

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 # 34008

Name: Owens Petroleum, LLC

Address 1: 1274 202nd Rd

Address 2: _____

City: Yates Center State: KS Zip: 66783 + _____

Contact Person: Scott Owens

Phone: (620) 496-7048

CONTRACTOR: License # 33986

Name: Owens Petroleum Services, LLC

Wellsite Geologist: none

Purchaser: Coffeyville Resources

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.: _____

04/01/2010 04/03/2010 05/03/2010

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 207-27,578-00-00

Spot Description: _____

NW -NE -SE Sec. 14 Twp. 24 S. R. 15 East West

2475 Feet from North / South Line of Section

495 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Woodson

Lease Name: Reynard Well #: 8

Field Name: Vernon

Producing Formation: Squirrel

Elevation: Ground: 1145 Kelly Bushing: na

Total Depth: 1245 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 40 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 AH II NR 5-20-10
(Data must be collected from the Reserve Pit)

Chloride content: fresh ppm Fluid volume: 300 bbls

Dewatering method used: pumped out

Location of fluid disposal if hauled offsite:

Operator Name: Owens Petroleum, LLC

Lease Name: Roberts License No.: 34008

Quarter SE4 Sec. 4 Twp. 24 S. R. 16 East West

County: Woodson Docket No.: D20591

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: Jody Owens

Title: member/owner Date: 5/12/2010

Subscribed and sworn to before me this 12th day of May

2010

Notary Public: Saundra S. Hite

Date Commission Expires: 3-22-2014

KCC Office Use ONLY

N Letter of Confidentiality Received

If Denied, Yes Date: _____

_____ Wireline Log Received

_____ Geologist Report Received

_____ UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 19 2010

 SAUNDRA S. HITE
Notary Public - State of Kansas
My Appt. Expires 3-22-2014

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Owens Petroleum, LLC Lease Name: Reynard Well #: 8
 Sec. 14 Twp. 24 S. R. 15 East West County: Woodson

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 checked="" type="checkbox"/> Yes <input 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: Gamma Ray/Neutron/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Squirrel 1130 -15
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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	9-7/8"	7"	17	40'	Portland	20	none
Production Casing	5-5/8"	2-7/8"	6.7	1234	OWC	142	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 (Amount and Kind of Material Used)	Depth
3	1130' - 1140'; 1175' - 1183	Spotted 2 bbl of 15% acid on zone; frac w/ <u>142</u> sacks of sand	

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 MAY 19 2010
 CONSERVATION DIVISION
 WICHITA, KS

TUBING RECORD:		Size: <u>2-7/8"</u>	Set At: <u>1234'</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.			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.	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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date	Invoice #
4/6/2010	A-44901

Cement Treatment Report

Owens Petroleum Company
1274 202 Road
Yates Center, KS 66783

(x) Landed Plug on Bottom at 800 PSI
(x) Shut in Pressure 800
(x) Good Cement Returns
() Topped off well with _____ sacks
(x) Set Float Shoe - shut it

TYPE OF TREATMENT: Production Casing
HOLE SIZE: 5 5/8"
TOTAL DEPTH: 1245

Well Name	Terms	Due Date		
	Net 15 days	4/21/2010		
Service or Product	Qty	Per Foot Pricing/Unit Pricing	Amount	
Run and cement 2 7/8"	1,234	2.20	2,714.80	
Sales Tax		6.30%	0.00	

Reynard #8
Woodson County
Sec: 14
Twn: 24
Rge: 15
API:

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MAY 19 2010

CONSERVATION DIVISION
WICHITA, KS

Hooked onto 2 7/8" casing. Established circulation with 8 barrels of water, 4 GEL, 1 METSO, COTTONSEED ahead, blended 142 sacks of OWC cement, dropped rubber plug, and pumped 7.2 barrels of water

Total	\$2,714.80
Payments/Credits	\$0.00
Balance Due	\$2,714.80

PROPERTY OF FINANCIAL CT
 IS NOT TO BE REPRODUCED OR
 TRANSMITTED IN ANY FORM OR
 BY ANY MEANS, ELECTRONIC OR
 MECHANICAL, INCLUDING PHOTOCOPYING,
 RECORDING, OR BY ANY INFORMATION
 STORAGE AND RETRIEVAL SYSTEM.

THE NEW KLEIN LUMBER COMPANY
 201 W. MADISON
 P.O. BOX 805
 IOLA, KS 66749
 PHONE: (620) 365-2201

PAGE NO 1

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCE	TERMS	CLERK	DATE	TIME
253607				NET 10TH OF MONTH		4/14/10	7:45

SCOTT OWENS
 1274 202 RD
 YATES CENTER KS 66783

S
H
I
P
T
O

TERMS51
 DOCH 118016

 * INVOICE *

TAX : 001 IOLAL IOLA

SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SUGG	UNITS	PRICE/PER	EXTENSION
150		EA	PC	PORTLAND CEMENT	9.45	150	8.95 /EA	1,342.50
5		EA	F	PALLETS		5	20.00 /EA	100.00
2		EA	DELIVERY	DELIVERY CHARGE		2	25.00 /EA	50.00

** AMOUNT CHARGED TO STORE ACCOUNT ** 1,601.45 TAXABLE 1492.50
 NON-TAXABLE 0.00
 SUBTOTAL 1492.50

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TAX AMOUNT 108.95
 TOTAL AMOUNT 1601.45