CORRECTION #1

1066250

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

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) 754-7740
CONTRACTOR: License # 32834
Name: JTC Oil, Inc.
Wellsite Geologist: NA
Purchaser: Coffeyville Resources

Designate Type of Completion:
- [x] New Well [ ] Re-Entry [ ] Workover
- [x] 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 #:

04/04/2011	05/03/2011	05/16/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-121-28865-00-00
Spot Description:
W2 - NE - NW - SE Sec. 1 Twp. 18 S. R. 21 [x] East [ ] West
2310 Feet from [ ] North / [x] South Line of Section
1665 Feet from [x] East / [ ] West Line of Section
Footages Calculated from Nearest Outside Section Corner:
[ ] NE [ ] NW [x] SE [ ] SW
County: Miami
Lease Name: Howell Gorges Well #: BSP-2
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 878 Kelly Bushing: 0
Total Depth: 600 Plug Back Total Depth: 565
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: 565
feet depth to: w/ 88 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: 05/19/2011
- [ ] Confidential Release Date:
- [x] Wireline Log Received
- [ ] Geologist Report Received
- [ ] UIC Distribution

ALT [ ] I [x] II [ ] III Approved by: NAOMI JAMES Date: 10/28/2011