



KANSAS CORPORATION COMMISSION 1091500
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 # 6804
Name: Lachenmayr Oil LLC
Address 1: PO BOX 526
Address 2: _____
City: NEWTON State: KS Zip: 67114 + _____
Contact Person: John Lachenmayr
Phone: (316) 283-5585
CONTRACTOR: License # 33350
Name: Southwind Drilling, Inc.
Wellsite Geologist: Frank Mize
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 (Cora, 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>1/11/2012</u>	<u>1/17/2012</u>	<u>6/15/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-173-21009-00-00

Spot Description: _____

SE NW NW Sec. 7 Twp. 26 S. R. 1 East West

990 Feet from North / South Line of Section

990 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Sedgwick

Lease Name: Shawver Well #: L-4

Field Name: _____

Producing Formation: Viola

Elevation: Ground: 1336 Kelly Bushing: 1350

Total Depth: 3367 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 212 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 0

feet depth to: _____ w/ 5 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 1600 ppm Fluid volume: 250 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: Lachenmayr Oil LLC

Lease Name: goodrich License #: 6804

Quarter NW Sec. 16 Twp. 25 S. R. 1 East West

County: Sedgwick Permit #: D-28,341

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: NAOMI JAMES Date: 10/01/2012



1091500

Operator Name: Lachenmayr Oil LLC Lease Name: Shawver Well #: L-4
 Sec. 7 Twp. 26 S. R. 1 East West County: Sedgwick

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input 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>Lansing</td> <td>2348</td> <td>-998</td> </tr> <tr> <td>Kansas City</td> <td>2558</td> <td>-1208</td> </tr> <tr> <td>Mississippi</td> <td>3032</td> <td>-1682</td> </tr> <tr> <td>Kinderhook</td> <td>3240</td> <td>-1890</td> </tr> <tr> <td>Maquoketa</td> <td>3334</td> <td>-1984</td> </tr> <tr> <td>Viola</td> <td>3358</td> <td>-2008</td> </tr> <tr> <td>RTD</td> <td>3367</td> <td>-2017</td> </tr> </table>	Name	Top	Datum	Lansing	2348	-998	Kansas City	2558	-1208	Mississippi	3032	-1682	Kinderhook	3240	-1890	Maquoketa	3334	-1984	Viola	3358	-2008	RTD	3367	-2017
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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	12.25	8.625	20	212	common 1/2 Sack class F	265	3% cc, 2% gel
Production	7.875	5.5	15.5	3365	thick set	125	3%kolssel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforata				
___ 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

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

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input checked="" type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input checked="" type="checkbox"/> Open Hole <input 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: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 34148
LOCATION # 180 Eldorado
FOREMAN Jacob Storm

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT Api 15-173-21009-00-00

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-11-12	4897	Shaver L-4	7	26	1E	Seawick
CUSTOMER			TRUCK #		DRIVER	
Lachenmayer oil			603		Jeff	
MAILING ADDRESS			502		Steve	
P O Box 526			442		mark	
CITY			511		Jacob	
Newton						
STATE			ZIP CODE			
KS			67114			

Salty
meating
12
JS
Std
MS

JOB TYPE Surface B HOLE SIZE 12 1/4 HOLE DEPTH 212 CASING SIZE & WEIGHT 8 5/8
 CASING DEPTH 211 DRILL PIPE N/A TUBING N/A OTHER _____
 SLURRY WEIGHT 14 lb SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 8 ft
 DISPLACEMENT 13.44 DISPLACEMENT PSI 500 MIX PSI 300 RATE 4 bpm

REMARKS: Salty meating, break circulation circulated hole for 1 hr. waiting on mud hatter, mixed 165 SKS class A 3%cc 2 1/2 gal, 1/8 lb poly displaced with 13 bbl water did not get cement to surface got 1 in mixed 100 SKS class A 3%cc circulating cement to surface from 38 ft

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401S	1	PUMP CHARGE	825.00	825.00
5406	40	MILEAGE	4.00	160.00
5407	2	min bulk delivery	350.00	700.00
1104S	265	class A	14.95	3827.20
1102	500	calcium chloride	0.74	414.40
1118 B	350	gel	0.21	73.50
1107	75	poly-flake	2.35	176.25
5404	2 hr	X 3 personnel/stand by X	84.00	504.00
			Subtotal	6680.35
			SALES TAX	
			ESTIMATED TOTAL	

Ravin 3737

AUTHORIZATION [Signature] TITLE 1-12-12 DATE _____

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 to

Company	Lachenmayr Oil LLC	Lease Name	Shawver	
Address	P.O. Box 526	Lease #	L-4	
CSZ	Newton, KS 67114	Legal Desc	SE NW NW	Job Ticket 6000
Attn.	John Lachenmayr	Section	17	Range 1E
		Township	26S	
		County	Sedgwick	State KS
		Drilling Cont	Southwind Drilling #2	

Comments Field; Valley Center

GENERAL INFORMATION

Test # 1 Test Date 1/16/2012
 Tester Johnny Jimmy
 Test Type Conventional Bottom Hole
 Successful Test
 # of Packers 2.0 Packer Size 6 3/4
 Mud Type Gel Chem
 Mud Weight 9.6 Viscosity 48.0
 Filtrate 10.8 Chlorides 3100

Chokes 3/4 Hole Size 7 7/8
 Top Recorder # 13310
 Mid Recorder #
 Bott Recorder # w1023
 Mileage 80 Approved By
 Standby Time 0
 Extra Equipmnt None
 Time on Site 3:00 PM
 Tool Picked Up 4:30 PM
 Tool Layed Dwn 8:45 PM

Drill Collar Len 0
 Wght Pipe Len 0

Elevation 1341.00 Kelley Bushings 1350.00

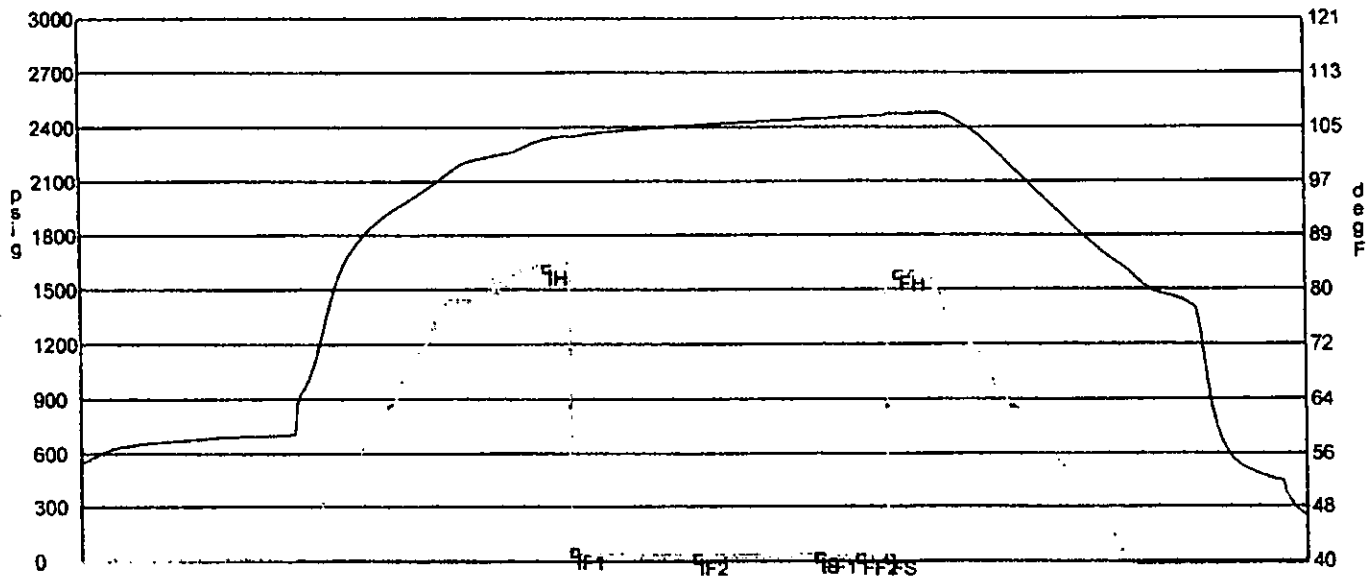
Formation Hunton
 Interval Top 3239.0 Bottom 3346.0
 Anchor Len Below 107.0 Between 0
 Total Depth 3346.0

Start Date/Time 1/16/2012 4:00 PM
 End Date/Time 1/16/2012 8:55 PM

Blow Type Weak surface blow throughout initial flow period. No blow final flow period.
 Times: 30, 30, 10, 6.

RECOVERY

Feet	Description	Gas	Oil	Water	Mud
5	Drilling mud	0% 0ft	0% 0ft	0% 0ft	100% 5ft
	DST Fluids	0			



	Date	Time	Pressure	Temp	
IH	1/16/2012 5:51:00 PM	1.85	1622.116	102.999	Initial Hydro-static
IF1	1/16/2012 5:57:10 PM	1.952778	55.748	103.451	Initial Flow (1)
IF2	1/16/2012 6:27:00 PM	2.45	22.403	105.048	Initial Flow (2)
IS	1/16/2012 6:56:30 PM	2.941667	31.626	106.033	Initial Shut-In
FF1	1/16/2012 6:56:50 PM	2.947222	26.344	106.04	Final Flow (1)
FF2	1/16/2012 7:06:40 PM	3.111111	21.044	106.327	Final Flow (2)
FS	1/16/2012 7:13:40 PM	3.227778	19.931	106.519	Final Shut-In
FH	1/16/2012 7:16:20 PM	3.272222	1587.743	106.798	Final Hydro-static

GAS FLOWS

<u>Min Into IFP</u>	<u>Min Into FFP</u>	<u>Gas Flows</u>	<u>Pressure</u>	<u>Choke</u>
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