



# CONFIDENTIAL

## OIL & GAS CONSERVATION DIVISION

### WELL COMPLETION FORM

Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

#### WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33741  
 Name: Energex 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) 754-7754  
 CONTRACTOR: License # 32834  
 Name: JTC Oil, Inc.  
 Wellsite Geologist: NA  
 Purchaser: Coffeyville Resources

API No. 15 - 15-121-28873-00-00

Spot Description: \_\_\_\_\_  
NE SE NE SE Sec. 1 Twp. 18 S. R. 21  East  West  
1951 Feet from  North /  South Line of Section  
310 Feet from  East /  West Line of Section

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

County: Miami  
 Lease Name: Howell Gorges Well #: BSI-4  
 Field Name: Paola-Rantoul

Producing Formation: Squirrel

Elevation: Ground: 882 Kelly Bushing: 0

Total Depth: 600 Plug Back Total Depth: 566

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: 566

feet depth to: \_\_\_\_\_ w/ 117 sx cmt.

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>03/31/2011</u>                 | <u>04/07/2011</u> | <u>05/13/2011</u>                       |
| Spud Date or<br>Recompletion Date | Date Reached TD   | Completion Date or<br>Recompletion Date |

#### 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: 06/17/2011
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: NAOMI JAMES Date: 06/22/2011