



KANSAS CORPORATION COMMISSION 1096321  
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  SLOW  
 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 #:

05/04/2012 05/07/2012 06/15/2012  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-091-23814-00-00  
Spot Description:  
NW SE SE NE Sec. 15 Twp. 14 S. R. 22 East West  
2987 Feet from North / South Line of Section  
568 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-16  
Field Name: Gardner

Producing Formation: Bartlesville Sandstone  
Elevation: Ground: 1014 Kelly Bushing: 0000  
Total Depth: 900 Plug Back Total Depth: 877  
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: 883  
feet depth to: 0 w/ 115 sx crnt.

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



1096321

Operator Name: Kansas Resource Exploration & Development, LLC Lease Name: Knabe M Well #: KR-16

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<br><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                            | 831'                             | 183'                            |
| Electric Log Run   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |   |                                  |                                 |
| Electric Log Submitted Electronically<br><i>(If no, Submit Copy)</i> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |   |                                  |                                 |
| List All E. Logs Run:  |   |   |                                  |                                 |
| Gamma Ray<br>Neutron<br>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               | 883           | 50/50 Poz      | 115          |                            |

| ADDITIONAL CEMENTING / SQUEEZE RECORD  |                  |                |              |                            |
|--|------------------|----------------|--------------|----------------------------|
| Purpose:   | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><input type="checkbox"/> 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><i>(Amount and Kind of Material Used)</i> | Depth          |
|----------------|---|--|----------------|
| 2              | 831.0' - 841.0' 21 Perfs  | 2" DML RTG   | 831.0' - 841.0 |

|   |   |                     |                       |  |
|---|---|---------------------|-----------------------|--|
| TUBING RECORD:                                  | Size: <u>1"</u>   | Set At: <u>863'</u> | Packer At: <u>N/A</u> | 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  |

|   |  |                      |
|---|--|----------------------|
| DISPOSITION OF GAS:<br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION:<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) | PRODUCTION INTERVAL: |
|---|--|----------------------|



**CONSOLIDATED**  
Well Services, LLC

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

TICKET NUMBER 39749  
LOCATION Ottawa, KS  
FOREMAN Casey Kennedy

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

| DATE  | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP    | RANGE          | COUNTY    |        |
|---|------------|--------------------|---------|-------------|----------------|-----------|--------|
| 5/8/12  | 4448       | Knabe M # KR-16    | NE15    | 14          | 22             | JO        |        |
| CUSTOMER<br><u>Kansas Resources Exp + Dev</u>         |            |                    |         | TRUCK #     | DRIVER         | TRUCK #   | DRIVER |
| MAILING ADDRESS<br><u>9393 W. 110th St. Suite 500</u> |            |                    |         | <u>481</u>  | <u>Casper</u>  | <u>CK</u> |        |
| CITY  | STATE      | ZIP CODE           |         | <u>6646</u> | <u>Gar Moo</u> | <u>GM</u> |        |
| <u>Overland Park</u>                                  | <u>KS</u>  | <u>66210</u>       |         | <u>675</u>  | <u>KeiDot</u>  | <u>KD</u> |        |
|   |            |                    |         | <u>503</u>  | <u>Dan Gar</u> | <u>DG</u> |        |

JOB TYPE long string HOLE SIZE 5 5/8" HOLE DEPTH 900' CASING SIZE & WEIGHT 2 7/8" EUE  
CASING DEPTH 887' 883' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2-2 1/2" rubber plugs  
DISPLACEMENT 5.14 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5.6 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 100 # Premium Gel followed by 10 bbls fresh water, mixed & pumped 115 sks 50% Pozmix cement w/ 2% gel & 1/2 # Phenoseal per sk, cement to surface, flushed pump clean, pumped 2-2 1/2" rubber plugs to casing TD w/ 5.14 bbls fresh water, pressured to 800 PSI, released pressure, shut in casing.

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE      | TOTAL               |
|--------------|-------------------|------------------------------------|-----------------|---------------------|
| 5401         | 1                 | PUMP CHARGE                        |                 | 1030. <sup>00</sup> |
| 5406         | on lease          | MILEAGE                            |                 |                     |
| 5402         | 887' 883'         | Casing footage                     |                 |                     |
| 5407         | minimum           | tan mileage                        |                 | 550. <sup>00</sup>  |
| 5502C        | 1.5 hrs           | 80 Vac                             |                 | 135. <sup>00</sup>  |
| 1124         | 115 sks           | 50/50 Pozmix cement                | 10.95           | 1259.25             |
| 1118B        | 293 #             | Premium Gel                        | .21             | 61.53               |
| 1107A        | 58 #              | Phenoseal                          | 1.29            | 74.82               |
| 4402         | 2                 | 2 1/2" rubber plug                 |                 | 56. <sup>00</sup>   |
|              |                   |                                    | 7.525%          |                     |
|              |                   |                                    | SALES TAX       | 109.23              |
|              |                   |                                    | ESTIMATED TOTAL | 3075.83             |

AUTHORIZATION No Co. Rep on location 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 fo: