## KANSAS CORPORATION COMMISSION OCT 18 2010 WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE WELL & LEASE UNION LEAD Form Must be Signed All blanks must be Filled Color of the Color o

All blanks must be Filled

| OPERATOR: License #  | API No. 15 - 051-26025-00-00  |
|--|---|
| Name: TDI, Inc.  | Spot Description:   |
| Address 1: 1310 Bison Road   | SW_NE_NE_SE_Sec. 9 Twp. 15 S. R. 18 East V West   |
| Address 2:   | 2,100 Feet from North / South Line of Section   |
| City: Hays State: KS Zip: 67601 + 9696   |   |
| Contact Person: Tom Denning  | Footages Calculated from Nearest Outside Section Corner:  |
| Phone: ( 785 ) 628-2593  | □ NE □ NW ☑ SE □ SW   |
| CONTRACTOR: License #_33350 KCC  | County: Ellis   |
| Name: Southwind Drilling, Inc.   | Lease Name: Munsch Well #: 3  |
| Wellaite Coolerint, Herb Deines  | Field Name: Schoenchen  |
| Purchaser: Coffeyville Resources  CONFIDENTIAL   | Producing Formation: Arbuckle   |
| Designate Type of Completion:  | Elevation: Ground: 2026' Kelly Bushing: 2036'   |
| ✓ New Well Re-Entry Workover   | Total Depth: 3738' Plug Back Total Depth: 3711'   |
|  | Amount of Surface Pipe Set and Cemented at: 220 Feet  |
| ✓ Oil WSW SWD SIOW  Gas D&A ENHR SIGW  | Multiple Stage Cementing Collar Used?   ✓ Yes   No  |
| OG GSW Temp. Abd.  | If yes, show depth set: 1223 Feet   |
| CM (Coal Bed Methane)  | If Alternate II completion, cement circulated from: 1223  |
| Cathodic Other (Core, Expl., etc.):  | feet depth to: surface w/_ 130 sx cmt.  |
| If Workover/Re-entry: Old Well Info as follows:  | eet depth to: sx cmt.   |
| Operator:  |   |
| Well Name:   | Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)  |
| Original Comp. Date: Original Total Depth:   |   |
| Deepening Re-perf. Conv. to ENHR Conv. to SWD  | Chloride content: 48,000 ppm Fluid volume: 1,000 bbls   |
| Conv. to GSW   | Dewatering method used: evaporation   |
| ✓ Plug Back: 3711' Plug Back Total Depth   | Location of fluid disposal if hauled offsite:   |
| Commingled Permit #:   | Operator Name:  |
| Dual Completion Permit #:  | Lease Name: License #:  |
| SWD Permit #:  | Quarter Sec TwpS. R   |
| ENHR Permit #:   | County: Permit #:   |
| GSW Permit #:  | resmit #.   |
| 09/09/2010         09/15/2010         10/07/2010           Spud Date or         Date Reached TD         Completion Date or   |   |
| Recompletion Date Recompletion Date  |   |
| INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas 67202, within 120 days of the spud date, recompletion, workover or confuside two of this form will be held confidential for a period of 12 months if requitality in excess of 12 months). One copy of all wireline logs and geologist well BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form | oversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information ested in writing and submitted with the form (see rule 82-3-107 for confidence of the standard with this form. ALL CEMENTING TICKETS MUST |
| AFFIDAVIT  am the affiant and I hereby certify that all requirements of the statutes, rules and requirements of the statutes, rules and requirements of the statutes.  | 1 A Lasting of Confidentiality Department .   |
| and the statements herein are complete and correct to the best of my knowledge.  | 101/6/2 / 101/6/2/  |
|  | Confidential Release Date:  |
| Signature:   | Wireline Log Received Geologist Report Received   |
| Title: Tom Denning, President Date: 10/16/2010   | UIC Distribution  |
| Date: 10/10/2010   | ALT I II III Approved by: Date:   |