

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 # 31486
Name: jack Horton
Address 1: PO 97
Address 2: _____
City: Sedan State: ks Zip: 67361 + _____
Contact Person: Jack Horton
Phone: (620) 249 4476
CONTRACTOR: License # 31486
Name: Jack Horton
Wellsite Geologist: _____
Purchaser: Coffeyville Resources

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 #: _____
9-13-10 9-23-10 9-23-10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-125-32009-00-00
Spot Description: _____
ne sw sw ne Sec. 2 Twp. 34 S. R. 14 East West
3,160 Feet from North / South Line of Section
2,240 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Montgomery
Lease Name: Melander Well #: 4
Field Name: Wayside havana
Producing Formation: wayside
Elevation: Ground: 817 Kelly Bushing: _____
Total Depth: 715 Plug Back Total Depth: _____
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: 0
feet depth to: 710 w/ 75 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: evaporate
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: Jack Horton
Title: operator Date: 7/25/11

RECEIVED
KANSAS CORPORATION COMMISSION
KCC Office Use ONLY
JUL 28 2011
 Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____ CONSERVATION DIVISION
WICHITA, KS
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: DJG Date: 8-2-11

Operator Name: Jack Horton Lease Name: Melander Well #: 4
 Sec. 2 Twp. 34 S. R. 14 East West County: Montgomery

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: gamma ray neutron	<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:50%;">Name</td> <td style="width:25%;">Top</td> <td style="width:25%;">Datum</td> </tr> <tr> <td>wayside</td> <td>652-668</td> <td>165</td> </tr> </table>	Name	Top	Datum	wayside	652-668	165
Name	Top	Datum					
wayside	652-668	165					

CASING RECORD <input type="checkbox"/> New <input checked="" 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 casing	9 7/8	7 in	16	20 ft	portland	8	
production casing	5 5/8	2 7/8	6.5	710	portland	75	2 % 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
2	652-668	70 gal acid 6000 lb sand 160 gel water	652-668

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 JUL 28 2011

TUBING RECORD: Size: <u>1 in</u> Set At: <u>695</u> Pecker At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CONSERVATION DIVISION WICHITA, KS
Date of First, Resumed Production, SWD or ENHR. <u>1/05/2011</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>4</u>	Gas Mcf <u>trace</u>	Water Bbls. <u>30 bl</u> Gravity <u>29</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)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>652-668</u>
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CONSOLIDATED
Oil Well Services, LLC

#236783

TICKET NUMBER 27878

LOCATION Bowlk

FOREMAN Coop

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-487-8876

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-22-10	4567	Mellander #4	2	34 S	14 E	Mont
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Kurtis Energy			419	James N		
MAILING ADDRESS			486	Lenny		
Jack Horton operator			0529 T15	John E		
CITY	STATE	ZIP CODE				

JOB TYPE L.S. HOLE SIZE 5 1/2 HOLE DEPTH 215 CASING SIZE & WEIGHT 2 3/8
 CASING DEPTH 210 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING -0-
 DISPLACEMENT 4 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Pumped 10881 ahead, Est circulation pumped 25sk count, flushed pump & lines
 displaced plug to bottom shut in @ 300psi

-Circulated cement to surface-

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KANSAS CORPORATION COMMISSION

Paid on location check # 1725

JUL 28 2011

CONSERVATION DIVISION
WICHITA, KS

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925.00
5406	45	MILEAGE		164.25
5402	210'	Casing Footage		142.00
5403	1	Bulk Truck		315.00
5501L	3hr	Transport		336.00
1126	25sk	OIL cement		1225.00
1111	350#	Salt		115.50
110A	450#	Keal-Sand		189.00
1102A	40#	Phono Sand		46.00
1123	5000gal	City Water		24.50
1402	1	2 3/8 Rubber Plug		23.00
		10% Discount if Paid in 30 Days #3342.43		
		6.3%	SALES TAX	108.50
			ESTIMATED TOTAL	3773.41

AUTHORIZATION _____ 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.