



KANSAS CORPORATION COMMISSION 1095762  
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 #: \_\_\_\_\_  
07/30/2012    07/31/2012    08/01/2012  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-091-23847-00-00  
Spot Description: \_\_\_\_\_  
SW NW SE SE Sec. 10 Twp. 14 S. R. 22  East | West  
722 Feet from | North /  South Line of Section  
1246 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-14  
Field Name: Gardner  
Producing Formation: Bartlesville Sandstone  
Elevation: Ground: 1017 Kelly Bushing: 0000  
Total Depth: 900 Plug Back Total Depth: 875  
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: 876  
feet depth to: 0 w/ 80 sx cml.

**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: NACMI JAMES Date: 10/09/2012



1095762

Operator Name: Kansas Resource Exploration & Development, LLC Lease Name: Knabe A Well #: KR-14  
 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 <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 Sandstone	838'	179'
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:				
Gamma 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	876	OWC	80	

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	838.0' - 845.0' 15 Perfs	2" DML RTG	838.0' - 845.0

TUBING RECORD:	Size: <u>1"</u>	Set At: <u>846'</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: <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-18.)</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 37538

LOCATION Ottawa KS

FOREMAN Fred Maden

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8876

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8/1/12	4948	Knabe "A" RR 14	SE	14	22	JO

CUSTOMER  
Kansas Resources Explor Dev.  
MAILING ADDRESS  
9393 W 110th St Ste 500  
CITY  
Overland Park STATE  
KS ZIP CODE  
66210

TRUCK #	DRIVER	TRUCK #	DRIVER
506	Fred Mad	Safety	MJG
368	Art McD	ARM	J
369	Der Mas	DM	
548	Mikha	MI	

JOB TYPE Log string HOLE SIZE 5 7/8 HOLE DEPTH 900' CASING SIZE & WEIGHT 2 7/8 EUE  
CASING DEPTH 876' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2" Plugs  
DISPLACEMENT 5.1 BA DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 3.5 BPM

REMARKS: Establish circulation. Mix + pump 100' Premium Gel Flush  
Mix + Pump 80 sks OWC Cement 1/4" Flo Seal/sk. Cement to  
surface. Flush pump + lines clean. Displace 2 1/2" Rubber  
plugs to casing TD. Pressure to 700' PSI. Release  
pressure to set float valve. Shut in casing.

Utahr Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5101	1	PUMP CHARGE	368	1030 <sup>00</sup>
5406	30mi	MILEAGE	368	120 <sup>00</sup>
5402	876'	Casing footage		N/C
5407	Minimum	Ten Miles	548	350 <sup>00</sup>
5502C	2hrs	50 ABE Vac Truck	369	180 <sup>00</sup>
1126	80SKS	OWC Cement		1504 <sup>00</sup>
1158	100'	Premium Gel		21 <sup>00</sup>
1107	20'	Flo Seal		47 <sup>00</sup>
4402	2	2 1/2" Rubber Plugs		56 <sup>00</sup>
			7.525%	SALES TAX
				ESTIMATED TOTAL
				3430.51

AUTHORIZATION J. [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's count records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

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