

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 # 30259
Name: Werth Exploration Trust
Address 1: 1308 Schwaller Ave.
Address 2: _____
City: Hays State: KS Zip: 67601 + 2242
Contact Person: Andy Werth
Phone: (785) 625-3531
CONTRACTOR: License # 33905
Name: Royal Drilling, Inc
Wellsite Geologist: Roger L. Moses
Purchaser: Coffeyville Resources

API No. 15 - 065-23785-00-00
Spot Description: _____
S/2_NW_SW_SW Sec. 36 Twp. 10 S. R. 21 East West
783 Feet from North / South Line of Section
4,950 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Graham
Lease Name: Walz-Star Well #: 1
Field Name: Trico

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Cora, Expl., etc.): _____

Producing Formation: Arbuckle
Elevation: Ground: 2091 Kelly Bushing: 2097
Total Depth: 3692 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 220 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1348 Feet
If Alternate II completion, cement circulated from: 1348
feet depth to: surface w/ 500 sx cmt.

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 #: _____

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 4700 ppm Fluid volume: 520 bbls
Dewatering method used: _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

10/13/2011 12/15/11 10/18/2011 12/28/11 1/02/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date per geo report Recompletion Date

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: Roger L. Moses
Title: Agent Date: 1/13/2012

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: Dls Date: 1/27/12
RECEIVED
JAN 18 2012
KCC WICHITA

Operator Name: Werth Exploration Trust Lease Name: Walz-Star Well #: 1
 Sec. 36 Twp. 10 S. R. 21 East West County: Graham

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input 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: DIL, Resistivity, Density Neutron, RAG, Sonic.	<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>Anhydrite</td> <td>1550</td> <td>+547</td> </tr> <tr> <td>Topeka</td> <td>3116</td> <td>-1019</td> </tr> <tr> <td>Heebner</td> <td>3318</td> <td>-1221</td> </tr> <tr> <td>Toronto</td> <td>3345</td> <td>-1248</td> </tr> <tr> <td>Lansisng</td> <td>3361</td> <td>-1264</td> </tr> <tr> <td>Base/Kansas City</td> <td>3589</td> <td>-1492</td> </tr> <tr> <td>Arbuckle</td> <td>3650</td> <td>-1553</td> </tr> </table>	Name	Top	Datum	Anhydrite	1550	+547	Topeka	3116	-1019	Heebner	3318	-1221	Toronto	3345	-1248	Lansisng	3361	-1264	Base/Kansas City	3589	-1492	Arbuckle	3650	-1553
Name	Top	Datum																							
Anhydrite	1550	+547																							
Topeka	3116	-1019																							
Heebner	3318	-1221																							
Toronto	3345	-1248																							
Lansisng	3361	-1264																							
Base/Kansas City	3589	-1492																							
Arbuckle	3650	-1553																							

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	23	220	Common	150	3% CC, 2%gel
Production	7 7/8	5 1/2	15.5	3691	65/35 poz	500	6% 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
2	3650'-3656'	110 gals mud acid	3650

TUBING RECORD: Size: <u>2 7/8</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>1/12/2012</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>40</u>	Gas Mcf	Water Bbls. <u>None</u>
		Gas-Oil Ratio	Gravity

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3650'-3656'</u>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED
JAN 18 2012
KCC WICHITA



CHARGE TO: Worth Exploration Trust
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

TICKET
19786

PAGE 1 OF 2

SERVICE LOCATIONS 1. <u>Hays, KS.</u>	WELL/PROJECT NO. <u>#1</u>	LEASE <u>Wbz - Star</u>	COUNTY/PARISH <u>Graham</u>	STATE <u>Ks.</u>	CITY	DATE <u>12-20-11</u>	OWNER <u>Same</u>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>Royal Drilling</u>	RIG NAME/NO.	SHIPPED <u>W/CIT</u>	DELIVERED TO <u>Loc.</u>	ORDER NO.	
3.	WELL TYPE <u>Oil</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>Cont. 5 1/2" Prod. Csg.</u>	WELL PERMIT NO.	WELL LOCATION <u>Sec 31-10^s. 21^w</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			U/M			
575		1			MILEAGE * 113	35	mil	6	00	210 00
578		1			Pump Service	1	ea	5 1/2	in	1500 00
407		1			Insert Float Shoe	1	ea	350	00	350 00
406		1			Latch down Plug + Baffle	1	ea	250	00	250 00
402		1			Centralizers	7	ea	70	00	490 00
403		1			Cont. Basket	1	ea	250	00	250 00
404		1			Port Collar	1	ea	2400	00	2400 00
449		1			Rotating Head	1	ea	200	00	200 00
280		1			Flushcock-21	330	gal	2	50	825 00
221		1			KCL	6	gal	25	00	150 00
		1			See Continuation			part		6425 00
								part		3968 00

RECEIVED
 JAN 18 2012
 KCC WICHITA

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 John B. [Signature]
 DATE SIGNED _____ TIME SIGNED _____
 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	PAGE TOTAL	10,393
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Graham	604 94
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TAX 7.55%	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	10,998 44

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

SWIFT OPERATOR [Signature] APPROVAL _____

Thank You.

Page 1
 SWIFT SERVICES 785 798 2384
 2012-01-15 10:50



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 19786

CUSTOMER: *Whish Exploration* WELL: *Whiz-Sage #1* DATE: *12-20-11* PAGE: *2* OF: *2*

QUANTITY	UNIT	DESCRIPTION	WELL	DATE	PRICE	TOTAL	UNIT
325	1	Standard Cement	175 sks	13	50	2368	18
284	1	Calceal	9 sks	35	88	315	18
283	1	Salt	6000 #	20		200	18
285	1	CR-1	83 #	4	15	332	18
276	1	Floccle	44 #	2	88	88	18
581	1	SERVICE CHARGE	CUBIC FEET	2	122	350	18
583	1	TOTAL WEIGHT	LOADED MILES	1	82	321	18

RECEIVED
JAN 8 2012
NCC WICHITA

TOTAL WEIGHT: *18,347* LOADED MILES: *35* CUBIC FEET: *775 sks* TON MILES: *301*

3968 ¹⁸

JOB LOG

SWIFT Services, Inc.

DATE 12-20-11 PAGE NO. 1

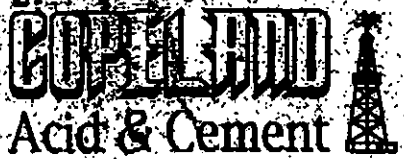
CUSTOMER Worth Exploration WELL NO. #1 LEASE Waltz-Star JOB TYPE Long String TICKET NO. 19786

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	14:30							on Loc. 5'6" 15.5" csg. Insert Float Shoe 3694' Latch down Baffle 3668' Con.C 3663', 3582', 3497', 3421', 3335', 3165', 1390' Basket on Joint #56 Port Callon Top #56 R. 1348' Drop Ball Circulate Csg.
	15:35		10 8 5					Pump 10 ³⁰ KCL water spacer 330 gal Flocheck 81 5 ³⁰ KCL water spacer Plug R.H. 3056k Mixture hole 2056k
	15:50	5	30					Start EA-2 Con.J. 1256k Finish mixing wash out pump & line
	16:07	7						Start Displ. First 36 ³⁰ 2 1/2% KCL water
	16:20		88			1300		Plug down 1300 psi Holding Release press. Dried up wash and pack up travel
	16:45							Jobs Complete

RECEIVED
JAN 18 2012
KCC WICHITA

Handwritten signature

Logan Wilson, Brian, Brandon, Joe



FIELD ORDER N° C 39472

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE 12/28/11 20

IS AUTHORIZED BY: Wirth Exploration
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Waltz Ste Well No. 1 Customer Order No. _____

Sec. Twp. Range _____ County Graham State KS

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

By _____ Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	35	mileage pump truck	4. ⁰⁰ / ₁₀₀	140. ⁰⁰ / ₁₀₀
	35	mileage pickup	2. ⁰⁰ / ₁₀₀	70. ⁰⁰ / ₁₀₀
	1	Pump Charge		950. ⁰⁰ / ₁₀₀
	500	05/35 pot 2% sel.	9. ²⁵ / ₁₀₀	4625. ⁰⁰ / ₁₀₀
	20	4% add. sel.	20. ⁰⁰ / ₁₀₀	400. ⁰⁰ / ₁₀₀
	3	Calcium Chloride	40. ⁰⁰ / ₁₀₀	120. ⁰⁰ / ₁₀₀
RECEIVED				
JAN 18 2012				
KCC WICHITA				
	520	Bulk Charge	1. ²⁵ / ₁₀₀	653. ⁷⁵ / ₁₀₀
		Bulk Truck Miles 23.12 T x 35m = 800.27m x 1. ¹⁰ / ₁₀₀	1. ¹⁰ / ₁₀₀	890. ¹² / ₁₀₀
		Process License Fee on _____ Gallons		
TOTAL BILLING				7,948. ⁸⁷ / ₁₀₀

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Nathan W.

Station G.B.

John Becker
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

COPELAND

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Invoice

Acid & Cement

Attn: Roger Moses

BURRTON, KS ▲ GREAT BEND, KS
 (620) 463-5161 (620) 793-3388
 FAX (620) 463-2104 FAX (620) 793-3536

INVOICE NUMBER:
C39472-IN

BILL TO:
WERTH EXPLORATION
1308 SCHWALLER AVE.
HAYS, KS 67601

LEASE: WALZ STAR 1

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
12/31/2011	C39472		12/28/2011		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
35.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	140.00
35.00	MI	CEMENT MILEAGE PU TRUCK		0.00	2.00	70.00
1.00	EA	CEMENT PUMP CHARGE		0.00	950.00	950.00
500.00	SAX	65-35 POZ MIX 2% GEL		0.00	9.25	4,625.00
20.00	SAX	4% ADDITIONAL GEL		0.00	20.00	400.00
3.00	SAX	2% ADDITIONAL GEL		0.00	40.00	120.00
523.00	EA	BULK CHARGE		0.00	1.25	653.75
809.20	MI	BULK TRUCK - TON MILES		0.00	1.10	890.12
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		7,848.87
RECEIVED BY		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		GRHCO Sales Tax:		71.73
		NET 30 DAYS		Invoice Total:		7,920.60

RECEIVED
 JAN 18 2012
 KCC WICHITA

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service
 Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code



TREATMENT REPORT

Acid Stage No. _____

Date: 12/20/11 District: G.B. F.O. No. C39472
 Company: Worth Exploration
 Well Name & No.: W-12 Star #1
 Location: _____ Field: _____
 County: G.chem State: ks
 Casing: Size: 5 1/2" Type & WL: _____ Set at: _____ ft.
 Formation: _____ Perf. to: _____ ft.
 Formation: _____ Perf. to: _____ ft.
 Formation: _____ Perf. to: _____ ft.
 Liner: Size: _____ Type & WL: _____ Top at: _____ ft. Bottom at: _____ ft.
 Cemented: Yes/No: _____ Perforated from: _____ ft. to: _____ ft.
 Tubing: Size & WL: 2 1/2" Swage at: _____ ft.
 Perforated from: _____ ft. to: _____ ft.
 Open Hole Size: _____ T.D.: _____ ft. P.D. to: _____ ft.

Type Treatment: Aml. Type Fluid _____ Sand Size _____ Pounds of Sand _____
 Shutdown: _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 Flush: _____ Bbl./Gal. _____
 Treated from: _____ ft. to: _____ ft. No. ft. _____
 from: _____ ft. to: _____ ft. No. ft. _____
 from: _____ ft. to: _____ ft. No. ft. _____
 Actual Volume of Oil/Water to Load Hole: _____ Bbl./Gal.
 Pump Trucks No. Used: 320 Sp. _____ Tubs. _____
 Auxiliary Equipment: 317/310
 Packers: _____ Set at: _____ ft.
 Auxiliary Tools: _____
 Plugger or Sealing Materials: Type: _____

Company Representative: John B. Treater: Nathan W.

TIME a.m. (h:m)	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
3:30	7 1/8"	5 1/2"		On location.
:				
:				Packer @ 7230'
:				Packer @ 7300'
:				
:				Break circulation w/ water
:				Mix 5000 lbs 65/35 60% sel.
:				Circulated cement to surface
:				Wash out pump & lines
5:45				Displace w/ 14 bbls Wash up.
:				Displace w/ 1/4 bbls Shut in
:				
:				Thank You!
:				Nathan W.
:				
:				RECEIVED
:				JAN 18 2012
:				KCC WICHITA