



KANSAS CORPORATION COMMISSION 1095667  
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 # 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 ) 6692253  
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 #: \_\_\_\_\_

|                                   |                   |   |
|-----------------------------------|-------------------|---|
| <u>07/16/2012</u>                 | <u>07/17/2012</u> | <u>08/31/2012</u>                       |
| Spud Date or<br>Recompletion Date | Date Reached TD   | Completion Date or<br>Recompletion Date |

API No. 15 - 15-091-23844-00-00

Spot Description: \_\_\_\_\_

SW NW SW SE Sec. 10 Twp. 14 S. R. 22  East  West

718 Feet from  North /  South Line of Section

2335 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-11

Field Name: Gardner

Producing Formation: Bartlesville

Elevation: Ground: 1014 Kelly Bushing: 0000

Total Depth: 900 Plug Back Total Depth: 873

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: 877

feet depth to: 0 w/ 112 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 000000 ppm Fluid volume: 150 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: NACMI JAMES Date: 10/04/2012



1095667

Operator Name: Kansas Resource Exploration & Development, LLC Lease Name: Knabe A Well #: KR-11  
 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><i>(If no, Submit Copy)</i><br><br>List All E. Logs Run:<br><br>Gamma Ray<br>Neutron<br>CCL | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><br><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>Bartlesville</td> <td>833</td> <td>181</td> </tr> </table> | Name  | Top | Datum | Bartlesville | 833 | 181 |
| Name  | Top  | Datum |     |       |              |     |     |
| Bartlesville  | 833  | 181   |     |       |              |     |     |

| 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            | Portland       | 5            |                            |
| Production  | 5.625             | 2.875                     | 6.5               | 877           | 50/50 Poz      | 112          |                            |
|   |                   |                           |                   |               |                |              |                            |

| 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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br>(Amount and Kind of Material Used) | Depth          |
|----------------|---|---|----------------|
| 2              | 833.0' - 841.0' 17 Perfs  | 2" DML RTG  | 833.0' - 841.0 |
|                |   |   |                |
|                |   |   |                |
|                |   |   |                |

|   |           |   |                |  |
|---|-----------|---|----------------|--|
| TUBING RECORD:                                  | Size: 1"  | Set At: 857'  | 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:<br><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  |

|  |   |   |
|--|---|---|
| <b>DISPOSITION OF GAS:</b><br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | <b>METHOD OF COMPLETION:</b><br><input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i><br><input type="checkbox"/> Other (Specify) _____ | <b>PRODUCTION INTERVAL:</b><br>_____<br>_____ |
|--|---|---|

