



KANSAS CORPORATION COMMISSION 1054826  
 OIL & GAS CONSERVATION DIVISION

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 # 5150  
 Name: Colt Energy Inc  
 Address 1: PO BOX 388  
 Address 2: \_\_\_\_\_  
 City: IOLA State: KS Zip: 66749 + 0388  
 Contact Person: DENNIS KERSHNER  
 Phone: ( 620 ) 365-3111  
 CONTRACTOR: License # 5989  
 Name: Finney, Kurt dba Finney Drilling Co.  
 Wellsite Geologist: REX ASHLOCK  
 Purchaser: COFFEYVILLE RESOURCES, LLC

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 #: \_\_\_\_\_

<u>12/20/2010</u>	<u>12/23/2010</u>	<u>02/11/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-001-30118-00-00

Spot Description: \_\_\_\_\_  
NE\_NW\_NE\_NE Sec. 16 Twp. 24 S. R. 18  East  West  
165 Feet from  North /  South Line of Section  
825 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
 County: Allen

Lease Name: Cline Well #: D3

Field Name: IOLA

Producing Formation: BARTLESVILLE

Elevation: Ground: 990 Kelly Bushing: 000

Total Depth: 885 Plug Back Total Depth: 885

Amount of Surface Pipe Set and Cemented at: 21 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: 883

feet depth to: 0 w/ 95 sx cmt.

Drilling Fluid Management Plan  
 (Data must be collected from the Reserve Pit)

Chloride content: 1000 ppm Fluid volume: 40 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: COLT ENERGY, INC

Lease Name: CLINE 1-16SWD License #: 5150

Quarter SE Sec. 16 Twp. 24 S. R. 18  East  West

County: ALLEN Permit #: D30662

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: 04/28/2011  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
 ALT  I  II  III Approved by: Deanne Garrison Date: 05/02/2011



1054826

Operator Name: Colt Energy Inc Lease Name: Cline Well #: D3  
 Sec. 16 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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name _____ Top _____ Datum _____ ATTACHMENT
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(if no. Submit Copy)</i>	
List All E. Logs Run: GAMMA RAY/NEUTRON/CCL GAMMA RAY/NEUTRON/CCL	

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	12.25	8.62	24	21.05	1	8	
LONG STRING	6.75	4.5	10.5	882	THICK SET	95	

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 <i>(Amount and Kind of Material Used)</i>	Depth
2	872-875.5	225 GAL HCL	872-875.5
		900# 20/40 SAND	872-875.5
		5100# 12/20 SAND	872-875.5

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. 02/11/2011      Producing Method:  Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls. <u>.25</u>	Gas Mcf _____	Water Bbls. <u>.75</u>	Gas-Oil Ratio _____	Gravity _____
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" 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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 30103

LOCATION Eureka KS

FOREMAN Rick Ledford

PO Box 884, Chanute, KS 66720  
820-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-23-10	1828	Clare #03	16	24	19E	Allen
CUSTOMER <u>Cole Energy</u>			SAFETY MEETING <u>OK OK</u>			
MAILING ADDRESS <u>P.O. Box 388</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY <u>Iola</u>			<u>520</u>	<u>Cliff</u>		
STATE <u>KS</u>			<u>515</u>	<u>Alta G.</u>		
ZIP CODE						

JOB TYPE logstring 0 HOLE SIZE 6 3/4" HOLE DEPTH 883' CASING SIZE & WEIGHT 4 1/2"  
 CASING DEPTH 884' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER PSTO 881'  
 SLURRY WEIGHT 13.4" SLURRY VOL 30 bbl WATER gal/sk 8.0 CEMENT LEFT IN CASING 3' 3.5"  
 DISPLACEMENT 19 BW DISPLACEMENT PSI 500 PSI 1000 bump plug RATE \_\_\_\_\_

REMARKS: Safety meeting. Rig up to 4 1/2" casing. Break circulation w/ fresh water. Pump 4 sacks gel-flush, 5 bbl water spacer, 5 bbl dye water. Mixed 9.5 sacks thickset cement w/ 8" Kel-sol /sk @ 13.4" gal washout pump + lines, shut down, release plug. Displace w/ 14 bbl fresh water. Final pump pressure 500 PSI. Bump plug to 1000 PSI, wait 2 minutes, release pressure, float held. Good cement returns to surface = 9 bbl slurry to pit. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	40	MILEAGE	3.65	146.00
1126A	95 sks	thickset cement	17.00	1615.00
1110A	7100	8" Kel-sol /sk	.42	319.20
1118B	200	gel-flush	.20	40.00
5407	5.23	tan mileage bulk tit	n/c	315.00
4404	1	4 1/2" top rubber plug	45.00	45.00
			subtotal	3405.20
			SALES TAX	147.41
			ESTIMATED TOTAL	3552.61

Rev'n 3737

AUTHORIZATION

R. R. Ledford

TITLE

238881

DATE

12/23/2010

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.

# DRILLERS LOG

API NO: 15-001 - 30118 - 00 - 00

OPERATOR: COLT ENERGY, INC

ADDRESS: P.O. BOX 388, IOLA, KS 66749

WELL #: D-3 LEASE NAME: CLINE

FOOTAGE LOCATION: 165 FEET FROM (N) (S) LINE 825 FEET FROM (E) (W) LINE

CONTRACTOR: FINNEY DRILLING COMPANY

GEOLOGIST: REX ASHLOCK

SPUD DATE: 12/20/2010

TOTAL DEPTH: 883 P.B.T.D.

DATE COMPLETED: 12/23/2010

OIL PURCHASER: COFFEYVILLE RESOURCES

## CASING RECORD

REPORT OF ALL STRINGS - SURFACE, INTERMEDIATE, PRODUCTION, ETC.

PURPOSE OF STRING	SIZE HOLE DRILLED	SIZE CASING SET (in O.D.)	WEIGHT LBS/FT	SETTING DEPTH	TYPE CEMENT	SACKS	TYPE AND % ADDITIVES
SURFACE:	12 1/4	8 5/8	19	21.05	I	8	SERVICE COMPANY
PRODUCTION:	6.75	4.5	10.5	882.15	OWC		SERVICE COMPANY

## WELL LOG

CORES: # \_\_\_\_\_

RAN: \_\_\_\_\_

RECOVERED: \_\_\_\_\_

ACTUAL CORING TIME: \_\_\_\_\_

FORMATION	TOP	BOTTOM
TOP SOIL	0	3
CLAY	3	12
SHALE	12	34
LIME	34	35
SHALE	35	40
LIME	40	42
SHALE	42	56
LIME	56	75
SHALE	75	77
LIME	77	105
SHALE	105	120
LIME	120	122
SHALE	122	135
LIME	135	142
SHALE	142	186
KC LIME	186	248
SHALE	248	251
LIME	251	256
SHALE	256	258
LIME	258	259
SHALE	259	265
LIME	265	277
SHALE	277	282
LIME	282	288
SHALE	288	290
LIME	290	306
BIG SHALE	306	442
SAND	442	458
SHALE	458	478
SAND & LIME	478	498
SHALE	496	503
LIME	503	513
SAND & SHALE	513	528
LIME	528	530
SAND & SHALE	530	543
SHALE	543	566
LIME	566	569
SHALE	569	573
SAND & LIME	573	583
LIME	583	586
SAND & LIME	586	590

FORMATION	TOP	BOTTOM
SHALE SAND	590	594
LIME	594	599
SAND & SHALE	599	613
LIME	613	618
SAND & LIME	618	632
LIME	632	640
SHALE	640	642
LIME	642	646
SHALE	646	651
LIME	651	654
SHALE	654	661
LIME	661	664
SAND & SHALE	664	691
LIME	691	693
SHALE	693	716
SAND & SHALE & LIME	716	721
SAND & SHALE	721	836
LIME	836	837
SAND & SHALE	837	866
WHITE SAND	866	883 T.D.



# WILLIS WELL SERVICE

P.O. BOX 474  
CHANUTE, KS 66720  
620-431-4444  
620-431-8583

5104

DATE: March 25 EQUIP. USED: Missouri Rig

COMPANY NAME: Celt Energy

LEASE NAME: Chin D-3

STARTING TIME: 8<sup>00</sup> ENDING TIME: 5<sup>30</sup>

REMARKS: We drove to lower rig-up used

power swivel, started drilling down to 883'

waited 30min no <sup>fluid</sup> drill 2' more waited

30min no fluid drill 2" oil show

We pulled out spud bit and 5 barrel

water waited one hour, swab back

goal show oil rig down move to F2

rig-up 122 000 205 1092.50

Total TD 122 000 230 1248.00

PARTS: Compressor 885.02'

6x 150<sup>00</sup> 900<sup>00</sup>

Power swivel 6x 50<sup>00</sup> 300<sup>00</sup>

3-4 1/2 v cup swab cups 16<sup>00</sup> each 48<sup>00</sup>

NUMBER OF HOURS: 9.5 COST/HR.: 115<sup>00</sup>

PARTS COST: 1248<sup>00</sup> TOTAL COST: 2340.5<sup>00</sup>

OPER. (Signature) AUTHORIZED SIGNATURE \_\_\_\_\_

Conservation Division  
Finney State Office Building  
130 S. Market, Rm. 2076  
Wichita, KS 67202-3802



phone: 316-337-6200  
fax: 316-337-6211  
<http://kcc.ks.gov/>

Thomas E. Wright, Chairman  
Ward Loyd, Commissioner

Corporation Commission

Sam Brownback, Governor

April 27, 2011

DENNIS KERSHNER  
Colt Energy Inc  
PO BOX 388  
IOLA, KS 66749-0388

Re: ACO1  
API 15-001-30118-00-00  
Cline D3  
NE/4 Sec.16-24S-18E  
Allen County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,  
DENNIS KERSHNER

Conservation Division  
Finney State Office Building  
130 S. Market, Rm. 2078  
Wichita, KS 67202-3802



phone: 316-337-6200  
fax: 316-337-6211  
<http://kcc.ks.gov/>

Thomas E. Wright, Chairman  
Ward Loyd, Commissioner

Corporation Commission

Sam Brownback, Governor

April 29, 2011

DENNIS KERSHNER  
Colt Energy Inc  
PO BOX 388  
IOLA, KS 66749-0388

Re: ACO-1  
API 15-001-30118-00-00  
Cline D3  
NE/4 Sec.16-24S-18E  
Allen County, Kansas

Dear DENNIS KERSHNER:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 12/20/2010 and the ACO-1 was received on April 28, 2011 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department