



KANSAS CORPORATION COMMISSION 1078140  
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 # 33741  
Name: Energex 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 ) 754-7754  
CONTRACTOR: License # 32834  
Name: JTC Oil, Inc.  
Wellsite Geologist: NA  
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>12/2/2011</u>	<u>12/6/2011</u>	<u>01/17/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-25766-00-00

Spot Description: SW NW SW NE

SW NW SW NE Sec. 17 Twp. 18 S. R. 21  East  West  
3495 Feet from  North /  South Line of Section  
2355 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Franklin

Lease Name: Carter A Well #: BSI-CA25

Field Name: Paola-Rantoul

Producing Formation: Squirrel

Elevation: Ground: 936 Kelly Bushing: 0

Total Depth: 620 Plug Back Total Depth: 599

Amount of Surface Pipe Set and Cemented at: 20 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: 599

feet depth to: 0 w/ 91 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: 04/05/2012
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: NAOMI JAMES Date: 04/09/2012



1078140

Operator Name: Energex Kansas, Inc. Lease Name: Carter A Well #: BSI-CA25  
 Sec. 17 Twp. 18 S. R. 21  East  West County: Franklin

**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	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum   NA
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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	9.875	6.50	23.0	20	Portland	3	
Production	5.625	2.875	5.8	599	70/30 Poz	91	5% Salt, 2% Gel, 1/2# Phenoxas

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
3	552-566 44 Perfs	Spot 175 gal. 16% HCL Acid	552-566'

<b>TUBING RECORD:</b>	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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# JTC Oil, Inc.

## Drillers Log

Well Name Carter A BSI CA 25

API# 15 15-059-25766-00-00

Surface Date 12/2/11 20 ft 6.5

Cement Amounts

3 Sacks

Cement Date 12/6/11

Well Depth 620

Casing Depth 593

### Drillers Log

<u>Formation</u>	<u>Depth</u>	<u>Formation</u>	<u>Depth</u>
top soil	0		
shale	6		
lime	59		
shale	77		
lime	98		
red bed	105		
shale	111		
lime	146		
shale	164		
lime	172		
shale	203		
lime	210		
shale	232		
coal	234		
lime	236		
shale	249		
lime	415		
shale	436		
lime	497		
shale	505		
top oil sand	549-552 good		
	552-555 good		
	555-558 v good		
	558-561 v good		
	561-564 v good		
	564-567 good		
	567-570 shale		
shale	567		
stop drilling	620		
casing pipe	593		



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 33148  
LOCATION Ottawa  
FOREMAN Alan Mader

PO Box 884, Chanute, KS 66720  
820-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-6-11	2579	Carter A B5TCA25	NE 17	18	21	FR.
CUSTOMER <u>Energex Resources</u>			TRUCK#			
MAILING ADDRESS <u>10975 Grandview Dr</u>			DRIVER			
CITY <u>Diverland Park</u>		STATE <u>KS</u>	ZIP CODE <u>66210</u>	TRUCK#		
JOB TYPE <u>Logging</u>			HOLE SIZE <u>6</u>	HOLE DEPTH <u>622</u>	CASING SIZE & WEIGHT <u>2 7/8</u>	
CASING DEPTH <u>600</u>			DRILL PIPE	TUBING	OTHER	
SLURRY WEIGHT			SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>yes</u>	
DISPLACEMENT <u>35</u>			DISPLACEMENT PSI <u>800</u>	MIX PSI <u>200</u>	RATE <u>46bpm</u>	

REMARKS: Hold crew meet. Washed 3 joints of casing in. Checked casing depth. Mixed & pumped 100<sup>th</sup> gel followed by 9k 70/30 cement plus 5% salt, 2% gel, 1/2% phenoseal per each. Circulated cement. Flushed pump. Pumped plug to casing TD. Well yield 800 AFT for 30 minute M.T. Set float. Closed valve.

STC Drilling  
Oilfield One, T.C. Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030.00
5406		MILEAGE		
5402	600	Casing footage		
5407	1/2 min	40 min. hrs		175.00
5402C	2	30 vac		180.00
1127	91	70/30 cem		1155.70
1118B	260	gel		54.60
1111	184	salt		68.08
1107A	46	Phenoseal		59.34
4402	1	2 1/2 plug		28.00
<u>2463.45</u>				
SALES TAX				106.52
ESTIMATED TOTAL				2857.27

AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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.

Conservation Division  
Finney State Office Building  
130 S. Market, Rm. 2078  
Wichita, KS 67202-3802



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Mark Sievers, Chairman  
Ward Loyd, Commissioner  
Thomas E. Wright, Commissioner

Sam Brownback, Governor

April 05, 2012

Marcia Littell  
Enerjex Kansas, Inc.  
27 CORPORATE WOODS, STE 350  
10975 GRANDVIEW DR  
OVERLAND PARK, KS 66210

Re: ACO1  
API 15-059-25766-00-00  
Carter A BSI-CA25  
NE/4 Sec.17-18S-21E  
Franklin County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,  
Marcia Littell

Conservation Division  
Finney State Office Building  
130 S. Market, Rm. 207B  
Wichita, KS 67202-3802



Phone: 316-337-6200  
Fax: 316-337-6211  
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Mark Sievers, Chairman  
Ward Loyd, Commissioner  
Thomas E. Wright, Commissioner

Sam Brownback, Governor

April 09, 2012

Marcia Littell  
Energex Kansas, Inc.  
27 CORPORATE WOODS, STE 350  
10975 GRANDVIEW DR  
OVERLAND PARK, KS 66210

Re: ACO-1  
API 15-059-25766-00-00  
Carter A BSI-CA25  
NE/4 Sec.17-18S-21E  
Franklin County, Kansas

Dear Marcia Littell:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 12/2/2011 and the ACO-1 was received on April 05, 2012 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department