



KANSAS CORPORATION COMMISSION 1096339
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 # 5920
Name: Bandy, Terry P. dba Te-Pe Oil & Gas
Address 1: PO BOX 522
Address 2: _____
City: CANTON State: KS Zip: 67428 + 0522
Contact Person: TERRY P BANDY
Phone: (620) 628-4428
CONTRACTOR: License # 32701
Name: C & G Drilling, Inc.
Wellsite Geologist: THOMAS E BLAIR
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 #: _____
11/28/2011 12/4/2011 5/21/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-015-23932-00-00
Spot Description: W2 NW NE
W2 NW NE Sec. 28 Twp. 27 S. R. 4 East West
660 Feet from North / South Line of Section
2310 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Butler
Lease Name: CARTER Well #: 8
Field Name: AUGUSTA NORTH
Producing Formation: ARBUCKLE
Elevation: Ground: 1220 Kelly Bushing: 1229
Total Depth: 2344 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 306 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 1100 ppm Fluid volume: 160 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite:
Operator Name: TE-PE OIL & GAS
Lease Name: WILSON A #2 License #: 5920
Quarter NE Sec. 28 Twp. 27 S. R. 04 East West
County: BUTLER Permit #: D-25335

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 Gattisor Date: 10/12/2012



1096339

Operator Name: Bandy, Terry P. dba Te-Pe Oil & Gas Lease Name: CARTER Well #: 8
 Sec. 28 Twp. 27 S. R. 4 East West County: Butler

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 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 checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>KANSAS CITY</td> <td>1933</td> <td>-704</td> </tr> <tr> <td>BASE KANSAS CITY</td> <td>2097</td> <td>-868</td> </tr> <tr> <td>CHEROKEE</td> <td>2263</td> <td>-1034</td> </tr> <tr> <td>ARBUCKLE</td> <td>2337</td> <td>-1108</td> </tr> <tr> <td>RTD</td> <td>2340</td> <td>-1111</td> </tr> </tbody> </table>	Name	Top	Datum	KANSAS CITY	1933	-704	BASE KANSAS CITY	2097	-868	CHEROKEE	2263	-1034	ARBUCKLE	2337	-1108	RTD	2340	-1111
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	9.625	36	306	CLASS A	150	3% CC
PRODUCTION	8.75	7.0	26	2339	60/40 POZMIX	100	10% SALT, 5# KOL-SEAL

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
		ACIDIZE 15% HCL 100 GALS	2340

TUBING RECORD: Size: <u>2-7/8</u> Set At: <u>2335</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>5/21/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>SWABBING</u>
Estimated Production Per 24 Hours	Oil Bbls. <u>1</u>	Gas Mcf <u>0</u> Water Bbls. <u>120</u> 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 checked="" type="checkbox"/> Open Hole <input 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 (Specify) _____	PRODUCTION INTERVAL: <u>2339-2344.5</u>
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CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 34025
LOCATION 180
FOREMAN Larry Storm

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

FIELD TICKET & TREATMENT REPORT

CEMENT APT-15-015-23932-00-80

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-5-11	8136	CARTER # 8	28	27 S	4 E	Butler
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
TE-PE-Dr1			467	Ken		
MAILING ADDRESS			491	JOE		
P.O. Box 522			637	Tim M.		
CITY	STATE	ZIP CODE	539	LARRY		
Chanute	KS	67428				

JOB TYPE PROD B HOLE SIZE 8 3/4 HOLE DEPTH 2340 CASING SIZE & WEIGHT 7" 8th
 CASING DEPTH 2339 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.5 SLURRY VOL 27 WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 90.79 DISPLACEMENT PSI 930 MIX PSI 0 RATE 5.14

REMARKS: Reamed up to 7" Cas - Broke Circulator - Moved 100 sks (60/40)
Drum # 4 - 10lb Salt + 2lbs Col - Seal - Flashed Pump - Drsp/acc
91.03 bbls handed Plug at 1400 lbs - Released float held.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	20	MILEAGE	4.00	80.00
			.22	4.40
1131	100	sks 60/40 Poz-Mix	12.55	1255.00
1118 B	200	lbs Gel	.21	42.00
1111	860	lbs Salt	.37	318.20
1110 A	500	lbs Col-Sept	.46	230.00
4409	1	7" TR Plug	82.00	82.00
5407	1	Bulk Desprexy	350.00	350.00
5502 C	4	80 vac	90.00	360.00
1123	3	Cray Water	16.50	49.50
		Subtotal		3796.10
		SALES TAX		129.47
		ESTIMATED TOTAL		3926.17

Rev'n 3737

246498

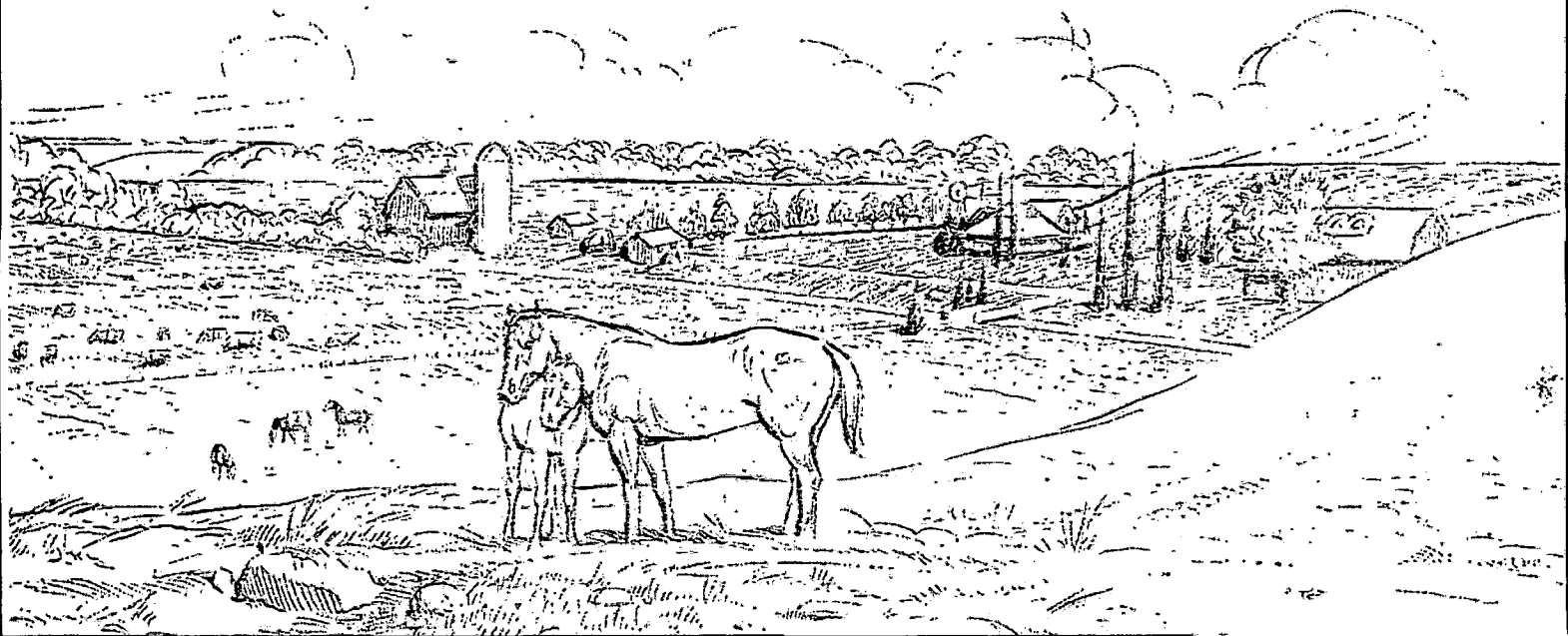
AUTHORIZATION [Signature] TITLE Ops DATE 12-5-11

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.

Thomas E. Blair
22150 SE Cole Creek Rd.
Atlanta, KS 67008
620.394.2324
316.655.8585
tomkat@sktc.net

GEOLOGISTS REPORT

WELL:	Carter #8
OPERATOR:	Te-Pe Oil & Gas
LOCATION:	W2 NW NE 28-27-4E Butler County, KS
CONTRACTOR:	C&G Drilling, Inc. Rig #1
DRILLING COMMENCED:	11-28-2011
DRILLING COMPLETED:	12-04-2011
ELEVATIONS:	1223 GL; 1229 KB
ALL MEASUREMENTS FROM:	1229 KB
WELLSITE GEOLOGIST:	Tom Blair



GEOLOGICAL FORMATION TOPS:

<i>FORMATION</i>	<i>DEPTH</i>	<i>SUB-SEA DATUM</i>
Kansas City	1933	-704
Base Kansas City	2097	-868
Cherokee	2263	-1034
Arbuckle	2337	-1108
Total Depth	2340	-1111

ZONES OF INTEREST AND SHOWS

Formation: Arbuckle

Interval: 2339-2340

Description: Dolomite, tan, fine to medium-crystalline, scattered crystalline porosity, good odor, traces of staining and free oil.

REMARKS AND RECOMMENDATIONS

7 inch casing was set 2 feet into the Arbuckle for completion in the open hole.

Respectfully submitted,

