

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1095553

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	API No. 15 - 15-091-23733-00-00
Name: Kansas Resource Exploration & Development, LLC	Spot Description:
Address 1: 9393 W 110TH ST, STE 500	NE_SE_SE_Sec. 10 Twp. 14 S. R. 22 East West
Address 2:	637 Feet from North / South Line of Section
City: OVERLAND PARK State: KS Zip: 66210 +	Feet from ✓ East / West Line of Section
Contact Person: Bradley Kramer	Footages Calculated from Nearest Outside Section Corner:
Phone: (913) 669-2253	□ne □nw Øse □sw
CONTRACTOR: License # 34223	County: Johnson
Name: Utah Oil LLC	Lease Name: Knabe A Well #: KR-7
Wellsite Geologist; N/A	Field Name: Gardner
Purchaser: Coffeyville Resources	Producing Formation: N/A
Designate Type of Completion:	Elevation: Ground: 1017 Kelly Bushing: 0000
	Total Depth: 741 Plug Back Total Depth: 741
	Amount of Surface Pipe Set and Cemented at: 22 Feet
Oil WSW SWD Slow	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
☐ Gas ☑ D&A ☐ ENHR ☐ SIGW ☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set:Feet
☐ OG ☐ GSW ☐ Temp. Abd.	
Cathodic Other (Core, Expl., etc.):	If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:	feet depth to:w/sx cmt.
Operator:	
	Drilling Fluid Management Plan
Well Name:	(Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: 000000 ppm Fluid volume: 0000 bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD ☐ Conv. to GSW	Dewatering method used: Evaporated
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	· ·
Dual Completion Permit #:	Operator Name:
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	QuarterSecTwpS. R East West
GSW Permit #:	County: Permit #:
05/22/2012 05/23/2012 05/23/2012	
Spud Date or Date Reached TD Completion Date or Recompletion Date	

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.

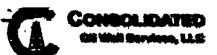
Submitted Electronically

	KCC Office Use ONLY
	Letter of Confidentiality Received
İ	Date:
	Confidential Release Date:
	Wireline Log Received
	Geologist Report Received
	UIC Distribution
	ALT I I III Approved by: NAOMI JAMES Date: 10/04/2012

Side Two



Operator Name: Kansa	s Resource Exploratio	n & Development, LLC	Lease Nam	e: Knabe A		Well #: KR-	<u>′</u>	
Sec. 10 Twp.14	s. R. 22	East West	County: <u>J</u>	ohnson				
INSTRUCTIONS: Show time tool open and close recovery, and flow rates line Logs surveyed. Atta	ed, flowing and shut-in if gas to surface test,	pressures, whether shalong with final chart(s	nut-in pressure	reached static level	, hydrostatic pre	ssures, bottom ho	ale temperature, fluid	
(Attach Additional Sheets)		☐ Yes 🗸 No		Log Formation	on (Top), Depth		Sample	
		☐ Yes ☑ No		Name /A		Тор		
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	Electronically	Yes ✓ No Yes ✓ No Yes ✓ No						
List All E. Logs Run:								
				✓ New Used ce, intermediate, produ	ction, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting	Type of Cement	# Sacks Used	Type and Percent Additives	
Surface	12.25 7	*	14	22	Portland	5		
		ADDITIONAL	L CEMENTING	/ SQUEEZE RECOR	D			
Purpose: Depth Top Bottom Protect Casing		Type of Cernent # Saci		sed	Type and Percent Additives			
Plug Back TD Plug Off Zone	-							
Shots Per Foot	PERFORATION Specify Fo			racture, Shot, Cen (Amount and Kind o	nent Squeeze Recor f Material Used)	d Depth		
								
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes	No		
Date of First, Resurned	Production, SWD or ENH	R. Producing Me	thod:	Gas Lift	Other (Explain)			
Estimated Production Per 24 Hours	Oil B	bls. Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity	
DISPOSITIO	ON OF GAS:		METHOD OF C	OMPLETION:		PRODUCTI	ON INTERVAL:	
Vented Sold	_	Open Hole	Perf.	Perl. Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4)				
(If vented, Sub	omit ACO-18.)	Other (Specify)			7			



LOCATION Offama KS
FOREMAN Fred Mader

PO Box 884, Chanuta, KS 66720 620-431-9210 or 800-467-8678

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER#	WEL	L NAME &	NUME	JER 1	CE/	TIME	TOMATOMO	DALLOR	
					~~·`	SEC	IION	TOWASHIP	HANGE	COUNTY
5/23/12	4448	Knabo	"A" #	KR	۲۰7	S€	10	74	22	To
CUSTOMER				•	·	•				
Kanaa	s Resour	ces Exp	400	u.		TRU	CK#	DRIVER	TRUCK #	DRIVER
MAILING ADDRE	88				}	ऽ	04	FREMAD	Safety	MY
9.79.3	w. 110	<u>M</u> 54				3	68	ARLMOD	AM	0
CITY	_	STATE	ZIP CO	Œ		ය	69	DERMAS	DM	
Overland	Park	KS	662	10	<u> </u>	3	58	RYASIN	R3	
JOB TYPE PI	بد	HOLE SIZE	57	8	HOLE DEPTH		11,		EIGHT <u>/V/</u>	4
CASING DEPTH_	$\sigma_{\underline{}}$	DRILL PIPE			TUBING			<u> </u>	OTHER	
SLURRY WEIGHT	r	SLURRY VOL	· · · · · · · · · · · · · · · · · · ·		WATER galls	k		CEMENT LEFT In	CASING FU	11-
DISPLACEMENT	NA	DISPLACEMEN	NT PSL		MIX PSI			RATE BPI	'n	
REMARKS: P	الم الم	k san	111	tu	bire to	~7)	ی	DRIVER TRUCK DRIVER FREMAD SOFT MY ARLMCD AM DERMAS DM RYASIN RS CASING SIZE & WEIGHT N/A OTHER CENENT LEFT IN CASING FULL RATE BPM SPAX AKSKS CEMBER (75') S (50') CEMBER TUBING DATE TOBING DATE TOB		
ار ۱۵	9 - +	56.	Y0			-		,		
Rull	ין "לי	pind x	o 3	יסים	FIL					/ M.S.
***	TRUCKS DRIVER TRUCKS DRIVER ARBOS RESOURCES Expl & Day. ADDRESS 93 W. 110 12 ST STATE ZIP CODE Good Park RS 66210 E Play HOLE SIZE 578 HOLE DEPTH 341 CASSING SIZE & WEIGHT N/A DEPTH DRILL PIPE TUBING OTHER WEIGHT SLURRY VOL WATER SAINL CEMENT LEFT IN CASSING FULL EMENT N/A DISPLACEMENT PSI MIX PSI RATE BPM 8: Polling Ris 1010 1" tubing to 500" Spat 10 585 (50") Commit. FILL 1" tubing to 500" Spat 10 585 (50") Commit. FILL 1" tubing to 500" Spat 10 585 (50") Commit. FULL 1" tubing to 500" Spat 10 585 (50") Commit. FULL 1" tubing to 500" Spat 10 585 (50") Commit. FULL 1" tubing to 500" Spat 10 585 (50") Commit. FULL 1" tubing to 500" Spat 10 585 (50") Commit.									
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ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUC	7	UNIT PRICE	TOTAL
5405 N		PUMP CHARGE Plug to About dan	365		10300
5406	Zom',	MILEAGE	368		18000
5407	Mynimum	Ton Miles	558		35000
<u>22056</u>	Zhrs	So BAL Vac Truck	369		1800
1/24	70 S.F.S	50/50 Por Mix Coment			266€2
UIFB	353*	Promine Cal			742
<u> </u>		SCA	VNE:	P1,	-
			• -		
in 3737		7	52570	SALES TAX	634
	Trous	250107	`	TOTAL	2583 2583

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.