

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 # 5920
Name: Bandy, Terry P. dba Te-Pe Oil & Gas
Address 1: P.O. Box 522
Address 2: _____
City: Canton State: Ks Zip: 67428 + 0 5 2 2
Contact Person: Terry P Bandy
Phone: (620) 628-4428
CONTRACTOR: License # 32701
Name: C & G Drilling Company
Wellsite Geologist: Thomas E Blair
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 #: _____

<u>05/23/07</u>	<u>05/25/07</u>	<u>07/17/07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 027-20042-00-00
Spot Description: SW SW SE
SE - SW SW SE Sec. 10 Twp. 9 S. R. 4 East West
330 319 Feet from North / South Line of Section
2,710 2255 Feet from East / West Line of Section
675-KCC-Dlg
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Clay
Lease Name: Una Well #: 4
Field Name: Wakefield NE
Producing Formation: Mississippi
Elevation: Ground: 1321 Kelly Bushing: 1328
Total Depth: 2032 Plug Back Total Depth: 2008
Amount of Surface Pipe Set and Cemented at: 210 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to: _____ w/ _____ sx cmt.

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Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

KCC WICHITA

Chloride content: _____ ppm Fluid volume: 125 bbls
Dewatering method used: Evaporation
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: Terry P Bandy
Title: Oper. Date: 8-23-11

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: Dlg Date: 8/25/11

Operator Name: Bandy, Terry P. dba Te-Pe Oil & Gas Lease Name: Una Well #: 4
 Sec. 10 Twp. 9 S. R. 4 East West County: Clay

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 Wireline 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: <p style="text-align: center; font-size: 1.2em;">GRN</p>	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>MISSISSIPPIAN CHERT</td> <td>1920</td> <td>-592</td> </tr> <tr> <td>MISSISSIPPIAN LIME</td> <td>1952</td> <td>-622</td> </tr> <tr> <td>KINDERHOOK</td> <td>2020</td> <td>-692</td> </tr> </table>	Name	Top	Datum	MISSISSIPPIAN CHERT	1920	-592	MISSISSIPPIAN LIME	1952	-622	KINDERHOOK	2020	-692
Name	Top	Datum											
MISSISSIPPIAN CHERT	1920	-592											
MISSISSIPPIAN LIME	1952	-622											
KINDERHOOK	2020	-692											

CASING RECORD <input 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	28	210	COMMON	125	3% C C
PRODUCTION	7-7/8	4-1/2	10.5	2028	60/40 POZMIX	100	10% Salt, 5# Gilsonite

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
4	Perforate 1920-1930	Fracture 40,000# sand, 826 BBLs water	1920-1930

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TUBING RECORD:	Size: 2-3/8	Set At: 1900	Packer At: -	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. 07/17/07	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____
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Estimated Production Per 24 Hours	Oil Bbls. 5	Gas Mcf 0	Water Bbls. 35	Gas-Oil Ratio	Gravity 28
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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 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 (Specify) _____	PRODUCTION INTERVAL: 1920-1930
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CONSOLIDATED
OIL WELL
SERVICES, LLC

REMIT TO
Consolidated Oil Well Services, LLC
DEPT. 970
P.O. BOX 4346
HOUSTON, TEXAS 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 213734

Invoice Date: 05/30/2007 Terms: Page 1

TE-PE OIL & GAS
P.O. BOX 522
CANTON KS 67428
(620)628-4428

UNA #4
17418
05-24-07

PAID JUL 9 2007
ck # 20359
A

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	125.00	12.2000	1525.00
1102	CALCIUM CHLORIDE (50#)	325.00	.6700	217.75
1107	FLO-SEAL (25#)	30.00	1.9000	57.00

Description	Hours	Unit Price	Total
463 CEMENT PUMP (SURFACE)	1.00	650.00	650.00
463 EQUIPMENT MILEAGE (ONE WAY)	90.00	3.30	297.00
515 TON MILEAGE DELIVERY	486.00	1.10	534.60

O.K. TO PAY

By _____ Date _____

Charge To _____

Remitted *Cement surface*
CSG.

Accounting Unit
CC _____

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AUG 24 2011
KCC WICHITA

Parts:	1799.75	Freight:	.00	Tax:	113.39	AR	3394.74
Labor:	.00	Misc:	.00	Total:	3394.74		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



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MAIN OFFICE
P.O. Box 884
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FAX 620/431-0012

INVOICE

Invoice # 213740

Invoice Date: 05/30/2007 Terms:

Page 1

TE-PE OIL & GAS
P.O. BOX 522
CANTON KS 67428
(620)628-4428

UNA #4
17421
05-26-07

PAID JUN 3 2007
OK # 20359

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	100.00	9.8000	980.00
1118A	S-5 GEL/ BENTONITE (50#)	170.00	.1500	25.50
1110A	KOL SEAL (50# BAG)	500.00	.3800	190.00
1111	GRANULATED SALT (50 #)	500.00	.3000	150.00
4404	4 1/2" RUBBER PLUG	1.00	40.0000	40.00

Description	Hours	Unit Price	Total
WASH- WASH OR SWIVEL HEAD	1.00	60.00	60.00
463 CEMENT PUMP	1.00	840.00	840.00
463 EQUIPMENT MILEAGE (ONE WAY)	90.00	3.30	297.00
502 TON MILEAGE DELIVERY	387.00	1.10	425.70

O.K. TO PAY

By _____ Date _____

Charge To _____

Account Cement
Prod. Casing

Accounting User
CC

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AUG 24 2011
KCC WICHITA

Parts:	1385.50	Freight:	.00	Tax:	87.29	AR	3095.49
Labor:	.00	Misc:	.00	Total:	3095.49		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____