



KANSAS CORPORATION COMMISSION 1096635
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 # 5723
Name: John M. Denman Oil Co., Inc.
Address 1: PO BOX 36
Address 2: _____
City: SEDAN State: KS Zip: 67361 + 0036
Contact Person: SHELLEY WISE
Phone: (620) 725-3727
CONTRACTOR: License # 5831
Name: M.O.K.A.T.
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 #: _____

<u>8/13/2012</u>	<u>08/15/2012</u>	<u>08/15/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-019-27213-00-00

Spot Description: _____
SW NW SE NE Sec. 34 Twp. 34 S. R. 10 East West

3316 Feet from North / South Line of Section

1291 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Chautauqua

Lease Name: KEENAN Well #: S-1

Field Name: _____

Producing Formation: wayside

Elevation: Ground: 878 Kelly Bushing: 0

Total Depth: 1566 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 44 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 0
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 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: Deanna Garrison Date: 10/31/2012



1096635

Operator Name: John M. Denman Oil Co., Inc. Lease Name: KEENAN Well #: S-1
 Sec. 34 Twp. 34 S. R. 10 East West County: Chautauqua

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: <small>compensated density sidewall neutron log dual induction I3/gr log gamma ray casing collar variable density log</small>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum wayside
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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	8.6250	6.75	12	44	portland	8	
casing	6.75	4.5	14	1408	portland	150	

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

TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input 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 checked="" 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> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Denman Oil	State, County	Chautauqua, Kansas	Cement Type	CLASS A
Job Type	Long String	Section		Excess (%)	30
Customer Acct #		TWP		Density	13.8
Well No.	Keenan S 1	RGE		Water Required	
Mailing Address		Formation		Yield	1.75
City & State		Hole Size	6 3/4	Slurry Weight	
Zip Code		Hole Depth		Slurry Volume	
Contact		Casing Size	4 1/2 INCH,	Displacement	22.4
Email		Casing Depth	1408	Displacement PSI	700-1500
Cell		Drill Pipe		MIX PSI	200
Dispatch Location	BARTLESVILLE	Tubing		Rate	4bpm

Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,030.00	\$ 1,030.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	55	PER MILE	\$4.00	\$ 220.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$350.00	\$ 350.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
5402	FOOTAGE	1,408	PER FOOT	0.22	\$ 309.76
EQUIPMENT TOTAL					\$ 1,909.76

Cement, Chemicals and Water					
1126A	THICK SET CEMENT (8LB OWC 4% GEL 2% CAL. CHLORIDE)	150	0	\$19.20	\$ 2,880.00
1107A	PHENOSEAL	40	0	\$1.29	\$ 51.60
1110A	KOL SEAL (50 # SK)	750	0	\$0.46	\$ 345.00
1118B	PREMIUM GEL/BENTONITE (50#)	400	0	\$0.21	\$ 84.00
0			0	\$0.00	\$ -
1123	CITY WATER (PER 1000 GAL)	6,700	0	\$16.50	\$ 110.55
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
CHEMICAL TOTAL					\$ 3,471.15

Water Transport					
5501C	WATER TRANSPORT (CEMENT)	4	PER HOUR	\$112.00	\$ 448.00
5501C	WATER TRANSPORT (CEMENT)	2	PER HOUR	\$112.00	\$ 224.00
0			0	\$0.00	\$ -
TRANSPORT TOTAL					\$ 672.00

Cement Floating Equipment (TAXABLE)					
Cement Basket					
0			0	\$0.00	\$ -
Centralizer					
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
Float Shoe					
0			0	\$0.00	\$ -
Float Collars					
0			0	\$0.00	\$ -
Guide Shoes					
0			0	\$0.00	\$ -
Baffle and Flapper Plates					
0			0	\$0.00	\$ -
Packer Shoes					
0			0	\$0.00	\$ -
DV Tools					
0			0	\$0.00	\$ -
Ball Valves, Swedges, Clamps, Misc.					
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
Plugs and Ball Sealers					
4404	4 1/2" RUBBER PLUG	1	PER UNIT	\$45.00	\$ 45.00
Downhole Tools					
0			0	\$0.00	\$ -
CEMENT FLOATING EQUIPMENT TOTAL					\$ 45.00

TRUCK#	DRIVER NAME				
577	Kirk Sanders				
398	Bryan Scullaw		8.30%	SUB TOTAL	\$ 6,097.91
551	Jonathan Fulwood			SALES TAX	\$ 291.84
403 T17	Reb Darnall		10%	TOTAL	\$ 6,389.75
	FARL'S			(-DISCOUNT)	\$ 638.98
DISCOUNTED TOTAL					\$ 5,750.78

AUTHORIZATION _____

TITLE _____

DATE _____

FOREMAN _____

