



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

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

OPERATOR: License # 33741
Name: Enerjex 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

Designate Type of Completion:
[X] New Well [] Re-Entry [] Workover
[] Oil [] WSW [] SWD [] SIOW
[] Gas [] D&A [X] 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 #:

05/19/2011 06/01/2011 07/12/2011
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-059-25551-00-00
Spot Description:
NE_NW_NW_NW Sec. 17 Twp. 18 S. R. 21 [X] East [] West
4963 Feet from [] North / [X] South Line of Section
4746 Feet from [X] East / [] West Line of Section
Footages Calculated from Nearest Outside Section Corner:
[] NE [] NW [X] SE [] SW
County: Franklin
Lease Name: Needham Well #: BSI-7
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 1006 Kelly Bushing: 0
Total Depth: 700 Plug Back Total Depth: 663
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? [] Yes [X] No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from: 663
feet depth to: 0 w/ 90 sx cmt.

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

[X] Letter of Confidentiality Received
Date: 08/26/2011
[] Confidential Release Date:
[X] Wireline Log Received
[] Geologist Report Received
[X] UIC Distribution
ALT [] I [X] II [] III Approved by: NAOMI JAMES Date: 08/29/2011