



KANSAS CORPORATION COMMISSION 1046582
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33702
Name: Magnum Engineering Company
Address 1: 500 N SHORELINE BLVD STE 322
Address 2:
City: CORPUS CHRISTI State: TX Zip: 78401 + 0313
Contact Person: Anil Pahwa
Phone: (361) 882-3858
CONTRACTOR: License # 34133
Name: Kurtis Energy LLC
Wellsite Geologist: n/a
Purchaser: Coffeyville Resources Refining & Marketing LLC

Designate Type of Completion:

- ☒ New Well ☐ Re-Entry ☐ Workover
☒ Oil ☐ WSW ☐ SWD ☐ SIOW
☐ Gas ☐ D&A ☐ ENHR ☐ SIGW
☐ OG ☐ GSW ☐ Temp. Abd.
☐ CM (Coal Bed Methane)
☐ Cathodic ☐ Other (Core, Expl., 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
☐ Conv. to GSW

- ☐ Plug Back: Plug Back Total Depth
☐ Commingled Permit #:
☐ Dual Completion Permit #:
☐ SWD Permit #:
☐ ENHR Permit #:
☐ GSW Permit #:

08/12/2010 08/18/2010 10/12/2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-125-31980-00-00

Spot Description:

SE NW NW SE Sec. 4 Twp. 34 S. R. 14 ☒ East ☐ West
2,150 Feet from ☐ North / ☒ South Line of Section
2,250 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: Montgomery

Lease Name: Defenbaugh C.J. Well #: 25

Field Name: Wayside-Havana

Producing Formation: Wayside & Weiser

Elevation: Ground: 875 Kelly Bushing: 875

Total Depth: 840 Plug Back Total Depth: 836

Amount of Surface Pipe Set and Cemented at: 23 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from: 836

feet depth to: 0 w/ 90 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: License #:

Quarter Sec. Twp. S. R. ☐ East ☐ West

County: Permit #:

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

☐ Letter of Confidentiality Received

Date:

☐ Confidential Release Date:

☒ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution

ALT ☐ I ☒ II ☐ III Approved by: Deanna Garrison Date: 11/05/2010



1046582

Operator Name: Magnum Engineering Company Lease Name: Defenbaugh C.J. Well #: 25
 Sec. 4 Twp. 34 S. R. 14 ☒ East ☐ West County: Montgomery

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 complete copy of all Electric Wire-line 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: GR-N	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width: 100%;"> <tr> <td style="width: 60%;">Name</td> <td style="width: 20%;">Top</td> <td style="width: 20%;">Datum</td> </tr> <tr> <td>Wayside</td> <td>696</td> <td></td> </tr> <tr> <td>Weiser</td> <td>790</td> <td></td> </tr> </table>	Name	Top	Datum	Wayside	696		Weiser	790	
Name	Top	Datum								
Wayside	696									
Weiser	790									

CASING RECORD <input checked="" 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	8.625	20	23	Portland	9	
Production	6.75	4.50	11.5	836	Ticket attached	90	Ticket attached

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
2	20	15% HCL, 12/20 & 16/30 sand	696'-716'
3	7	15% HCL, 12/20 & 16/30 sand	794'-801'

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. 10/18/2010			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. 2.0	Gas Mcf	Water Bbls. 20	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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: 696'-716' 794'-801'
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PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT

TICKET NUMBER 27836

LOCATION Bethleville OK

FOREMAN DANNIE TATE

820-431-9210 or 800-467-8676		CEMENT					
DATE	CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
8/18/10	5623	DEFENBAUGH #25		4	34	14E	Mont KS
CUSTOMER							
MAGNUM							
MAILING ADDRESS							
CITY		STATE	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
				419	JAMES N		
				551	CHANCEY		
				514 T-64	RICK P		

JOB TYPE	LS	HOLE SIZE	63/4	HOLE DEPTH	840	CASING SIZE & WEIGHT	4 1/2
CASING DEPTH	835	DRILL PIPE		TUBING		OTHER	
SLURRY WEIGHT		SLURRY VOL		WATER gal/sk		CEMENT LEFT in CASING	0
DISPLACEMENT	13.3	DISPLACEMENT PSI	400*	MIX PSI	200*	RATE	4 1/2

DISPLACEMENT 13.3 DISPLACEMENT FOR 150 MAX. 15.2

REMARKS: EST. CIRC W/GEL/LEM/HO - LNW 90 SX THICK SET
WITH 5" KOL 10% SALT .40 PHONO - WASH OUT PLUG AND
LINES RELEASE PLUG DIB, 13.3 BBL TO SET SHOE

Cont TO Sulf.

[illegible]

Bayin 3737

AUTHORIZATION

TITLE

DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.