



KANSAS CORPORATION COMMISSION 1071023
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 # 30329
Name: Thomas Well Service, Inc.
Address 1: PO BOX 97
Address 2: _____
City: MCLOUTH State: KS Zip: 66054 + 0097
Contact Person: Bobby G. Thomas
Phone: (913) 758-0175
CONTRACTOR: License # 33734
Name: Hat Drilling LLC
Wellsite Geologist: David Griffin, RG #498
Purchaser: Coffeyville Resources

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 (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>8/24/2011</u>	<u>8/30/2011</u>	<u>3/07/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-103-21323-00-00

Spot Description: _____
SW NW SW NE Sec. 23 Twp. 8 S. R. 21 East West
3332 Feet from North / South Line of Section
2648 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Leavenworth
Lease Name: TAYLOR-BIRD Well #: T-8
Field Name: Leavenworth West
Producing Formation: McLouth SS

Elevation: Ground: 1014 Kelly Bushing: 1019
Total Depth: 1398 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 41 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1398
feet depth to: 0 w/ 159 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 80 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite: _____
Operator Name: Gregg Curry
Lease Name: Curry License #: 33816
Quarter SE Sec. 15 Twp. 22 S. R. 11 East West
County: Greenwood Permit #: D26554

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 Garrisa Date: 03/14/2012



1071023

Operator Name: Thomas Well Service, Inc. Lease Name: TAYLOR-BIRD Well #: T-8
 Sec. 23 Twp. 8 S. R. 21 East West County: Leavenworth

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: Open-Hole Dual Induction and Dual Compensated Porosity Logs Cased-Hole Gamma Ray / Neutron / CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Base KC</td> <td>628</td> <td>+386</td> </tr> <tr> <td>Cherokee</td> <td>878</td> <td>+136</td> </tr> <tr> <td>Coal Marker</td> <td>1248</td> <td>-234</td> </tr> <tr> <td>U. McLouth SS, 15'</td> <td>1280</td> <td>-266</td> </tr> <tr> <td>L. McLouth SS, 8</td> <td>1354</td> <td>-348</td> </tr> <tr> <td>Mississippi LS</td> <td>1396</td> <td>-382</td> </tr> <tr> <td>RTD</td> <td>1398</td> <td>-384</td> </tr> </tbody> </table>	Name	Top	Datum	Base KC	628	+386	Cherokee	878	+136	Coal Marker	1248	-234	U. McLouth SS, 15'	1280	-266	L. McLouth SS, 8	1354	-348	Mississippi LS	1396	-382	RTD	1398	-384
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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	12.25	8.625	20	41	Portland	12	
Longstring	6.75	4.5	10.5	1398	50/50 Poz & OWC	159	

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 (Amount and Kind of Material Used)	Depth
4	1354-1361		

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 Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" 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>1354-1361</u>
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HAT DRILLING
12371 KS HWY 7
MOUND CITY, KS 66056
LICENSE # 33734

Taylor-Bird #T-8
API # 15-103-21323-00-00
SPUD DATE 8-24-11

Footage	Formation	Thickness	Set 41' of 8 5/8'
2	topsoil	2	TD 1398'
14	clay	12	Ran 1394.45' of 4 1/2
16	lime	2	
23	shale	7	
26	lime	3	
38	shale	12	
45	lime	7	
312	shale	267	
330	lime	18	
360	shale	30	
378	lime	18	
398	shale	20	
408	lime	10	
450	shale	42	
464	lime	14	
485	shale	21	
497	lime	12	
533	shale	36	
538	lime	5	
559	shale	21	
608	lime	49	
618	shale	10	
630	lime	12	
788	shale	158	
808	lime	20	
840	shale	32	
851	lime	11	
875	shale	24	
900	lime	25	
990	shale	90	
1000	lime	10	
1352	shale	352	
1364	oil sand	12	
1396	shale	32	
1398	lime	2	

INVOICE

HAT Drilling

NO.

INVOICE DATE 8-24-11
CUSTOMER'S ORDER NO.

SOLD TO: Thomas Well Service
Taylor Bird # T-8

SHIP TO:

SALESPERSON SHIPPED VIA SHIP DATE TERMS F.O.B.

QTY. ORDERED	QTY. SHIPPED	DESCRIPTION	UNIT	AMOUNT
		Cement 40' at 8 3/8 surface with 12 Bags of cement		\$500.00



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 32795
LOCATION: Ottawa KS
FOREMAN: Fred Maden

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8/31/11	8147	Taylor-Bird # T-8	NE 23	8	210	LV
CUSTOMER Thomas Well Service			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 97			506	FREMAID	Safety Mat	
CITY Ma Louth			495	CASKEN	CYK	
STATE KS			505/706	ARLMCD	ARLM	
ZIP CODE 66054			558	TIM LEM	50 BERMAS	DM

JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 1398' CASING SIZE & WEIGHT 5 1/2"
CASING DEPTH 1390' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 4 1/2" Plug
DISPLACEMENT 22.16 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Establish rate. Mix Pump 15 BBL Flush w/ 1 Gal ESA-41. Mix Pump 25 BBL. Talltale eye. Follow with 5KS 50/50 for Mix Cement 69 Gal. Tail in w/ 45 SKS OWC Cement. Flush pump + lines clean. Displace 4 1/2" Rubber plug to casing TD w/ 22.16 BBLs. Formation water pressure to 800* PSI. Release pressure to set float valve. Check plug depth w/ wireline.

Customer Supplied: Brine water Flush. Plug Fluid. Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	975 ⁰⁰
5406	65 mi	MILEAGE	495	260 ⁰⁰
5402	1396'	Casing footage		710
5407	Minimum	Ton Miles	558	320 ⁰⁰
5407	329.75	Ton Miles	510	415 ⁴⁹
5501C	5 hrs	Transport	505/1006	560 ⁰⁰
1124	114 SKS	50/50 Por Mix Cement		1191 ³⁰
1126	45 SKS	OWC Cement		805 ⁵⁰
1118B	575 [#]	Premium Gel		115 ⁰⁰
1143	1 Gal	ESA-41		40 ⁴⁰
4404	1	4 1/2" Rubber Plug		45 ⁰⁰
			7.3%	SALES TAX
				ESTIMATED TOTAL
				4898 ⁰⁹

Form 5737 AUTHORIZATION Du Jan TITLE Pres Alli-Bobb DATE 8-31-11

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.