

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

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.)

API No. 15 - 031-22,747-000
Spot Description: _____
NW SW NE NW Sec. 1 Twp. 23 S. R. 16 East West
815 Feet from North / South Line of Section
1450 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: COFFEY
Lease Name: BEARD "1" Well #: F5-I
Field Name: NEOSHO FALLS - LEROY
Producing Formation: LOWER SQUIRREL SANDSTONE
Elevation: Ground: 1021 Kelly Bushing: ----
Total Depth: 1067 Plug Back Total Depth: 1056.1
Amount of Surface Pipe Set and Cemented at: 40.7 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1067
feet depth to: SURFACE w/ 125 sx cmt.

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.: _____
11/16/2010 11/19/2010 2/3/2011
Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: PIT NOT 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: 4-19-11
Subscribed and sworn to before me this 19th day of April,
20 11.
Notary Public: Shirley A Stotler
Date Commission Expires: 1-20-2012

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
MA-1-Dlg-5/17/11 **RECEIVED**

APR 25 2011
KCC WICHITA

Operator Name: COLT ENERGY, INC Lease Name: BEARD "1" Well #: F5-1
 Sec. 1 Twp. 23 S. R. 16 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 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: GAMMA RAY/NEUTRON/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum DRILLERS LOG ENCLOSED
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CASING RECORD <input checked="" 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	40.7	OWC	30	
LONG STRING	6.75	4 1/2"	10.5	1056.10	OWC	125	
INJECTION		2 3/8" BRD EUE FIBERGLAS		970			

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	974-982	50 GAL 28% HCL	974-982
		300# 20/40 SAND	
		700# 10/20 SAND	

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">RECEIVED</div>
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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27253
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
11/16/10	1828	Beard 1 # F5-I	N 1	23	14	CF
CUSTOMER Calt Energy Inc			TRUCK #			
MAILING ADDRESS 1112 Rhode Island			DRIVER			
CITY Tola			TRUCK #			
STATE KS			DRIVER			
ZIP CODE 66749			TRUCK #			
			DRIVER			

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 40.75 CASING SIZE & WEIGHT 8 5/8
CASING DEPTH 40.75 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 10' +
DISPLACEMENT 2.5 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.3 BPM

REMARKS: Establish circulation thru 8 5/8" Surface casing.
Mix Pump 30 sks OWC Cement. Displace casing
clean w/ 2.5 BBLs Fresh water. Shut in casing

Finney Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE Surface		725 ⁰⁰
5406	0	MILEAGE Trucks on lease		N/C
5402	40'	Basic Footage		N/C
5407A	70.5	Tom Miles		846 ⁰⁰
5502C	1	80 BBL Vac Truck		100 ⁰⁰
7126	30 sks	OWC Cement		510 ⁰⁰
1118B		Premium test		
		WO# 238067		
			RECEIVED	
			APR 25 2011	
			KCC WICHITA	
			6.3%	SALES TAX 32 ¹³
				ESTIMATED TOTAL 1451 ⁷³

Ravin 3737

AUTHORIZATION [Signature] 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.



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27257
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
11/19/10	1828	Beard 1 # F5-1	NW 1	23	16	CF
CUSTOMER <u>Colt Energy</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>1112 Rhode Island</u>			506	Fred	Safety Mtg	
CITY <u>Iola</u>			495	Casey	CK	
STATE <u>KS</u>			369	Derek	DM	
ZIP CODE <u>66749</u>			503	Tom	TD	

JOB TYPE hangstrom HOLE SIZE 6 3/4 HOLE DEPTH 1070' CASING SIZE & WEIGHT 4 1/2
CASING DEPTH 1057' DRILL PIPE Baffle R TUBING 1054' OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 4 1/2" Plug
DISPLACEMENT 16.7 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5.3 PM

REMARKS: Establish circulation. Mix & Pump 100# Premium Gel Flush.
Mix & Pump 12 BBL Tall tale dye. Mix & Pump 125 SKS
OWC Cement. Flush pump & lines clean. Displace 4 1/2" Rubber
plug to casing TD w 16.7 BBL Fresh water. Pressure to 700#
PSI. Released pressure to set float valve.

Finner Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925 ⁰⁰
5406	50 mi	MILEAGE		182 ⁵⁰
5402	1057'	Casing Footage		N/C
5407A	293.75	Tom Miles		352 ⁵⁰
5502C	2 1/2 hrs	80 BBL Vac Truck		250 ⁰⁰
1126	125 SKS	OWC Cement		2125 ⁰⁰
1118B	100#	Premium Gel		20 ⁰⁰
4404	1	4 1/2" Rubber Plug		45 ⁰⁰
<u>WO# 238187</u>				
				RECEIVED
				APR 25 2011
				KCC WICHITA
				6.3% SALES TAX 137 ⁹⁸
				ESTIMATED TOTAL 4037 ⁹⁸

Ravin 3737

AUTHORIZATION [Signature]

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



MIDWEST SURVEYS
 LOGGING - PERFORATING - CONSULTING SERVICES
 P.O. Box 68, Osawatomie, KS 66064
 913 / 755 - 2128

GAMMA RAY / NEUTRON / CCL

File No.

API # 15-031-22,747

Company **Colt Energy, Inc.**
 Well **Beard "1" No. F5-I**
 Field **Neosho Falls / LeRoy**
 County **Coffey** State **Kansas**

Location	815' FNL & 1450' FWL NW-SW-NE-NW	Other Services	Perforate
Sec. 1	Twp. 23s	Rge. 16e	Elevation
Permanent Datum	GL	Elevation	NA
Log Measured From	GL		K.B. NA
Drilling Measured From	GL		D.F. NA
			G.L. NA

Date	12-03-2010		
Run Number	One		
Depth Driller	1067.0		
Depth Logger	1051.5		
Bottom Logged Interval	1050.5		
Top Log Interval	20.0		
Fluid Level	Full		
Type Fluid	Water		
Density / Viscosity	NA		
Salinity - PPM Cl	NA		
Max Recorded Temp	NA		
Estimated Cement Top	0.0		
Equipment No.	Location	107	Osawatomie
Recorded By	Steve Windisch		
Witnessed By	Rex Ashlock		

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APR 25 2011
KCC WICHITA

BORE-HOLE RECORD				CASING RECORD			
RUN	BIT	FROM	TO	SIZE	WGT.	FROM	TO
One	12.25"	0.0	40.50	8.625"		0.0	40.70
Two	6.75"	40.50	1067.0	4.50"	10.5 #	0.0	1056.10
				Flapper	Set	At	1052.50

Fold Here