

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1095528

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 # 34592
Name: Kansas Resource Exploration & Development, LLC
Address 1: 9393 W 110TH ST, STE 500
Address 2: _____
City: OVERLAND PARK State: KS Zip: 66210 + _____
Contact Person: Bradley Kramer
Phone: (913) 669-2253
CONTRACTOR: License # 34223
Name: Utah Oil LLC
Wellsite Geologist: N/A
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 #: _____

08/06/2012 08/07/2012 08/31/2012

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-091-23843-00-00

Spot Description: _____

NE SE SE SE Sec. 10 Twp. 14 S. R. 22 ☒ East ☐ West

609 Feet from ☐ North / ☒ South Line of Section

171 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: Johnson

Lease Name: Knabe A Well #: KR-10

Field Name: Gardner

Producing Formation: Squirrel Sandstone

Elevation: Ground: 1020 Kelly Bushing: 0000

Total Depth: 765 Plug Back Total Depth: 748

Amount of Surface Pipe Set and Cemented at: 22 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 748

feet depth to: 0 w/ 74 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 000000 ppm Fluid volume: 0000 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: NAOMI JAMES Date: 10/04/2012



1095528

Operator Name: Kansas Resource Exploration & Development, LLC Lease Name: Knabe A Well #: KR-10
 Sec. 10 Twp. 14 S. R. 22 ☒ East ☐ West County: Johnson

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 <i>(Attach Additional Sheets)</i> <div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> Samples Sent to Geological Survey <div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> Cores Taken <div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> Electric Log Run <div style="display: flex; justify-content: flex-end;"> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Electric Log Submitted Electronically <div style="display: flex; justify-content: flex-end;"> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> <i>(If no, Submit Copy)</i> List All E. Logs Run: <div style="margin-top: 5px;"> <small>Gamma Ray Neutron CCL</small> </div>	<div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample </div> <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>Squirrel</td> <td>694.0</td> <td>326</td> </tr> </table>	Name	Top	Datum	Squirrel	694.0	326
Name	Top	Datum					
Squirrel	694.0	326					

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	7	19	22.45	Portland	5	
Production	5.625	2.875	6.5	748	OWC	74	

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
2	694.0' - 704.0' 21 Perfs	2" DML RTG	694.0' - 704.0'

TUBING RECORD:		Size: 1"	Set At: 728	Packer At: N/A	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR.			Producing Method:		
			<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____		
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 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: _____ _____
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PO Box 884, Chanute, KS 66720
620-431-9210 or 800-457-8676

TICKET NUMBER 32809
LOCATION Ottawa
FOREMAN Alvin Mader

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
9-7-11	4448	Knabe D	SR-10	NW 14	14	22	SD
CUSTOMER Kansas Resources E&D							
MAILING ADDRESS 9393 W 110th Ste 500							
CITY Overland Park	STATE KS	ZIP CODE 66210					
JOB TYPE Long St	HOLE SIZE 50/8	HOLE DEPTH 898	CASING SIZE & WEIGHT 2 7/8				
CASING DEPTH 867	DRILL PIPE	TUBING	OTHER				
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT IN CASING yes				
DISPLACEMENT 3	DISPLACEMENT PSI 800	MIX PSI 200	RATE 5 bpm				
REMARKS: Held safety Meek Establish rate. Mixed & pumped 100 # gel to condition hole followed by 127 sk 50/80 for plug 2 1/2 gel. Circulated cement. Finished pump. Pumped 2 plugs to casing TD. Well held 800 PSI. Set floor. Closed valve.							

Inter Drilling

Alex Hark

[illegible]

Payin 8737

AUTHORIZATION

TITLE

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 form.