

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5150
Name: COLT ENERGY, INC
Address 1: PO BOX 388
Address 2: 1112 RHODE ISLAND RD
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111
CONTRACTOR: License # 5989
Name: FINNEY DRILLING COMPANY
Wellsite Geologist: REX ASHLOCK
Purchaser: COFFEYVILLE RESOURCES,LLC

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW
 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.: _____
12/23/10 1/4/2011 DRY/PLUGGED
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

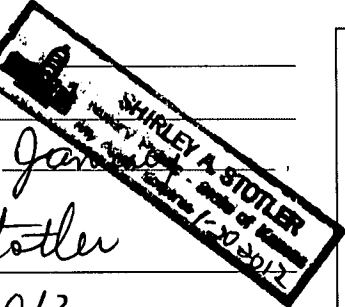
API No. 15 - 001-30,116-00-00
Spot Description: SE/4
N/2 SE SW SE Sec. 9 Twp. 24 S. R. 18 East West
495 Feet from North / South Line of Section
1650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: ALLEN
Lease Name: KIRK Well #: C-1
Field Name: IOLA
Producing Formation: BARTLESVILLE
Elevation: Ground: 1008 Kelly Bushing: --
Total Depth: 1136 Plug Back Total Depth: NONE
Amount of Surface Pipe Set and Cemented at: 42.3 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: DRY/PLUGGED Feet
If Alternate II completion, cement circulated from: DRY/PLUGGED
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: PIT HAS NOT BEEN FILLED AT THIS TIME
Location of fluid disposal if hauled offsite:
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

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: Dennis Kershner
Title: OFFICE MANAGER Date: _____
Subscribed and sworn to before me this 27th day of Jan
20 11
Notary Public: Shirley A Stotler
Date Commission Expires: 1-20-2012



KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes No Date: RECEIVED
 Wireline Log Received JAN 31 2011
 Geologist Report Received
 UIC Distribution
AH 2-Dlg - 2/7/11 KCC WICHITA

Operator Name: COLT ENERGY, INC Lease Name: KIRK Well #: C-1
 Sec. 9 Twp. 24 S. R. 18 East West County: ALLEN

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 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 <i>(Submit Copy)</i> List All E. Logs Run: DUAL INDUCTION LL3/GR LOG, HIGH RESOLUTION COMPENSATED DENSITY SIDEWALL NEUTRON LOG	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum DRILLERS LOG ATTACHED
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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	12 1/4	8 5/8	24#	42.3	PORTLAND	8	
DRY/PLUGGED							
WITH DRILL PIPE							

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
	DRY/PLUGGED		
		RECEIVED JAN 31 2011 KCC WICHITA	

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. _____		Producing Method: <input type="checkbox"/> Flowing <input 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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W & W Production Company

1150 Highway 39
Chanute, Kansas 66720-5215

Mobile: 620-431-5970

Phone: Office/Home 620-431-4137

Invoice

DATE	INVOICE NO.
1/7/2011	45261

BILL TO
Colt Energy C/O Rex Ashlock PO Box 388 1112 Rhode Island Rd. Iola, Kansas 66749

Plugged Well C-1 Kirk Allen County, Kansas
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AD

SERVICED	ITEM	DESCRIPTION	QTY	RATE	AMOUNT
1/4/2011	Pump Truck	Pump Charge	1	400.00	400.00T
	Cement	For plugging	130	8.00	1,040.00T
	Gel	Gel - 7 sacks X \$20.00	1	140.00	140.00T
<i>123000126 - 1695.34</i>					
				Sales Tax (7.3%)	\$115.34
				Total	\$1,695.34

RECEIVED
JAN 31 2011
KCC WICHITA

Fax #	Fed. I.D. 48-0843238
620-431-3183	carolwimsett4@yahoo.com



January 27, 2011

KCC Conservation Office
130 S Market, Room 2078
Wichita, Kansas 67202-1286

To Whom It May Concern:

Enclosed please find copies of Well Plugging Record CP-4 and Well Completion Form ACO-1 Kirk C-1 located in Allen County and Well Plugging Record CP4 Kroeker-Goley OW-1 located in Montgomery Co., Kansas.

As you will note there is only minimal information available for this well.

And when the weather permits we will close the drill pit and submit the CDP4 and CDP5 to your office for the Kirk C-1.

If you have any questions, contact Shirley Stotler at 620-365-3111.

Sincerely,
COLT ENERGY, INC.
Shirley Stotler
Shirley Stotler
Production Clerk
Ss
Encl.

RECEIVED

JAN 31 2011

KCC WICHITA