



KANSAS CORPORATION COMMISSION 1078138
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>12/4/2011</u>	<u>12/6/2011</u>	<u>01/19/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-25762-00-00
Spot Description: NW NW SW NE
NW NW SW NE Sec. 17 Twp. 18 S. R. 21 East West
3865 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-CA24
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 950 Kelly Bushing: 0
Total Depth: 620 Plug Back Total Depth: 596
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: 596
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



1078138

Operator Name: Energex Kansas, Inc. Lease Name: Carter A Well #: BSI-CA24
 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	596	70/30 Poz	91	5% Salt, 2% Gel, 1/2% Phenoxee

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 <i>(Amount and Kind of Material Used)</i>	Depth
3	558-568 31 Perfs	Spot 150 gal. 16% HCL Acid	558-568'

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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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: _____ _____
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JTC Oil, Inc.

Drillers Log

Well Name Carter A BSI CA 24

API# 15 15-059-25762-00-00

Surface Date 12/4/11 20 ft 6.5

Cement Amounts

3 Sacks

Cement Date 12/6/11

Well Depth 620

Casing Depth 595

Drillers Log

<u>Formation</u>	<u>Depth</u>	<u>Formation</u>	<u>Depth</u>
top soil	0		
shale	6		
lime	63		
shale	83		
lime	107		
red bed	112		
shale	118		
lime	156		
shale	173		
lime	179		
shale	238		
coal	240		
lime	243		
shale	257		
lime	427		
shale	440		
lime	503		
shale	513		
lime	518		
shale	535		
top oil sand	555-558 broken		
	558-561 mix lime	560-561-sand good	
	561-564 good		
	564-567 v good		
	567-570 ok		
	570-573 shale		
shale	569		
stop drilling	620		
casing pipe	595		



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 33147

LOCATION Dettawa

FOREMAN Alan Mader

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

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																						
12-6-11	2579	Carter "A" BSI CA24	NE 17	18	21	JR																						
<table border="1"> <thead> <tr> <th>CUSTOMER</th> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td rowspan="4">Enerflex Resources</td> <td>516</td> <td>Alan M</td> <td>Safety</td> <td>Med</td> </tr> <tr> <td>308</td> <td>Adrian</td> <td>MM</td> <td></td> </tr> <tr> <td>369</td> <td>Derek</td> <td>DM</td> <td></td> </tr> <tr> <td>548</td> <td>Keith C</td> <td>KC</td> <td></td> </tr> </tbody> </table>							CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER	Enerflex Resources	516	Alan M	Safety	Med	308	Adrian	MM		369	Derek	DM		548	Keith C	KC	
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REMARKS: Held every meet. Established rate. Mixed & pumped 100# gel to flush hole followed by 91 sk 70130 cement plus 5# salt - 590 salt, 272 gel, 1/2 phenoseal. Circulated cement, flushed pump. Pumped plug to casing TD. Well held 800 PSI for 30 minute M.I.T. Set float. Closed valve.

JTC Drilling
Oil Field One, T.L.

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE		1030.00	
5406	20	MILEAGE		80.00	
5402	591	casing footage			
5407	1/2 min	for m. hrs		176.00	
5502C	2	80 vac		180.00	
1120	91	70130 po2		1155.70	
1118B	260#	gel		54.60	
1141	184#	salt		68.08	
1107A	46#	Pheno seal		59.34	
4402	1	2 1/2 plug		28.00	
				SALES TAX	106.52
				ESTIMATED TOTAL	2937.24

2410341

Ravin 6707

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 15-059-25762-00-00
Carter A BSI-CA24
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. 2078
Wichita, KS 67202-3802



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Mark Sievers, Chairman
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April 09, 2012

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

Re: ACO-1
API 15-059-25762-00-00
Carter A BSI-CA24
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 12/4/2011 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