

**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

**ORIGINAL**

Form ACO-1  
June 2009  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

OPERATOR: License # 5150  
Name: COLT ENERGY, INC  
Address 1: P O 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 # 8509  
Name: EVANS ENERGY DEVELOPMENT, INC.  
Wellsite Geologist: REX ASHLAOCK  
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 (Cool Bed Methane)  
 Cathodic     Other (Core, Expl., etc.): DRY/PLUGGED

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 #: \_\_\_\_\_  
5/4/11    5/5/11    DRY/PLUGGED  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 107-24319-0000  
Spot Description: \_\_\_\_\_  
\_\_\_\_\_ NW SE Sec. 35 Twp. 21 S. R. 22  East  West  
1,980 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: LINN  
Lease Name: LANHAM 361 Well #: 10-351  
Field Name: CRITZER  
Producing Formation: BARTLESVILLE  
Elevation: Ground: 997 Kelly Bushing: \_\_\_\_\_  
Total Depth: 821 Plug Back Total Depth: NONE  
Amount of Surface Pipe Set and Cemented at: 21.6 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: DRY/PLUGGED  
feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls  
Dewatering method used: WELL DRILLED W/AIR NO FLUID/PUSHED IN  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
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: Shirley A Stotter  
Title: PRODUCTION CLERK Date: 6-8-2011

**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: PLA DJG Date: 6/16/11

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JUN 13 2011  
**KCC WICHITA**

Operator Name: COLT ENERGY, INC Lease Name: LANHAM 361 Well #: 10-351  
 Sec. 35 Twp. 21 S. R. 22  East  West County: LINN

**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 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 <i>(If no, Submit Copy)</i>  List All E. Logs Run: HIGH RESOLUTION COMPENSATED DENSITY SIDEWALL NEUTRON LOG, DUAL INDUCTION LL3/GR LOG	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum SEE ATTACHED DRILLERS LOG
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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"	8 5/8"	24#	21.6	PORTLAND	6SXS	
PRODUCTION	7 7/8"	NONE DRY/PLUGGED					

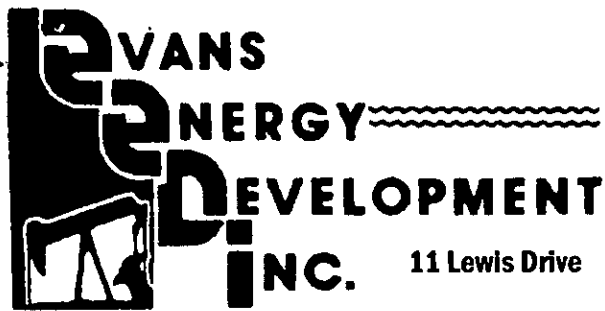
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

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
	DRY/PLUGGED		

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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 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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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11 Lewis Drive

Paola, KS 66071

Oil & Gas Well Drilling  
Water Wells  
Geo-Loop Installation

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG  
Colt Energy, Inc.  
Lanham 10-35I  
API #15-107-24,319  
May 4 - May 5, 2011

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
5	soil & clay	5
30	lime	35
10	shale	45
19	lime	64
3	shale	67
18	lime	85
2	shale	87
5	lime	92
164	shale	256
2	lime	258
1	shale	259
2	lime	261
18	shale	279
9	lime	288 oil show
7	shale	295
7	sand	302 green, no oil
18	shale	320
1	coal	321
15	shale	336
1	coal	337
4	shale	341
14	lime	355
5	shale	360
1	lime	361
9	shale	370
5	lime	375
1	coal	376
28	shale	404
1	coal	405
4	shale	409
9	lime	418
3	shale	421
10	lime	431
23	shale	454
4	sand	458 green, no oil
72	shale	530
2	coal	532
15	shale	547

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1	lime	548
2	shale	550
1	coal	551
1	shale	552
1	coal	553
26	shale	579
1	coal	580
12	shale	592
2	coal	594
10	shale	604
1	coal	605
18	shale	623
1	coal	624
47	shale	671
4	sand	675 grey, no oil
29	shale	704
11.5	oil sand	715.5 brown, lite bleeding
9.5	broken sand	725 no oil
1	coal	726
7	shale	733
0.5	coal	733.5
37.5	shale	771
50	lime	821 Mississippi 821 TD

Drilled a 12 " hole to 21.6'.

Drilled a 7 7/8" hole to 821'.

Set 21.6' of 8 5/8" surface threaded and coupled with 6 sacks cement.

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**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 30526  
LOCATION Eureka  
FOREMAN Steve Mead

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**

CEMENT APT 15-207-24319

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-18-11	1828	Langham # 10-35T	35	21S	22E	Linn
CUSTOMER			TRUCK #			
Calt Energy Inc			485	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			515	Colin		
P.O. Box 358			437	Jim		
CITY		STATE	ZIP CODE			
Tola		Ks	66749			

JOB TYPE PTA 0 HOLE SIZE \_\_\_\_\_ HOLE DEPTH 821' CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING 2 3/4 OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT IN CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting. Rig up to 2 3/4 Tubing. Plug Well As Follow. Pump 300' Gel Ahead. 175' Plug AT 821' Pull Tubing out 400'. Break Circulation spot 50' plug (15500) AT 400'. Pull Tubing up to 200'. Break Circulation Mix Cement 200' To surface. Pull out Tubing Top Well off 80 sk cement. Job Complete Rig down

(Wash down 90' Tubing)

*Thank you*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	975.00	975.00
5406	40	MILEAGE	4.00	160.00
1131	135 sks	60/40 Paz Mix Cement	11.95	1613.25
1118B	460*	4% Gel	.20	92.00
1118B	300*	Gel spacer	.20	60.00
5407		Ten Mileage Bulk Truck	misc	330.00
5302c	5 hrs	80 bbl Vacuum Truck	90.00	450.00
1223	4200 gallons	CITY water	1560 / 2004	65.52
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			KCC WICHITA	
			SubTotal	3745.77
			6.3%	SALES TAX 115.34
			ESTIMATED TOTAL	3861.11

Ravin 3737

AUTHORIZATION [Signature]

TITLE \_\_\_\_\_

DATE 5/19/2011

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