



KANSAS CORPORATION COMMISSION 1096322  
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) 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 #:

05/24/2012 05/25/2012 06/15/2012  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 15-091-23815-00-00  
Spot Description:  
NW NE SE NE Sec. 15 Twp. 14 S. R. 22  East  West  
3657 Feet from  North  South Line of Section  
517 Feet from  East  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

County: Johnson  
Lease Name: Knabe M Well #: KR-17  
Field Name: Gardner

Producing Formation: Bartlesville Sandstone  
Elevation: Ground: 1020 Kelly Bushing: 0000  
Total Depth: 926 Plug Back Total Depth: 901  
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: 904  
feet depth to: 0 w/ 130 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: 10/08/2012



1096322

Operator Name: Kansas Resource Exploration & Development, LLC Lease Name: Knabe M Well #: KR-17  
 Sec. 15 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>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Bartlesville	839'	181'
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				
Gemma Ray Neutron CCL				

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	9.875	7	19	22	Portland	5	
Production	5.625	2.875	6.5	904	50/50 Poz	130	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> 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
2	839.0' - 849.0' 21 Perfs	2" DML RTG	839.0' - 849.0'

TUBING RECORD:	Size: 1"	Set At: 884'	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-1B.)</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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____
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**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 39819

LOCATION Oklahoma KS

FOREMAN FRED MAZER

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5/26/12	4448	Krahe "M" KR-17	NE 15	14	22	JO

CUSTOMER  
Kansas Resources Expl & Dev.  
MAILING ADDRESS  
9393 W 110th St  
CITY Overland Park STATE KS ZIP CODE 66210

TRUCK #	DRIVER	TRUCK #	DRIVER
506	FREMAD	Safely	MH
6166	GAARMAO	GM	J
369	DERMAS	DM	
548	MIKHAA	MH	

JOB TYPE Logging HOLE SIZE 5 7/8 HOLE DEPTH 926 CASING SIZE & WEIGHT 2 7/8 EUE  
CASING DEPTH 904' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2-2 1/2" Plugs  
DISPLACEMENT 5.25 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 BPM

REMARKS: Establish circulation, mix & pump 100 gal flush, mix & pump 130 sks 50/50 port mix cement 2 1/2" x 2 1/2" pheno seal/sk. Cement to surface. Flush pump & lines clean. Displace 2-2 1/2" rubber plugs to casing TD. Pressure to 800 PSI. Release pressure to set float valve. Shut in casing.

Utah Drilling

Fred Mazer

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	666	1030 <sup>00</sup>
5406	30 mi	MILEAGE	666	120 <sup>00</sup>
5402	904	Casing Footage		NIC
5407	Minimum	Ten Miles	548	350 <sup>00</sup>
5502	2 hrs	80 BBL Vac Truck	369	180 <sup>00</sup>
1124	130 sks	50/50 port mix cement		1428 <sup>50</sup>
1118B	318 <sup>sk</sup>	Premium Gel		667 <sup>50</sup>
1107A	65 <sup>sk</sup>	Pheno Seal		83 <sup>00</sup>
4402	2	2 1/2" Rubber Plugs		56 <sup>00</sup>
			7.525%	SALES TAX
				ESTIMATED TOTAL
				122 <sup>67</sup>
				3432 <sup>80</sup>

Rev n 3737

AUTHORIZATION [Signature] TITLE 250164 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.