



KANSAS CORPORATION COMMISSION 1063040
OIL & GAS CONSERVATION DIVISION

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 # 9313
Name: Lorenz, James D.
Address 1: 543A 22000 RD
Address 2: _____
City: CHERRYVALE State: KS Zip: 67335 + _____
Contact Person: James D. Lorenz
Phone: (620) 423-9360
CONTRACTOR: License # 33749
Name: Kepley Well Service, LLC
Wellsite Geologist: N/a
Purchaser: Coffeville 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>04/18/2011</u>	<u>04/20/2011</u>	<u>04/30/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-037-22171-00-00

Spot Description: _____
NE NE SE SW Sec. 18 Twp. 30 S. R. 22 East West
1155 Feet from North / South Line of Section
2805 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Crawford
Lease Name: Amershek #1 Well #: 7A
Field Name: McCune

Producing Formation: Bartlesville
Elevation: Ground: 890 Kelly Bushing: 895
Total Depth: 365 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 21 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 256
feet depth to: 0 w/ 56 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

- Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Deanna Gernoo Date: 09/12/2011



1063040

Operator Name: Lorenz, James D. Lease Name: Amershek #1 Well #: 7A
 Sec. 18 Twp. 30 S. R. 22 East West County: Crawford

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 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray Neutron Completion Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Driller's Log 0 365
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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	12.2500	8.6550	18	21	Portland	4	
Production	6.7500	2.8750	6.500	256	OWC	56	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ 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
2	2" DML-RTG	AWAITING ACIDIZING	217-281

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	0	0	0	0

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-3)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Well Refined Drilling Company, Inc.

4230 Douglas Road - Thayer, KS 66776

Contractor License # 33072

Office - 620-839-5581; Jeff Pocket - 620-432-6170; Fax - 620-839-5582

Rig #:	2	License # 9313
API #:	15-037-22171-0000	
Operator:	James D. Lorenz	
Address:	543A 22000 Road	
	Cherryvale, KS 67335 - 8515	

HAVE RIG
Rig # 2
WILL DIG!

S18	T30S	R22E
Location:	NE, NE, SE, SW	
County	Crawford - KS	

Well #:	7A	Lease Name:	Amershek I	Depth	Oz.	Orifice	flow - MCF
Location:	1155	FSL		80			No Flow
	2805	FEL		105			No Flow
Spud Date:		4/18/2011		205			Trace
Date Completed:		4/20/2011	TD: 365	230	2	3/8"	5.05
Geologist:				255			Gas Check Same
Driller:		Josiah Kephart		280	3	3/8"	6.18
Casing Record		Surface	Production	305			Gas Check Same
Hole Size		12 1/4"	6 3/4"	365			Gas Check Same
Casing Size		8 5/8"					Gas Check Same
Weight							
Setting Depth		21' 6"					
Cement Type		Portland					
Sacks		4					
Feet of Casing							

11LD-042011-R2-022-Amershek I 7A - James D. Lorenz

Well Log

Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	2	overburden	186	197	shale	295	302	sand
2	9	clay	197	198	lime	302	306	shale
9	11	lime	198	205	shale	306	307	coal
11	14	shale	205	206	coal	307	345	shale
14	22	lime	206	215	shale	345	346	coal
		wet	215	216	coal	346	365	shale
22	44	shale	216	241	shale	365		Total Depth
22	46	coal	241	242	coal			
46	59	shale	242	259	shale			
59	78	lime	259	263	sand			
78	79	shale	263	269	shale			
79	80	coal	269	286	oil sand			
80	82	shale			odor			
82	94	lime	270	272	bleeding			
94	101	shale	275	276	bleeding			
101	102.5	coal	278	284	bleeding			
102.5	184	shale	286	291	sandy shale			
184	186	coal	291	295	shale			

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