



KANSAS CORPORATION COMMISSION 1087090
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 # 34506
Name: Empire Energy E&P, LLC
Address 1: 380 SOUTHPOINTE BLVD #130
Address 2: _____
City: CANONSBURG State: PA Zip: 15917 + 0561
Contact Person: Rob Kramer
Phone: (316) 313-4394
CONTRACTOR: License # 34541
Name: Ninnescah Drilling LLC
Wellsite Geologist: James Musgrove
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>03/14/2012</u> | <u>03/18/2012</u> | <u>04/02/2012</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-185-23740-00-00

Spot Description: _____

NW SE NW SE Sec. 3 Twp. 22 S. R. 12 East West
1795 Feet from North / South Line of Section
1807 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Stafford

Lease Name: SIEFKES Well #: 12

Field Name: _____

Producing Formation: Arbuckle

Elevation: Ground: 1849 Kelly Bushing: 1862

Total Depth: 3750 Plug Back Total Depth: 3695

Amount of Surface Pipe Set and Cemented at: 681 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: 4200 ppm Fluid volume: 400 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 Cortez Date: 07/12/2012



1087090

Operator Name: Empire Energy E&P, LLC Lease Name: SIEFKES Well #: 12
 Sec. 3 Twp. 22 S. R. 12 East West County: Stafford

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 (Attach Additional Sheets) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Log | Formation (Top), Depth and Datum | <input type="checkbox"/> Sample |
| Samples Sent to Geological Survey | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Name | Top | Datum |
| Cores Taken | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Anhydrite | 670 | |
| Electric Log Run | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Heebner | 3140 | -1278 |
| Electric Log Submitted Electronically (If no, Submit Copy) | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Toronto | 3157 | -1295 |
| List All E. Logs Run: | | Lansing | 3291 | -1429 |
| Attached | | Viola | 3536 | -1674 |
| | | Simpson | 3572 | -1710 |
| | | Arbuckle | 3624 | -1762 |

| 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 | 12.25 | 8.625 | 24 | 681 | common | 400 | 3% CaO2, 2% Oct, 1/2 #/sk flt acc |
| Production | 7.875 | 5.5 | 14 | 3741 | AA | 175 | 10% Oct, 3% CFR, 2% Debarmer, # |
| | | | | | | | |

| 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 |
|----------------|---|---|-----------|
| 4 | 3655-3656 | CIBP | 3650 |
| 4 | 3624-3625 | 150 gals. 7.5% MCA | 3624-3625 |
| | | | |
| | | | |

| | | | | | |
|---|-----------------|--|-------------------|---------------|--|
| TUBING RECORD: | | Size: 2.875 | Set At: 3643 | Packer At: | Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumed Production, SWD or ENHR. 04/18/2012 | | Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____ | | | |
| Estimated Production Per 24 Hours | Oil Bbls. 31 | Gas Mcf 0 | Water Bbls. 13 | Gas-Oil Ratio | Gravity 38 |

| | | |
|--|--|--|
| DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.) | METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL: <u>3624-3625</u> |
|--|--|--|

| | |
|-----------|------------------------|
| Form | ACO1 - Well Completion |
| Operator | Empire Energy E&P, LLC |
| Well Name | SIEFKES 12 |
| Doc ID | 1087090 |

All Electric Logs Run

| |
|---------------------|
| |
| Compensated Density |
| Neutron |
| PE |
| Dual Induction |
| Micro |
| Sonic |

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 258

| | | | | | | | | | | | | | | | |
|------------------------|-----------|------|------------|----------|----|---|----|--------|----------|--------------|----|-------------|--|--------|---------|
| Date | 3/14/12 | Sec. | 3 | Twp. | 22 | Range | 12 | County | Stafford | State | KS | On Location | | Finish | 8:15 AM |
| Lease | Seifkos | | Well No. | 12 | | Location Hwy 281 + Hwy 19, E to 70 Rd, 1/2 N, W into | | | | | | | | | |
| Contractor | Nimescoba | | | | | Owner To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | | | | | | | |
| Type Job | Surface | | | | | Charge To Empire Energy | | | | | | | | | |
| Hole Size | 12 1/4" | | T.D. | 683' | | Street | | | | | | | | | |
| Csg. | 8 5/8" | | Depth | 681' | | City | | | | | | | | | |
| Tbg. Size | | | Depth | | | State | | | | | | | | | |
| Tool | | | Depth | | | The above was done to satisfaction and supervision of owner agent or contractor. | | | | | | | | | |
| Cement Left in Csg. | 20' | | Shoe Joint | | | Cement Amount Ordered 400sx Com 3% CC 2% gel | | | | | | | | | |
| Meas Line | | | Displace | 42 Bbls. | | EQUIPMENT 1/2# Floate Common 400 | | | | | | | | | |
| Pumptrk | 9 | No. | Cementor | Paul | | Common 400 | | | | | | | | | |
| Bulktrk | 13 | No. | Driver | Matt | | Poz. Mix | | | | | | | | | |
| Bulktrk | A | No. | Driver | Nick | | Gel. 8 | | | | | | | | | |
| JOB SERVICES & REMARKS | | | | | | Calcium 14 | | | | | | | | | |
| Remarks: | | | | | | Hulls | | | | | | | | | |
| Rat Hole | | | | | | Sall | | | | | | | | | |
| Mouse Hole | | | | | | Flowseal 200# | | | | | | | | | |
| Centralizers | | | | | | Kol-Seal | | | | | | | | | |
| Baskets | | | | | | Mud CLR 48 | | | | | | | | | |
| D/V or Port Collar | | | | | | CFL-117 or CD110 CAF 38 | | | | | | | | | |
| Est. Cmc. | | | | | | Sand | | | | | | | | | |
| Mix | 400 sx | | | | | Handling 422 | | | | | | | | | |
| Displace | | | | | | Mileage 2 5/8" | | | | | | | | | |
| Cement Circulated | | | | | | 2 5/8" FLOAT EQUIPMENT | | | | | | | | | |
| Thank You!!! | | | | | | Guide Shoe | | | | | | | | | |
| | | | | | | Centralizer | | | | | | | | | |
| | | | | | | Baskets | | | | | | | | | |
| | | | | | | AFU Inserts | | | | | | | | | |
| | | | | | | Float Shoe | | | | | | | | | |
| | | | | | | Latch Down | | | | | | | | | |
| | | | | | | Head + Manifold Rubber Plug | | | | | | | | | |
| | | | | | | Pumptrk Charge | | | | | | | | | |
| | | | | | | Mileage 23 | | | | | | | | | |
| | | | | | | Signature <i>Richard A. [unclear]</i> | | | | | | | | | |
| | | | | | | | | | | Tax | | | | | |
| | | | | | | | | | | Discount | | | | | |
| | | | | | | | | | | Total Charge | | | | | |

BASIC

energy services, L.P.

TREATMENT REPORT

| | | | | | |
|----------------|-------------|-------------------|-------|----------|---------|
| Customer | Emp. Energy | Lease No. | | Date | 3-18-10 |
| Lease | Siskoo | Well # | 12 | | |
| Field Order # | Station | Casing | Depth | County | State |
| 5916 | Pratt | 5 1/2 14" | 3741 | Stafford | Ks |
| Type Job | Formation | Legal Description | | | |
| CNW-5 1/2 L.S. | | 3-22-12 | | | |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | | |
|-----------------|--------------|------------------|----|------------|------------|------------------|-------|------------------|
| Casing Size | Tubing Size | Shots/Ft | | Acid | | RATE | PRESS | ISIP |
| | | 175 | | AAA Conc | | | | |
| Depth | Depth | From | To | Pre Pad | Max | | | 5 Min. |
| | | | | 1.36 | | | | |
| Volume | Volume | From | To | Pad | Min | | | 10 Min. |
| | | | | | | | | |
| Max Press | Max Press | From | To | Frac | Avg | | | 15 Min. |
| | | | | | | | | |
| Well Connection | Annulus Vol. | From | To | | HHP Used | | | Annulus Pressure |
| | | | | | | | | |
| Plug Depth | Packer Depth | From | To | Flush | Gas Volume | | | Total Load |
| | | | | 90.6 | | | | |

| | | | | | |
|-------------------------|-----------|-----------------|---------------|---------|-----------------|
| Customer Representative | Rick Papp | Station Manager | Dr. [unclear] | Treater | Steve [unclear] |
|-------------------------|-----------|-----------------|---------------|---------|-----------------|

| | | | | | | | | | |
|---------------|--------|-------|------|------|--|--|--|--|--|
| Service Units | 2728 | 2746 | 1998 | 1976 | | | | | |
| Driver Names | Miller | Brown | | | | | | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|---------|-----------------|-----------------|--------------|------|-------------------------------|
| 1:30 PM | | | | | Valve in - 5-5-4-11-17-19 |
| | | | | | Run 88 3/4 5 1/2 14" Casing |
| | | | | | Continued 1-5-5-7-9-11-17-19 |
| | | | | | Back Pin 5+ 11 |
| | | | | | Carry on Bottom |
| | | | | | Break into WLP |
| | | | | | Rotate casing |
| 7:10 | 300 | | 20 | 5 | KCL H2O |
| 7:12 | 300 | | 10 | 5 | Mud loss |
| 7:14 | 300 | | 5 | 5 | H2O spacer |
| 7:15 | 250 | | H2 | 5 | M. 175 3/4 AAA Conc 15.3 1/2 |
| | | | | | Shut Down |
| | | | | | Clear pump 4 hrs |
| 7:40 | 0 | 0 | 0 | 1 | Start H2O Disp |
| 7:51 | 300 | | 50 | 5 | High pressure |
| 7:57 | 600 | | 80 | 11 | Slow Rate - Stop Rotation |
| 8:00 | 1500 | | 90 1/2 | 11 | Plug Down - Hold |
| 8:10 | | | | | Plug RH / LH 10/5 1/2 1/2 1/2 |
| | | | | | Tubing 10.1 1/2 |
| | | | | | Tubing 10.1 1/2 |