



KANSAS CORPORATION COMMISSION 1087563
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 # 31691
Name: Coral Coast Petroleum, L.C.
Address 1: 8100 E 22ND ST N
Address 2: BLDG 600, STE R
City: WICHITA State: KS Zip: 67226 + _____
Contact Person: Daniel M. Reynolds
Phone: (316) 269-1233
CONTRACTOR: License # 34233
Name: Maverick Drilling LLC
Wellsite Geologist: Keith Reavis
Purchaser: Plains Marketing/DCP Midstream

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>05/25/2012</u>	<u>06/08/2012</u>	<u>06/22/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-025-21543-00-00

Spot Description: _____
SE SE NW NW Sec. 14 Twp. 32 S. R. 21 East West
1173 Feet from North / South Line of Section
1259 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Clark

Lease Name: Stephens Well #: 5

Field Name: _____

Producing Formation: Viola

Elevation: Ground: 1978 Kelly Bushing: 1988

Total Depth: 6675 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 633 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 38500 ppm Fluid volume: 1800 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: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Deanna Garrison Date: 07/24/2012



1087563

Operator Name: Coral Coast Petroleum, L.C. Lease Name: Stephens Well #: 5
 Sec. 14 Twp. 32 S. R. 21 East West County: Clark

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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: Attached	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>4231</td> <td>-2243</td> </tr> <tr> <td>Lansing</td> <td>4449</td> <td>-2461</td> </tr> <tr> <td>Cherokee</td> <td>5068</td> <td>-3080</td> </tr> <tr> <td>Mississippi</td> <td>5189</td> <td>-3201</td> </tr> <tr> <td>Viola</td> <td>6302</td> <td>-4314</td> </tr> <tr> <td>Arbuckle</td> <td>6614</td> <td>-4626</td> </tr> </table>	Name	Top	Datum	Heebner	4231	-2243	Lansing	4449	-2461	Cherokee	5068	-3080	Mississippi	5189	-3201	Viola	6302	-4314	Arbuckle	6614	-4626
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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	12.5	8.625	24	633	common class A/poz	662	2% gel, 3%cc
production	7.875	5.5	15.5	6629	ASC class A	200	2% gel, 3%cc

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
4			6304 to 6320

TUBING RECORD: Size: <u>2.875</u> Set At: <u>6270</u> Packer At: <u>6277</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR: <u>07/3/2012</u>	Producing Method: <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbbs. <u>95</u>	Gas Mcf <u>300</u> Water Bbbs. _____ Gas-Oil Ratio _____ Gravity <u>44</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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: <u>6304-6320</u>
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Form	ACO1 - Well Completion
Operator	Coral Coast Petroleum, L.C.
Well Name	Stephens 5
Doc ID	1087563

All Electric Logs Run

DIL
CND
Micro
Sonic

ALLIED OIL & GAS SERVICES, LLC 053810

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge KS

DATE <u>05/26/2012</u>	SEC. <u>12</u>	TWP. <u>32s</u>	RANGE <u>21w</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>1100PM</u>
LEASE <u>Stephens</u>	WELL # <u>5</u>	LOCATION <u>Protection KS, Sw to Rd 30, 5 1/2 N</u>			COUNTY <u>Clark</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)			<u>Past Min Main Sign to rig</u>				

CONTRACTOR Maverick #106 OWNER Coral Coast

TYPE OF JOB <u>Surface</u>	
HOLE SIZE <u>12 1/4</u>	T.D. <u>643</u>
CASING SIZE <u>8 7/8</u>	DEPTH <u>643</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT <u>42.30 ft</u>
CEMENT LEFT IN CSG. <u>42.30 ft</u>	
PERFS.	
DISPLACEMENT <u>3 1/4 bbl fresh H₂O</u>	

CEMENT
AMOUNT ORDERED 200 ex 6.5 = 35 = 6% Gr + 3% cc
+ 1/2 # Flaseal, 250 ex class A + 3% cc + 2% Coel,
175 ex class A + 2% cc

COMMON <u>Class A</u>	<u>555 ex @ 16.25</u>	<u>9,018.75</u>
POZMIX	<u>70 ex @ 8.50</u>	<u>595</u>
GEL	<u>15 ex @ 21.25</u>	<u>318.75</u>
CHLORIDE	<u>20 ex @ 58.20</u>	<u>1,164</u>
ASC	@	
<u>Flaseal</u>	<u>50 lb @ 2.70</u>	<u>135</u>
	@	
	@	
	@	
	@	
	@	
HANDLING	<u>662 @ 2.25</u>	<u>1,489.50</u>
MILEAGE	<u>662 x .55 x .11</u>	<u>4005.10</u>
		TOTAL <u>16,726.10</u>

EQUIPMENT

PUMP TRUCK CEMENTER <u>Jason Thimesch</u>
<u>558 / 555</u> HELPER <u>Matt Thimesch</u>
BULK TRUCK
<u>421 / 252</u> DRIVER <u>Troy Lenz</u>
BULK TRUCK
DRIVER

REMARKS:

Did not cure cement, tagged cement not pumped 100 ex, tagged cement pumped 175 ex
brought cement to surface
Thank you

SERVICE

DEPTH OF JOB <u>643</u>	
PUMP TRUCK CHARGE	<u>1450.85</u>
EXTRA FOOTAGE	@
MILEAGE <u>55</u>	@ <u>7</u> <u>385</u>
MANIFOLD + head <u>LV</u>	@ <u>4</u> <u>220</u>
	@

TOTAL 2255.85

CHARGE TO: Coral Coast
STREET _____
CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>8 7/8</u>		
<u>centralizers</u>	<u>3 @ 64</u>	<u>192</u>
<u>Baskets</u>	<u>2 @ 47.8</u>	<u>95.6</u>
<u>Duffle plate</u>	<u>1 @ 112</u>	<u>112</u>
<u>Rubber plug</u>	<u>1 @ 112</u>	<u>112</u>
	@	

TOTAL 1,372

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____
TOTAL CHARGES 20,353.95
DISCOUNT 20% IF PAID IN 30 DAYS

PRINTED NAME Pecile G. Furrer
SIGNATURE Pecile G. Furrer

16,283.16

ALLIED CEMENTING CO., LLC. 038065

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Madisonville, KS

DATE	SEC	TWP	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
06-12-12	14	32s	21w				12:30PM
LEASE	WELL #	LOCATION		COUNTY	STATE		
Stephens	5	Protection, KS, West field, 30th		Clark	KS		
OLD OR NEW (Circle one)				CONTRACTOR			
4th				Maverick #106			
OWNER				CONTRACTOR			
Coral Coast				Coral Coast			
TYPE OF JOB				HOLE SIZE			
Packer				7 1/2"			
CASING SIZE				DEPTH			
5 1/2"				467'			
TUBING SIZE				AMOUNT ORDERED			
4 1/2"				50 x 60 40' @ \$2009			
DRILL PIPE				COMMON			
4 1/2"				4 1/2" x 160' @ \$50/gals			
TOOL JOINT				POZ MIX			
4 1/2"				4 1/2" x 160' @ \$50/gals			
PRES. MAX				MINIMUM			
1700				700			
MEAS. LINE				SHOE JOINT			
				45' 20"			
CEMENT LEFT IN CSC				PERFS			
45'				4			
DISPLACEMENT				CHLORIDE			
160 Bbls 2 1/2" KCL				ASC			
				200' @ \$3000.00			
EQUIPMENT							
PUMP TRUCK				CEMENTER			
# 360-265				D. Ech			
HELPER				B. Goins			
BULK TRUCK				DRIVER			
# 356-290				T. Long			
HANDLING				MILEAGE			
333.22 @ 2.10				2.35 @ 1.86			
TOTAL				TOTAL			
1118.30				1118.30			
REMARKS:							
See Job Log							
DEPTH OF JOB				PUMP TRUCK CHARGE			
667'				3175.00			
EXTRA FOOTAGE				MILEAGE			
				895.00			
MANIFOLD				TOTAL			
200.00				3780.00			
STREET							
CITY							
STATE							
ZIP							
PLUG & FLOAT EQUIPMENT							
AFU Flgs + Shoe				1349.00			
Flgs + Dmstr. Plgs, AS Sif				674.00			
Contractor's				392.00			
TOTAL				1692.00			
SALES TAX (If Any)				TOTAL CHARGES			
				1692.00			
DISCOUNT				IF PAID IN 30 DAYS			
				315.20			
PRINTED NAME				SIGNATURE			
D. Ech				<i>[Signature]</i>			

To Allied Cementing Co., LLC
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME: *D. Ech*
SIGNATURE: *[Signature]*
TOTAL CHARGES: 1692.00
DISCOUNT: 315.20
IF PAID IN 30 DAYS: 1376.80

Stephens #5 Drill Stem tests

DST #1 Gray Zone and Viola; 6273'-6370'; 10-45-30-90; Strong blow off bottom of bucket in 5 min. Opened 2" very strong blow, blow died, closed 2" and blow built back to bottom of bucket. Recovered 1500' of gas in pipe and 60' of gassy oily mud to muddy oil (80: mud). FP 79-104 and 93-92; SIP 2202-2123; HYD 3219-3042; 128 degrees F.

DST #2 Viola, 6298-6327; 10-30-30-120; Strong blow off bottom of bucket in 5 minutes; Recovered 1500' of gas in pipe and 60' of oily gassy mud, FP 63-84; 45-56 SIP 935-2119, HYD 3297-2890; 130 degrees F