

**ORIGINAL**  
**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

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 34110  
 Name: Caerus Kansas LLC  
 Address 1: 600 17TH ST, STE 1600 N  
 Address 2: \_\_\_\_\_  
 City: Denver State: CO Zip: 80202  
 Contact Person: Amy Lay  
 Phone: ( 720 ) 880-6414  
 CONTRACTOR: License # 34233  
 Name: Maverick Drilling LLC  
 Wellsite Geologist: Herb Deines  
 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>7/15/11</u>	<u>7/20/11</u>	<u>8/18/11</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 009-25586-00-00  
 Spot Description: \_\_\_\_\_  
SW SE SE NE Sec. 35 Twp. 20 S. R. 11  East  West  
2,540 Feet from  North /  South Line of Section  
341 Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
 County: Barton  
 Lease Name: Miller - Doll Unit Well #: 35-42  
 Field Name: Mue-Tam  
 Producing Formation: Arbuckle  
 Elevation: Ground: 1768 Kelly Bushing: 1777  
 Total Depth: 3400 Plug Back Total Depth: 3367  
 Amount of Surface Pipe Set and Cemented at: 477 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.

**Drilling Fluid Management Plan**  
*(Data must be collected from the Reserve Pit)*  
 Chloride content: 5600 ppm Fluid volume: 160  
 Dewatering method used: Hauled to disposal  
 Location of fluid disposal if hauled offsite: \_\_\_\_\_  
 Operator Name: Caerus Kansas LLC  
 Lease Name: Hullman Trust #2 License #: 34110  
 Quarter NW/4 Sec. 36 Twp. 21 S. R. 12  East  West  
 County: Stafford Permit #: D-30004

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**OCT 28 2011**  
**KCC WICHITA**

**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: Amy Lay  
 Title: Operations Tech Date: 10/26/11

**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: Dg Date: 11/3/11

Operator Name: Caerus Kansas LLC Lease Name: Miller - Doll Unit Well #: 35-42  
 Sec. 35 Twp. 20 S. R. 11  East  West County: Barton

**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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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: Dual Induction, Sonic Log, Micro Log, CDNL	<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:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Stone Corral</td> <td>477</td> <td></td> </tr> <tr> <td>Wood Siding</td> <td>2192</td> <td></td> </tr> <tr> <td>Lansing-Kansas City</td> <td>3052</td> <td></td> </tr> <tr> <td>Arbuckle</td> <td>3304</td> <td></td> </tr> </table>	Name	Top	Datum	Stone Corral	477		Wood Siding	2192		Lansing-Kansas City	3052		Arbuckle	3304	
Name	Top	Datum														
Stone Corral	477															
Wood Siding	2192															
Lansing-Kansas City	3052															
Arbuckle	3304															

CASING RECORD <input checked="" 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"	24#	477	60/40 Poz	350	3% CC 2% Gel
Production	7-7/8"	5-1/2"	15.5#	3400	60/40 Poz	150	3% CC 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
4	3333'-3338', 3322'-3328', 3314'-3317'		
	CIBP @ 3330'		

TUBING RECORD:	Size: <u>2-3/8"</u>	Set At: <u>3308</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	RECEIVED OCT 28 2011 KCC WICHITA
Date of First, Resumed Production, SWD or ENHR. <u>8/23/11</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>65</u>	Gas Mcf	Water Bbls. <u>11</u>	Gas-Oil Ratio	Gravily <u>48</u>

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: <u>3314'-3328'</u>
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CHARGE TO: CAERUS OIL & GAS  
 ADDRESS  
 CITY, STATE, ZIP CODE

TICKET  
 PAGE 1 OF 2

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SERVICE LOCATIONS  
 1. HAYS  
 2. NESS  
 3.  
 4.  
 REFERRAL LOCATION

WELL/PROJECT NO. 35-42  
 LEASE MILLER OIL UNIT  
 COUNTY/PARISH BARTON  
 STATE KS  
 CITY  
 DATE 07-20-11  
 OWNER

TICKET TYPE  SERVICE  SALES  
 CONTRACTOR  
 RIG NAME/NO. MAVERICK 108  
 SHIPPED VIA  
 DELIVERED TO SE, ELLINWOOD  
 ORDER NO.

WELL TYPE DIL  
 WELL CATEGORY DEVELOP  
 JOB PURPOSE LONGSTRING  
 WELL PERMIT NO. 15-009-25586  
 WELL LOCATION 335720 R11

INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
575		1			MILEAGE 4/12	80		mi		6.00	480	00
578		1			Pump Service	1		EA		1500.00	1500	00
221		1			LUBRICANT	2		BAR		25.00	50	00
281		1			MUD FLUSH	500		BAR		1.25	625	00
290		1			DEAIR	2		BAR		35.00	70	00
402		1			CENTRALIZER	5		EA	5 1/2 IN	70.00	350	00
403		1			BASKET	1		EA		250.00	250	00
406		1			LATCH DOWN PLUG & BAFFLE	1		EA		250.00	250	00
407		1			INSERT FLOAT SIDE 1/2 AUTO FILL	1		EA		350.00	350	00

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *Brian K...*  
 DATE SIGNED 07-20-11 TIME SIGNED 1900  A.M.  P.M.

REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE		
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				P6-1 PAGE TOTAL	3925 00
WE UNDERSTOOD AND MET YOUR NEEDS?				P6-2	4683 73
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				sub	
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				7072	8608 77
ARE YOU SATISFIED WITH OUR SERVICE?				Barton TAX 7.3%	409 62
<input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	9018 39
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR *DAVE...* APPROVAL

Thank You!



**JOB LOG**

**SWIFT Services, Inc.**

DATE 07-20-11 PAGE NO. 7

CUSTOMER CAE RUS WELL NO. 25-42 LEASE MILLER DOLL UNIT JOB TYPE LONGSTRING TICKET NO. 20231

CHART NO.	TIME	RATE (BPM)	VOLUME (BB) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1900							ON LOCATION CMT: 175, SWB 60-40 2 1/2" GEL 15% SMT, 5" GILSONITE 3/4" ARAD
								RTD 3400, ser pipe 3399 SJ 20.86 2 1/2" 3378 5 1/2" 15.5 1/4"
								CMT 3, 5, 7, 9, 11 BABY 2
	2045							START ESCALATOR EQ
	2200							TAC BOTTOM - DOP BALL
	2215							BREAKING 4" R/L
	2300		7.5					PLUG RH 30, MH20
	2305	5.0	12		-		200	500 GAL MUD FLUSH
		S	20		-		S	200 GAL HCL FLUSH 2%
			36		-			150 SKS CMT
								DOP 40 PLUG, WASHOUT PL
	2320	7.5	0		-		200	START DISP
		S	45		-		300	CMT ON BOTTOM
			70.0		-		500	
			75.0		-		600	
	2330		80.4		-		1500	LAND PLUG
	2335							RELEASE DAY
								JOB COMPLETE
								THANK YOU! DAVE, JOSH, LANE

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