

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION CONFIDENTIAL

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			API No. 15 - 15-059-25856-00-00
Name: Enerjex Kansas, Inc.			Spot Description:
Address 1: 27 CORPORATE WOODS, STE 350			SE_NW_SE_SW Sec. 17 Twp. 18 S. R. 21 V East West
Address 2: 10975 GRANDVIEW DR			875 Feet from North / South Line of Section
City: OVERLAND PARK State: KS Zip: 66210 +			3560 Feet from ☑ East / ☐ West Line of Section
Contact Person: Marcia Littell			Footages Calculated from Nearest Outside Section Corner:
Phone: (913) 754-7754			□ NE □NW ☑ SE □SW
CONTRACTOR: License #			County: Franklin
Name:JTC Oil, Inc.			Lease Name: Carter A Well #: BSI-CA42
Wellsite Geologist: NA			Field Name: Paola-Rantoul
Purchaser:			Producing Formation: Squirrel
Designate Type of Completion:			Elevation: Ground: 999 Kelly Bushing: 0
✓ New Well Re-Entry Workover			Total Depth: 700 Plug Back Total Depth: 690
Oil \ Gas I	WSW ☐ SWD D&A ☑ ENHR	☐ slow	Amount of Surface Pipe Set and Cemented at: 20 Feet Multiple Stage Cementing Collar Used? Yes No
☐ OG ☐ GSW ☐ Temp. Abd. ☐ CM (Coal Bed Methane)			If yes, show depth set:Feet
Cathodic Other (Core, Expl., etc.):			If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:			feet depth to: 0 w/ 98 sx cmt.
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:			
Deepening Re-perf. Conv. to ENHR Conv. to SWD			Chloride content: 0 ppm Fluid volume: 0 bbls
	Conv. to	_	Dewatering method used: Evaporated
Plug Back: Plug Back Total Depth			Location of fluid disposal if hauled offsite:
Commingled Permit #:			Operator Name:
Dual Completion Permit #:			Lease Name: License #:
SWD	Permit #:		
☐ ENHR	Permit #:		QuarterSecTwpS. R East West
☐ GSW	Permit #:		County: Permit #:
03/21/2012	03/26/2012	04/19/2012	
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date	

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