



KANSAS CORPORATION COMMISSION 1079259
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 # 5786
Name: McGown Drilling, Inc.
Wellsite Geologist: NA
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>12/14/2011</u>	<u>1/6/2012</u>	<u>3/16/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-25827-00-00

Spot Description: NE NW SE SW

NE NW SE SW Sec. 17 Twp. 18 S. R. 21 East West
1095 Feet from North / South Line of Section
3340 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 #: BSP-CA39

Field Name: Paola-Rantoul

Producing Formation: Squirrel

Elevation: Ground: 996 Kelly Bushing: 0

Total Depth: 738 Plug Back Total Depth: 726

Amount of Surface Pipe Set and Cemented at: 21 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 726

feet depth to: 0 w/ 110 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: 04/20/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 04/23/2012



1079259

Operator Name: Energex Kansas, Inc. Lease Name: Carter A Well #: BSP-CA39
 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 Wireline 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	11.00	7.00	23.0	21	Portland	6	
Production	5.625	2.875	5.8	726	70/30 Poz	110	2% Gel, 5% Saff, 1/2# Phenosee

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	618-629 35 Perfs	Spot 75 gal. 15% HCL Acid	618-689'
3	684-689 16 Perfs	150 bbls. City H2o w KCL	
		300# 20/40, 3200# 12/20 Sand	

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
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) _____	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. 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 checked="" 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: _____ _____
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McGown Drilling, Inc.
Mound City, Kansas

Operator:
Enerjex Kansas, Inc.
Overland Park, KS

Carter A #BSP-CA39

Franklin Co, KS
17-18S-21E
API: 059-25827

Spud Date: 12/14/2011
Surface Casing: 7"
Surface Length: 20.80'
Surface Cement: 6 sx

Surface Bit: 11"
Drill Bit: 5.625"
Longstring: **
Longstring Date:

Driller's Log

Top	Bottom	Formation	Comments
0	6	Soil & Clay	
6	34	Lime	
34	124	Shale	
124	142	Lime	
142	168	Shale	
168	172	Lime	
172	200	Red Bed & Shale	
200	210	Lime	
210	222	Shale	
222	262	Lime	
262	272	Bl. Shale & Shale	
272	294	Lime	
294	298	Bl. Shale & Shale	
298	308	Lime	
308	457	Big Shale	
457	484	Lime	
484	538	Sand & Shale	
538	549	Lime	
549	560	Shale	
560	562	Lime	
562	573	Bl. Shale & Shale	
573	577	Lime	
577	579	Shale	
579	602	Lime	20' Lime
602	605	Bl. Shale	
605	610	Lime	5'

913.795.2259 office
620.224.7406 Chris' cell

mcgowndrilling@gmail.com

PO Box K
Mound City, KS

Carter A BSP-CA 39
Franklin Co., KS

610	617	Shale	
617	629	Sand	Good oil show
629	683	Shale	
683	691	Sand	Good oil show
691	738	Shale	
738	TD		

**** Note: Did not run longstring. Pulling unit will later.**



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 36805

LOCATION Ottawa KS

FOREMAN Fred Maden

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
1/6/12	2579	Carter A #BSP-CA-39	17	1E	21	FR
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Emerjev Resources Inc			506	FREMAD	Safety Mtg	
MAILING ADDRESS			495	HARBEC	HOB	
10975 Grandview Dr			369	DERMAS	DM	
CITY	STATE	ZIP CODE	510	RYASIN	RS	
Overland Park	KS	66210				

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 740 CASING SIZE & WEIGHT 2 1/8 EUE
 CASING DEPTH 726 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING 2 1/2" Plug
 DISPLACEMENT 4.22 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 BPM

REMARKS: Establish Circulation. Mix + Pump 100# Premium Gel Flush. Mix + Pump 545 # 70/30 Poz Mix Cement 2% Gel 5% Salt 1/2" Phen Seal/sk. Cement to Surface. Flush pump + lines clean. Displace 2 1/2" Rubber Plug to casing TD w/ 4.22 BBL Fresh water. Pressure to 800# PSI. Release pressure to Set/flood valve. Shut in Casing

McGowan Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁰
5406	-	MILEAGE		N/C
5402	726	Casing footage		N/C
5407	1/2 Minimum	Ten Miles	510	175 ⁰⁰
5502C	1 1/2	80 BBL Vac Truck	369	135 ⁰⁰
1127	110 SKS	70/30 Poz mix Cement		1397 ⁰⁰
118B	294 #	Premium Gel		6174
1111	223 #	Granulated Salt		8251
1107A	55 #	Pheno Seal		7095
4402	1	2 1/2" Rubber Plug		26 ⁰⁰
			7.87	SALES TAX
				ESTIMATED
				TOTAL
				3108.14

246923

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 20, 2012

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

Re: ACO1
API 15-059-25827-00-00
Carter A BSP-CA39
SW/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



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 23, 2012

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

Re: ACO-1
API 15-059-25827-00-00
Carter A BSP-CA39
SW/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 12/14/2011 and the ACO-1 was received on April 20, 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