



KANSAS CORPORATION COMMISSION 1053280

Form ACO-1

June 2009

**CONFIDENTIAL**

OIL &amp; GAS CONSERVATION DIVISION

Form Must Be Typed

Form must be Signed

All blanks must be Filled

**WELL COMPLETION FORM****WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 33741

Name: Enerjex Kansas, Inc.

Address 1: 27 CORPORATE WOODS, STE 350

Address 2: 10975 GRANDVIEW DR

City: OVERLAND PARK State: KS Zip: 66210 +

Contact Person: Marcia Littell

Phone: ( 913 ) 754-7740

CONTRACTOR: License # 32834

Name: JTC Oil, Inc.

Wellsite Geologist: NA

Purchaser: Coffeyville Resources

## 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 #:

02/15/2011 02/21/2011 03/28/2011

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-059-25535-00-00

Spot Description:

SW SW NW NW Sec. 17 Twp. 18 S. R. 21 ☒ East ☐ West4,030 Feet from ☐ North / ☒ South Line of Section5,070 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: Franklin

Lease Name: Needham Well #: BSP-5

Field Name: Paola-Rantoul

Producing Formation: squirrel

Elevation: Ground: 973 Kelly Bushing: 0

Total Depth: 720 Plug Back Total Depth: 690

Amount of Surface Pipe Set and Cemented at: 20 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from: 690

feet depth to: w/ 106 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: 04/08/2011

☐ Confidential Release Date:☒ Wireline Log Received☐ Geologist Report Received☐ UIC DistributionALT ☐ I ☒ II ☐ III Approved by: NAOMI JAMES Date: 04/14/2011