



KANSAS CORPORATION COMMISSION 1094310
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 # 5723
Name: John M. Denman Oil Co., Inc.
Address 1: PO BOX 36
Address 2: _____
City: SEDAN State: KS Zip: 67361 + 0036
Contact Person: SHELLEY WISE
Phone: (620) 725-3727
CONTRACTOR: License # 5831
Name: M.O.K.A.T.
Wellsite Geologist: NA
Purchaser: COFFEYVILLE RESOURCES

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
 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 #: _____

09/17/2012	09/18/2012	09/25/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-019-27233-00-00
Spot Description: _____
SW NW SE SW Sec. 10 Twp. 34 S. R. 12 East West
893 Feet from North / South Line of Section
3767 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Chautauqua
Lease Name: LOWE Well #: S-1
Field Name: _____
Producing Formation: WAYSIDE
Elevation: Ground: 779 Kelly Bushing: 0
Total Depth: 1041 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1041
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: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Deanna Gerriso Date: 10/12/2012



1094310

Operator Name: John M. Denman Oil Co., Inc. Lease Name: LOWE Well #: S-1
 Sec. 10 Twp. 34 S. R. 12 East West County: Chautauqua

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 <input type="checkbox"/> Yes <input checked="" 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: GAMMA RAY CASING COLLAR VAIABLE DENSITY LOG COMPENSATED SENSITY SIDEWALL NEUTRON LOG DUAL INDUCTION LL3/GR LOG	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum wayside
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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	8.6250	6.75	12	45	portland	8	
casing	6.75	4.5	10	1032	portland	110	

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
2	965-978		

TUBING RECORD:	Size: <u>2.3750</u>	Set At: <u>960'</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>9/25/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____		
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 checked="" 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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: <u>965-978</u>
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9/19/2012

253037



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CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Denman Oil	State, County	Chautauqua, Kansas	Cement Type	CLASS A
Job Type	4 1/2" Prod.	Section		Excess (%)	30%
Customer Acct #	2223	TWP		Density	13.8
Well No.	Low S-1	RGE		Water Required	8.42
Mailing Address		Formation		Yield	1.77
City & State		Hole Size	6 3/4"	Slurry Weight	
Zip Code		Hole Depth	1041'	Slurry Volume	34 bbl
Contact		Casing Size	4 1/2" 11.6#	Displacement	16.4 bbl
Email		Casing Depth	1032'	Displacement PSI	600
Cell		Drill Pipe		MIX PSI	100
Dispatch Location	BARTLESVILLE	Tubing		Rate	3
Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,030.00	\$ 1,030.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	36	PER MILE	\$4.00	\$ 144.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$350.00	\$ 350.00
			0	\$0.00	\$ -
			0	\$0.00	\$ -
			0	\$0.00	\$ -
			0	\$0.00	\$ -
			0	\$0.00	\$ -
5402	FOOTAGE	1.032	PER FOOT	0.22	\$ 227.04
EQUIPMENT TOTAL					\$ 1,751.04
Cement, Chemicals and Water					
1125A	THICK SET CEMENT (SLB OMC 4% GEL 2% CAL. CHLORIDE)	110	0	\$19.20	\$ 2,112.00
1107A	PHENOSEAL	40	0	\$1.29	\$ 51.60
1112A	KOL SEAL (50 # SK)	550	0	\$0.46	\$ 253.00
1115B	PREMIUM GEL/BENTONITE (50#)	150	0	\$0.21	\$ 31.50
1123	CTY WATER (PER 1000 GAL)	4	0	\$16.50	\$ 66.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
CHEMICAL TOTAL					\$ 2,514.10
Water Transport					
5501C	WATER TRANSPORT (CEMENT)	4	TER TRANSPORT (CEME	\$112.00	\$ 448.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
TRANSPORT TOTAL					\$ 448.00
Cement Floating Equipment (TAXABLE)					
0	Cement Bucket		0	\$0.00	\$ -
0	Cementator		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0	Float Shoes		0	\$0.00	\$ -
0	Float Collars		0	\$0.00	\$ -
0	Guide Shoes		0	\$0.00	\$ -
0	Balls and Flapper Plates		0	\$0.00	\$ -
0	Picker Shoes		0	\$0.00	\$ -
0	CV Tools		0	\$0.00	\$ -
0	Ball Valves, Bandages, Clamps, Misc.		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
Plugs and Ball Seals					
4404	1/2" RUBBER PLUG	1	PER UNIT	\$45.00	\$ 45.00
0	Downhole Tools		0	\$0.00	\$ -
CEMENT FLOATING EQUIPMENT TOTAL					\$ 45.00
SUB TOTAL					\$ 4,758.14
SALES TAX 8.30%					\$ 395.02
TOTAL					\$ 5,153.16
10% (-DISCOUNT)					\$ 515.32
DISCOUNTED TOTAL					\$ 4,637.84

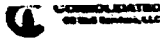
DRIVER NAME	
677	Chancey Williams / John Wade
56" & T-133	Casey Martin
551	Aaron Smith
	H & S Transport

AUTHORIZED BY [Signature]
 DATE 9-18-12

TITLE FOREMAN
Chancey Williams / John Wade

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.

9/19/2012



3930000467

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Denman Oil	State, County	Chautauqua , Kansas	Cement Type	CLASS A
Customer Acct #	4 1/2" Prod.	Section	0	Excess (%)	0.3
Well No.	0	TWP	0	Density	13.8
Mailing Address	Lowe S-1	RGE	0	Water Required	8.42
City & State	0	Formation	0	Yield	1.77
Zip Code	0	Hole Size	6 3/4"	Slurry Weight	0
Contact	0	Hole Depth	1041'	Slurry Volume	34 bbl
Email	0	Casing Size	4 1/2" 11.6#	Displacement	16.4 bbl
Cell	0	Casing Depth	1032'	Displacement PSI	600
Office	0	Drill Pipe	0	MIX PSI	100
Dispatch Location	BARTLESVILLE	Tubing	0	Rate	3

REMARKS

Arrive on Loc. Rig up. Safety Meeting. Pump 10 BBL of Gel, Followed by 20 BBL of H2O till well circulated. Pumped 34 BBL of Cement @ 13.8 ppg. Shut down washed pump and lines and dropped top rubber Plug. Displaced 16.4 BBL. Float Held.

SAFTY MEETING