

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL**

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 # 6227  
Name: Kraft Oil LLC  
Address 1: 434 Iris Rd Sw  
Address 2: \_\_\_\_\_  
City: Gridley State: KS Zip: 66852 + \_\_\_\_\_  
Contact Person: Thomas A. Kraft  
Phone: ( 620 ) 836-2091  
CONTRACTOR: License # 33557  
Name: Skyy Drilling  
Wellsite Geologist: Owner  
Purchaser: High Sierra Crude Purchasing

**RECEIVED**

**NOV 23 2010**

**KCC WICHITA**

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SLOW  
 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 #: \_\_\_\_\_

<u>09/09/2010</u>	<u>09/14/2010</u>	<u>10/06/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 031-22727-0000  
Spot Description: \_\_\_\_\_  
E/2 w/2 NE SE Sec. 14 Twp. 23 S. R. 14  East  West  
1,980 Feet from  North /  South Line of Section  
850 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Coffey  
Lease Name: Cochran Well #: 4  
Field Name: Winterschied  
Producing Formation: Squirrel sand  
Elevation: Ground: 1112 Kelly Bushing: \_\_\_\_\_  
Total Depth: 1305 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: 1300  
feet depth to: Surface w/ 175 sx cmt.

**Drilling Fluid Management Plan**

(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 #: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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.

**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.

Signature: Thomas A. Kraft  
Title: Operator Date: 11/21/2010

**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: DJg Date: 11/30/10

Operator Name: Kraft Oil LLC Lease Name: Cochran Well #: 4  
 Sec. 14 Twp. 23 S. R. 14  East  West County: Coffey

**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  Yes  No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey  Yes  No

Cores Taken  Yes  No

Electric Log Run  Yes  No

Electric Log Submitted Electronically  Yes  No  
 (If no, Submit Copy)

Log Formation (Top), Depth and Datum  Sample

Name Top Datum

Squirrel sand 1248-1257

List All E. Logs Run:  
 Cornish- Gamma Ray/ Neutron , Cement Bond

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"	8 5/8"		40'	Portland	35	
Long String	<del>6 3/4"</del> 6 3/4"	4.5"		1300'	Poz-Mix	175	

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	19 shots (1248' to 1257')	Fracture (50 sks sand & 150 bbl gel water)	
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TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>1245 1246 1250</u> Packer At:		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>10/20/2010</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>1</u>	Gas Mcf <u>10</u> Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 29106

LOCATION Eureka

FOREMAN Troy Strickler

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

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																
9-14-10	4418	Cochran #4				Coffey																
CUSTOMER Kraft Oil LLC / Arnold Kraft			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>485</td> <td>Alan</td> <td></td> <td></td> </tr> <tr> <td>479</td> <td>John</td> <td></td> <td></td> </tr> <tr> <td>437</td> <td>Alan B</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	485	Alan			479	John			437	Alan B		
TRUCK #	DRIVER	TRUCK #					DRIVER															
485	Alan																					
479	John																					
437	Alan B																					
MAILING ADDRESS 434 Iris Rd. SW																						
CITY STATE ZIP CODE Gridley KS 66852																						

JOB TYPE LS 0' HOLE SIZE 6 3/4" HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 4 1/2" 10.5" used  
 CASING DEPTH 1300' GL DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.6 # SLURRY VOL \_\_\_\_\_ WATER gal/sk 7.0 CEMENT LEFT IN CASING 0'  
 DISPLACEMENT 20.88bl DISPLACEMENT PSI 600 MIX PSI 1200 Ryp P3 RATE \_\_\_\_\_

REMARKS: Safety Meeting! Rig up to 4 1/2" casing. Break Circulation w/ 108bl water.  
Mixed 175sk 60/40 Poz-mix Cement w/ 5" Kol-Seal 1sk, 4% Gel, 1% Cacl<sub>2</sub> + 1/2" Phenoseal 1sk @ 13.6 #/gal. Work out Pump + lines. Release Plug. Displace w/ 20.88bl Fresh water. Final Pumping Pressure 600 PSI. Pump Plug to 1200 PSI. Wait Env. Release Pressure. Float Held. Good Cement to surface = 78bl Slurry to pit.

*Job Complete*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	30	MILEAGE	3.65	109.50
1131	175sk	60/40 Poz-mix Cement	11.35	1986.25
1110A	875#	5" Kol-Seal 1sk	.42	367.50
1118B	600#	4% Gel	.20	120.00
1102	150#	1% Cacl <sub>2</sub>	.75	112.50
11074	88#	1/2" Phenoseal 1sk	1.15	101.20
5407	7.52 Ton	Ton-mileage	m/c	315.00
5502C	4hrs	808bl Vac Truck	100.00	400.00
1123	300gal	City Water	14.90/100	44.70
4129	3	4 1/2" x 6 3/4" Centralizers	40.00	120.00
4103	2	4 1/2" Cement Baskets	208.00	416.00
4161	1	4 1/2" AFU Float Plug	273.00	273.00
4404	1	4 1/2" Top Rubber Plug	45.00	45.00
			6.82	5335.65
			SALES TAX	225.94
			ESTIMATED TOTAL	5561.59

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*036621*

AUTHORIZATION Arnold Kraft TITLE Owner 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.

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

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-9-10	4418	Cachron #4	14	23	14E	Coffey
CUSTOMER Kraft Oil LLC, Arnold Kraft						
MAILING ADDRESS 434 Iris Rd SW			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Gridley			485	Alan		
STATE KS			0479	Chris		
ZIP CODE 66852						

JOB TYPE surface HOLE SIZE 12 1/4" HOLE DEPTH 41' CASING SIZE & WEIGHT 8 5/8"  
 CASING DEPTH 40' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 15# SLURRY VOL \_\_\_\_\_ WATER gal/sk 6.5 CEMENT LEFT in CASING 5'  
 DISPLACEMENT 2 1/2 gal DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting. Rig up to 2 1/2" casing. Break circulation w/ 5 bbl fresh water. Mixed 35 sac class "A" cement w/ 2% cacl2 + 2% gel @ 15#/gal. Displace w/ 2 1/2 gal fresh water. shut casing in w/ good cement returns to surface. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54013	1	PUMP CHARGE	725.00	725.00
5406	30	MILEAGE	3.65	109.50
11045	35 sac	class A cement	13.50	472.50
1102	65#	2% cacl2	.75	48.75
11188	65#	2% gel	.20	13.00
5407		ton mileage bulk tax	n/c	315.00
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KCC WICHITA				
				subtotal 11683.75
				SALES TAX 33.66
				ESTIMATED TOTAL 11717.41

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AUTHORIZATION witnessed by Ben Harrel TITLE Talaska 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.