

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5150
Name: Colt Energy Inc
Address 1: PO BOX 388
Address 2: _____
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111
CONTRACTOR: License # 5150
Name: Colt Energy Inc
Wellsite Geologist: REX ASHLOCK
Purchaser: COFFEYVILLE RESOURCES, LLC

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: COLT ENERGY, INC
Well Name: LANHAM 363 A4(SWD-1)
Original Comp. Date: 01/03/2011 Original Total Depth: 1240
 Deepening Re-perf. Conv. to ENHR Conv. to SWD
 Conv. to GSW
 Plug Back: 1100 Plug Back Total Depth
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

08/13/2012 08/13/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-107-24330-00-01
Spot Description: _____
SW SW SE SW Sec. 35 Twp. 21 S. R. 22 East West
140 Feet from North / South Line of Section
1344 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Linn
Lease Name: Lanham 361 (SWD-1) Well #: A4
Field Name: CRITZER
Producing Formation: BARTLESVILLE
Elevation: Ground: 970 Kelly Bushing: 0
Total Depth: 1240 Plug Back Total Depth: 1153
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: _____
feet depth to: 1154 w/ 140 sx crt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
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 Garcia Date: 08/23/2012



1091538

Operator Name: Colt Energy Inc Lease Name: Lanham 361 (SWD-1) Well #: A4
 Sec. 35 Twp. 21 S. R. 22 East West County: Linn

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
 (If no, Submit Copy)

List All E. Logs Run:
 GAMMA RAY/CEMENT BOND/CCL & GAMMA RAY/NEUTRON/CCL

Log Formation (Top), Depth and Datum Sample

Name: BARTLESVILLE Top: 690 Datum: _____

CASING RECORD New 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	21	PORTLAND	4	
LONG STRING	7.875	5.5	17	1154	OIL WELL CEMENT	140	

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
1	4.24" PLUG WELL BRIDGE PLUG 10,000 #RATED		1100
2	690-740	100GAL 15% HCL 100# 16/30 BROWN SAND 3900# 12/20 BROWN SAND	690-740

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. 08/13/2012

Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours: Oil 3.4 Bbbs. Gas _____ Mcf Water 2.5 Bbbs. Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: Vented Sold Used on Lease
 (If vented, Submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled
 (Submit ACO-5) (Submit ACO-4)

PRODUCTION INTERVAL: _____

Summary of Changes

Lease Name and Number: Lanham 361 (SWD-1) A4

API/Permit #: 15-107-24330-00-01

Doc ID: 1091538

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value
API	15-107-24330-00-00	15-107-24330-00-01
Approved Date	08/22/2012	08/23/2012
Lease Name	Lanham 361	Lanham 361 (SWD-1)
Save Link	../kcc/detail/operatorE ditDetail.cfm?docID=10 90973	../kcc/detail/operatorE ditDetail.cfm?docID=10 91538
Well Number	SWD-1	A4