

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 # 5723
Name: JOHN M. DENMAN OIL CO INC.
Address 1: P.O. BOX 36
Address 2: 202 SOUTH CHAUTAUQUA
City: SEDAN State: KS Zip: 67361 + _____
Contact Person: WAYNE BRIGHT
Phone: (620) 725-3727
CONTRACTOR: License # 5831
Name: MOKAT DRILLING CO.
Wellsite Geologist: _____
Purchaser: COFFEYVILLE RESOURCES

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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 #: _____

9/7/2010	9/13/2010	9/22/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 019-27002-00-00

Spot Description: _____
NE NE NW SE Sec. 27 Twp. 34 S. R. 10 East West
2,475 Feet from North / South Line of Section
1,375 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: CHAUTAUQUA
Lease Name: JOHNSON Well #: A-5
Field Name: ELGIN
Producing Formation: WAYSIDE
Elevation: Ground: 1056 EST Kelly Bushing: _____
Total Depth: 1590 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: 1590'
feet depth to: SURFACE w/ 170 sx crnt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content: FRESH WATER ppm Fluid volume: 100 bbls
Dewatering method used: AIR DRY

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: [Signature]
Title: AGENT Date: 1-21-11

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: [Signature] Date: 1/25/11

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Operator Name: JOHN M. DENMAN OIL CO INC. Lease Name: JOHNSON Well #: A-5
 Sec. 27 Twp. 34 S. R. 10 East West County: CHAUTAUQUA

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: GAMMA RAY NEUTRON	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum WAYSIDE 1481'
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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	11"	8 5/8"		40	PORTLAND	10	2% CAL
CASING	6 3/4"	4 1/2"	10.5	1577'	PORTLAND	170	

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 <i>(Amount and Kind of Material Used)</i>	Depth
2	1100'-1105'	SPOTTED 300 GAL HYD-ACID FRAC WITH 25 SKS 10 - 20 SAND	1100'
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TUBING RECORD: Size: <u>2 3/8</u> Set At: <u>1095'</u> Packer At:		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No KCC WICHITA
Date of First, Resumed Production, SWD or ENHR. <u>9/25/2010</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>20</u>	Gas Mcf <u>0</u> Water Bbls. <u>30</u> Gas-Oil Ratio _____ Gravity <u>32</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" 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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>1100'-1105'</u> RECEIVED
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

JAN 24 2011
KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 67220
620-431-8218 or 800-467-9678

TICKET NUMBER 29122

LOCATION EUREKA

FOREMAN Kevin McCoy

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-14-10	2223	Johnson A-5	27	345	10E	CQ
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Denman Oil			445	Justin		
MAILING ADDRESS			515	Chris		
P.O. Box 36			437	Allen B		
CITY	STATE	ZIP CODE	452 T63	DAVE		
Solan	Ks	67361				

JOB TYPE Long string HOLE SIZE 6 3/4 HOLE DEPTH 1590' CASING SIZE & WEIGHT 4 1/2 10.5# NEW
 CASING DEPTH 1577 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.4# SLURRY VOL 59 BBL WATER gal/sk 10 CEMENT LEFT in CASING 0'
 DISPLACEMENT 25.7 BBL DISPLACEMENT PSI 900 MIX PSI 1400 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2 casing. BREAK circulation w/ 35 BBL Fresh water. Pump 6 sks Gel flush 15 BBL Dye water. Mixed 170 sks Thick Set Cement w/ 5# Kol-Seal 1sk @ 13.9# / gal, yield 1.95. wash out Pump & Lines. Shut down. Release Plug. Displace Plug to Seat w/ 25.7 BBL Fresh water. Final Pumping Pressure 900 psi. Bump Plug to 1400 psi. wait 2 minutes Release Pressure. Float Held. Shut casing in @ 0 psi. Good Cement Returns to Surface = 8 BBL slurry to Pit. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	45	MILEAGE	3.65	164.25
5402	1577'	Footage	.20	315.40
1126 A	170 SKS	THICK Set Cement	17.00	2890.00
1110 A	850 #	Kol-Seal 5# /sk	.42	357.00
1118 B	300 #	Gel flush	.20	60.00
5407	9.35 TONS	Ton Mileage	M/c	315.00
5501 C	3 Hrs	water TRANSPORT	112.00	336.00
5502 C	3 Hrs	80 BBL VAC TRUCK	100.00	300.00
1123	8000 gals	City water	14.90/1000	119.20
4404	1	4 1/2 Top Rubber Plug	45.00	45.00
		10% discount IF paid in 30 days = 611.50		
		5503.46		
		SubTotal		5826.85
		THANK YOU	8.3%	
		SALES TAX		288.11
		ESTIMATED TOTAL		6114.96

AUTHORIZATION Kevin Burt 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.