

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 # 34262  
Name: Lelia M. Roberts  
Address 1: P.O.Box 421  
Address 2: \_\_\_\_\_  
City: Olathe State: KS Zip: 66051 + \_\_\_\_\_  
Contact Person: Bill Gaudern  
Phone: ( 785 ) 229-5682  
CONTRACTOR: License # 33734  
Name: Hat Drilling  
Wellsite Geologist: n/a  
Purchaser: Coffeyville Resources

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 #: \_\_\_\_\_  
11-17-2010    11-22-2010    11-23-2010  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 091-23436-00-00  
Spot Description: \_\_\_\_\_  
NE NW SW NW Sec. 29 Twp. 14 S. R. 22  East  West  
3,650 Feet from  North /  South Line of Section  
4,640 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Johnson  
Lease Name: Red Dragon Oil Well #: 61  
Field Name: Longanecker Southeast  
Producing Formation: Bartlesville  
Elevation: Ground: est 1017 Kelly Bushing: 1022  
Total Depth: 900' Plug Back Total Depth: 895' (pipe ran)  
Amount of Surface Pipe Set and Cemented at: 25 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 895  
feet depth to: surface w/ 133 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: n/a  
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: Lelia M. Roberts  
Title: operator Date: 2/11/11

**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: Dg **KCC WICHITA**  
2/18/11

Operator Name: Lelia M. Roberts Lease Name: Red Dragon Oil Well #: 61  
 Sec. 29 Twp. 14 S. R. 22  East  West County: Johnson

**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 (Attach Additional Sheets)  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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If no, Submit Copy)  List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top); Depth and Datum <input type="checkbox"/> Sample Name Top Datum  See attached log
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	8 5/8"	7"		25'	Portland	6	none
Production	5 5/8"	2 7/8"		895'	50/50 poz	133	50%poz, 6%salt, 2%prem gel

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	854' - 859'	150 gal 15% HCL, 35sx 8-12 sand, 5sx 12-20 sand	854' - 859'

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>895'</u> Packer At: <u>n/a</u> Liner Run: <input type="checkbox"/> Yes <input checked="" 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. <u>1</u> Gas Mcf <u> </u> Water Bbls. <u>25</u> Gas-Oil Ratio <u> </u> Gravity <u>24</u>

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. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>854' - 859'</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

FEB 14 2011

KCC WICHITA

RECEIVED

HAT DRILLING  
 12371 KS HWY 7  
 MOUND CITY, KS 66056  
 LICENSE # 33734

Roberts 61  
 API # 15-091-23436-00-00  
 SPUD DATE 11-17-10

Footage	Formation	Thickness	Set 25' of 7" TD 900' Ran 895' of 2 7/8
2	Topsoil	2	
8	clay	6	
35	shale	27	
67	lime	32	
76	shale	9	
85	lime	9	
93	shale	8	
114	lime	21	
135	shale	21	
169	lime	34	
182	shale	13	
210	lime	28	
230	shale	20	
236	lime	6	
256	shale	20	
264	lime	8	
269	shale	5	
280	lime	11	
321	shale	41	
346	lime	25	
358	shale	12	
399	lime	41	
544	shale	145	
575	lime	31	
577	shale	2	
592	lime	15	
608	shale	16	
612	lime	4	
854	shale	242	
860	sand	6	good bleed and odor
900	shale	40	

RECEIVED  
 FEB 14 2011  
 KCC WICHITA



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 27259  
LOCATION Ottawa KS  
FOREMAN Fred Mader

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
11/23/10	1747	Red Dragon # 61	NW 29	M 20	220	JO
CUSTOMER <u>Red Dragon</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>P O Box 431</u>			506	Fred	Safety Mfg	
CITY <u>Olathe</u>			368	Ken	RH	
STATE <u>KS</u>			370	Arten	MW	
ZIP CODE <u>66061</u>			548	Tom	TAU	

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 914' CASING SIZE & WEIGHT 2 7/8"  
CASING DEPTH 895' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT IN CASING 2 1/2" Plug  
DISPLACEMENT 5.2 BA DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4BPM

REMARKS: Check casing depth w/ wireline. Establish circulation  
Mix + Pump 100# Premium Gel Flush. Mix + Pump 138 8#  
50/50 Por Mix Cement 2% Gel 5% Salt. Cement to Surface  
Flush pump + lines clean. Displace 2 1/2" Rubber plug to  
casing TD. Pressure to 700\* PSI. Release pressure to  
set float valve. Shut in casing.

*Fred Mader*

Flat Drilling

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		9.25 <sup>00</sup>
5406	30 mi	MILEAGE		109.50 <sup>00</sup>
5402	895	Casing Footage		N/C
5407	Minimum	Tom Miles		3.15 <sup>00</sup>
5502C	2003	80 BBU Vac Truck		200.00 <sup>00</sup>
1124	133 8.ks	50/50 Por Mix Cement		1308.23
1118B	332#	Premium Gel		66.40
1111	292#	Granulated Salt		96.36
4402	1	2 1/2" Rubber Plug		23.00
			RECEIVED	
			FEB 14 2011	
			KCC WICHITA	
			7.525%	
			SALES TAX	112.96
			ESTIMATED	
			TOTAL	3156.44

Ravin 3737

AUTHORIZATION Bill L. Hand 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.