MANUFACTURING DIVISION
MAR 17 2010
CONCRETE DIVISION
WICHITA, KS

THANKS

X Signature *Alan W...*

JOB LOG

SWIFT Services, Inc.

DATE 10-28-09 PAGE NO. 1

CUSTOMER **JAMAR RESOURCES** WELL NO. **1** LEASE **WEIFER A TRUST** JOB TYPE **LOGGING** TICKET NO. **16629**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1400							ON LOCATION CMT: 175500 STD EA-2 RTD 3540, SET P. PER 3539, SJ 1452, INJECT 3524 5 1/2" 14" NEW PORT COLL. M.O. TOP* 62, 1042 FT CENT 1,3,5,7,9,11,13,61 BASEYARD, 14,62
	1500							START CS LOG FLOTT EQV TAG BOTTOM, DROP BALL
	1645							BREAK CIRC 4" RIG & ROTATE PIPE PLUS RH, MH
	1725		6.5					
	1730		12		✓		200	MUD FLUSH GOODIES
			20		✓		5	WELL FLUSH
	1740		31.0		✓		5	EA-2 CMT DROP LOG PLUG, WASHOUT PL
	1745	6.0	0		✓		200	START DISP
			55.0		✓		200	CMT ON BOTTOM
			75.0		✓		650	
			80.0		✓		30	
	1800	4.0	85.9		✓		1400	LAND PLUG RELEASES
	1900							JOB COMPLETE THANK YOU! DAVE, JOSH B, BLANE

RECEIVED
KANSAS CORPORATIONS COMMISSION

MAR 17 2010

CONFIDENTIAL INFORMATION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 037653

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665.

SERVICE POINT: Russell

DATE <u>10-6-09</u>	SEC. <u>3</u>	TWP. <u>14</u>	RANGE <u>16</u>	CALLED OUT	ON LOCATION	JOB START <u>5:00 p.m.</u>	JOB FINISH <u>5:30 p.m.</u>
LEASE <u>Trust</u>	WELL # <u>1</u>	LOCATION <u>Walker 1w SxEnto</u>			COUNTY <u>Ellis</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR Munjin 16

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 265

CASING SIZE 8 5/8 23' DEPTH 262

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 15 1/2 BCL

OWNER _____

CEMENT

AMOUNT ORDERED 165 60/40 30% CC
2" to 60L

COMMON	<u>99</u>	@	<u>13.50</u>	<u>1336.50</u>
POZMIX	<u>66</u>	@	<u>7.55</u>	<u>498.30</u>
GEL	<u>3</u>	@	<u>20.25</u>	<u>60.75</u>
CHLORIDE	<u>5</u>	@	<u>51.50</u>	<u>257.50</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>165</u>	@	<u>2.25</u>	<u>371.25</u>
MILEAGE	<u>.10/SK/mile</u>	Minimum		<u>300.00</u>
TOTAL				<u>2824.30</u>

EQUIPMENT

PUMP TRUCK CEMENTER Craig

417 HELPER Matt

BULK TRUCK

410 DRIVER Chris

BULK TRUCK

_____ DRIVER _____

REMARKS:

8 5/8 Casing on Bottom. Best Circulation.
Mix 165 SK + Displace
Cement Circulated.

Thanks!

CHARGE TO: Damar

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 991.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 10 @ 7.00 70.00

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 1061.00

~~_____~~
~~_____~~
~~_____~~
~~_____~~

PLUG & FLOAT EQUIPMENT

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KANSAS CORPORATION COMMISSION

MAR 17 2010

CONFIRMATION DIVISION
WICHITA, KS

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

SIGNATURE Angela