

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 # 34392
Name: TexKan Exploration, LLC
Address 1: P.O. Box 191643
Address 2: _____
City: Dallas State: TX Zip: 75219 + _____
Contact Person: Bill Robinson
Phone: (785) 216-0064
CONTRACTOR: License # 34082
Name: Alliance Well Service
Wellsite Geologist: Bill Robinson
Purchaser: Coffeyville

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: Energy Production, Inc.
Well Name: Sauer #1
Original Comp. Date: 2-11-67 Original Total Depth: 4100
 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 #: _____
4-18-11 5-11-10 5-20-11
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 065-20004-00-01
Spot Description: _____
c nw ne Sec. 28 Twp. 9 S. R. 25 East West
660 Feet from North / South Line of Section
1,980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Graham
Lease Name: Sauer Well #: 1
Field Name: Emor, Northwest
Producing Formation: Lansing/Kansas City
Elevation: Ground: 2585 Kelly Bushing: 2590
Total Depth: 4080 Plug Back Total Depth: 4080
Amount of Surface Pipe Set and Cemented at: 210 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 2236 Feet
If Alternate II completion, cement circulated from: 2236
feet depth to: surface w/ 175 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: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

RECEIVED
JUN 07 2011

KCC WICHITA

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: Bill Robinson
Title: agent Date: 6-5-11

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: DIG Date: 6/10/11

Operator Name: TexKan Exploration, LLC Lease Name: Sauer Well #: 1
 Sec. 28 Twp. 9 S. R. 25 East West County: Graham

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: GR-Neutron CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>2217</td> <td>373</td> </tr> <tr> <td>Heebner</td> <td>3819</td> <td>-1229</td> </tr> </table>	Name	Top	Datum	Anhydrite	2217	373	Heebner	3819	-1229
Name	Top	Datum								
Anhydrite	2217	373								
Heebner	3819	-1229								

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	unknown	210	unknown	150	unknown
production	7 7/8	5 1/2	unknown	4097	unknown	125	unknown
production	5 1/2	4 1/2	10.5	4080	60/40	150	4% 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
4	4078	A/250 mud acid RECEIVED	4050
4	3895	A/250 mud acid JUN 07 2011	3890
		KCC WICHITA	

TUBING RECORD: Size: <u>2 7/8</u> Set At: <u>4045</u> Packer At: <u>none</u>		Liner Run: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>6-1-11</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>15</u> Gas Mcf <u>0</u> Water Bbls. <u>10</u>	Gas-Oil Ratio <u>n/a</u> Gravity <u>36</u>

DISPOSITION OF GAS: <input checked="" 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 <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3895- 4078 L/KC</u>
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ALLIED CEMENTING CO., LLC. 039610

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Russell

DATE <u>5/12/11</u>	SEC <u>2E</u>	TWP <u>9S</u>	RANGE <u>25W</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00</u>	JOB FINISH <u>12:30pm</u>
LEASE <u>Save</u>	WELL # <u>1</u>	LOCATION <u>Wakeney N to Redline</u>		COUNTY <u>Wagon</u>	STATE <u>Ks</u>		

OLD OR NEW (Circle one) 1360 / N Wanta

CONTRACTOR <u>F. Spencer well service</u>	OWNER
TYPE OF JOB <u>Case</u>	CEMENT
HOLE SIZE <u>T.D.</u>	AMOUNT ORDERED <u>150 6 1/2 4 8 6-1</u>
CASING SIZE <u>5 1/2</u>	DEPTH <u>4091</u>
TUBING SIZE <u>4 1/2</u>	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX <u>1710PSI</u>	MINIMUM
MEAS. LINE	SHOE JOINT <u>7.80</u>
CEMENT LEFT IN CSG. <u>7.80</u>	
PERFS.	
DISPLACEMENT <u>64.9 bbl</u>	

EQUIPMENT	
PUMP TRUCK	CEMENTER <u>Shane Hunt</u>
# <u>409</u>	HELPER <u>Tony</u>
BULK TRUCK	
# <u>0440</u>	DRIVER <u>Ron</u>
BULK TRUCK	
#	DRIVER
HANDLING MILEAGE	

REMARKS:
Just as they started to break down
Carbide bit was packed into clean
to bleed hole. Esc. a blow
about 150 lbs. Displaced 30 bbl
Carbide bit was displaced
64.9 bbl total did not
cut any

CHARGE TO: Tex Kan

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner, agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Tony Lamberson

SIGNATURE Tony Lamberson

TOTAL CHARGES _____

DISCOUNT _____

SALES TAX (If Any) _____

IF PAID IN 30 DAYS _____