

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 33711  
Name: B-C Steel  
Address 1: 209 N Fry St  
Address 2: \_\_\_\_\_  
City: Yates Center State: Ks Zip: 66783 + \_\_\_\_\_  
Contact Person: Bert Carlson  
Phone: ( 620 ) 285-6064  
CONTRACTOR: License # 30567  
Name: Rig 6 Drilling Company  
Wellsite Geologist: Leigh Raymond  
Purchaser: Coffeyville Resources

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.: \_\_\_\_\_  
3-9-2010    3-15-2010    3-16-2010  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

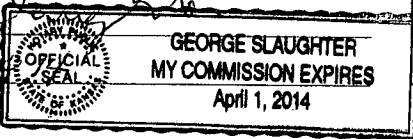
API No. 15 - 035-24349-00-00  
Spot Description: \_\_\_\_\_  
\_\_\_\_\_ SW SE NW Sec. 19 Twp. 31 S. R. 8  East  West  
2380 Feet from  North /  South Line of Section  
4224 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Cowley  
Lease Name: Sontag Well #: 1  
Field Name: Radcliffe Northeast  
Producing Formation: Bartsville  
Elevation: Ground: 1400 Kelly Bushing: \_\_\_\_\_  
Total Depth: 2814 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 450 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: \_\_\_\_\_  
feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan** Alt I NWR 4-5-10  
*(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: Bert Carlson  
Title: Manager Date: 3-23-2010  
Subscribed and sworn to before me this 23 day of MARCH  
20 10.  
Notary Public: George Slaughter  
Date Commission Expires: 4-1-2014



**KCC Office Use ONLY**

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

**RECEIVED**  
**MAR 31 2010**

KCC WICHITA

Operator Name: B-C Steel Lease Name: Sontag Well #: 1  
 Sec. 19 Twp. 31 S. R. 8  East  West County: Cowley

**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  Yes  No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey  Yes  No

Cores Taken  Yes  No

Electric Log Run  Yes  No  
 (Submit Copy)

List All E. Logs Run: Compensated Density

Log Formation (Top), Depth and Datum  Sample  
 Name Top Datum

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 Casing	12"	7		450	Thick Set	40	
Production	6.75	4.5	10.5	2814	Thick Set	135	5# Kel-Seal per sack
						5# Thick Sacks	

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	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	
	Waiting on Pipeline		

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	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: <u>RECEIVED</u>
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**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 23948  
LOCATION Eureka  
FOREMAN Steve Mead

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

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-16-10	1152	SonTag #1	19	313	8E	Cowley
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
B.C. Steel Gas LLC			485	Alan		
MAILING ADDRESS			479	Chris		
1432 Nighthawk Rd			436	Ed		
CITY	STATE	ZIP CODE	437	Jim		
Yates Center	Ks	66783				

JOB TYPE Long string HOLE SIZE 6 3/4 HOLE DEPTH 2915' CASING SIZE & WEIGHT 4 1/2 10.5"  
 CASING DEPTH 2814 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.6# SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 425 bbls DISPLACEMENT PSI 800# MIX PSI Bump Play 120# RATE \_\_\_\_\_

REMARKS: Safety Meeting Rig up to 4 1/2 casing. Break circulation with 2 bbls Fresh water. Wash casing down 10'. Rig up cement head. Pump 5 bbls Fresh water. Mix 135 sks Thick Set Cement 4/5# Kal-Seal per/sk. At 13.6# Partial Displace with 425 bbls Fresh water. Final pumping Pressure 800# Bump Play 120#. Wait 3 min Release Pressure Play held. Job Complete Rig down.

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
		RECEIVED		
5401	1	PUMP CHARGE	900.00	900.00
5406	50	MILEAGE MAR 31 2010	3.55	172.50
1126A	135 sks	Thick Set Cement KCC WICHITA	16.50	2227.50
110A	675#	Kal-Seal 5# per/sk	.40	270.00
5407A	7.42 Ton	Ton mileage bulk Truck	1.20	895.20
5502C	4 hrs	80 bbl Vacuum Truck #437	96.00	384.00
5502C	4 hrs	80 bbl Vacuum Truck #436	96.00	384.00
1183	5000 gallons	CITY WATER	14.50/1000	72.50
4103	2	4 1/2 Cement Basket	201.00	402.00
4404	1	4 1/2 Rubber plug	44.66	44.66
		Paid in Full w/5% Discount: 265.33)		
		5216.30		
		Check # 1793		
		233329		
		5.8%		
		Subtotal		5306.76
		SALES TAX		174.94
		ESTIMATED TOTAL		5481.69

Rev'n 3737

AUTHORIZATION

Bea Carlson  
TITLE

DATE