

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1099872

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 # 3459	2		API No. 15 - 15-091-23922-00-00				
Name: Kansas Resource I		elopment, LLC	Spot Description:				
Address 1: 9393 W 110TH ST	, STE 500		NE_SW_SW_NE_Sec19 Twp. 14 S. R. 22 ✓ East West				
Address 2: City: OVERLAND PARK S	tate: KS _ Zip:	66210 +	3297 Feet from North / South Line of Section 1993 Feet from ✓ East / West Line of Section				
Contact Person: Bradley Kram Phone: ( 913 ) 669-2253 CONTRACTOR: License # 850			Footages Calculated from Nearest Outside Section Corner:  NE NW SE SW  County: Johnson				
Name: Evans Energy Develo			•				
Wellsite Geologist: N/A			Lease Name: Guetterman Well #: KR-28 Field Name:				
Purchaser: Coffeyville Resource	es		Producing Formation: N/A				
Designate Type of Completion:			Elevation: Ground: 1010 Kelly Bushing: 0000				
✓ New Well Re	-Entry	Workover	Total Depth: 846 Plug Back Total Depth: 846				
✓ Oil WSW  Gas D&A  OG  CM (Coal Bed Methane)  Cathodic Other (Core	SWD  ENHR  GSW  Expl., etc.):	SIGW Temp. Abd.	Amount of Surface Pipe Set and Cemented at:  Multiple Stage Cementing Collar Used?  If yes, show depth set:  If Alternate II completion, cement circulated from:				
If Workover/Re-entry: Old Well Inf	o as follows:		feet depth to: sx cmt.				
Operator:							
Well Name:Original Comp. Date:   Deepening	Original Total	Depth:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)  Chloride content: 000000 ppm Fluid volume: 0000 bbls  Dewatering method used: Evaporated				
Plug Back: Commingled Dual Completion	Plug Ba	ack Total Depth	Location of fluid disposal if hauled offsite:  Operator Name:				
Dual Completion			Lease Name: License #:				
:   ENHR	Permit #:		Quarter Sec. Twp. S. R. East, West				
GSW	Permit #:		County: Permit #:				
10/25/2012 10/26/2		10/26/2012	**************************************				
Spud Date or Date Rea Recompletion Date		ompletion Date or ecompletion Date					

## **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 I II Approved by: Deanna Garrisor Date: 11/08	/2012

Side Two



1099872

,	sas Resource Explora	ation & Development, I	LLC Lease Name County: <b>Jo</b> l		<u> </u>	Well #: KR	-28
INSTRUCTIONS: Shot time tool open and clor recovery, and flow rate line Logs surveyed. Af	ow important tops an sed, flowing and shu is if gas to surface te	d base of formations p t-in pressures, whethe st, along with final cha	enetrated. Detail a r shut-in pressure r	Il cores. Report a	el, hydrostatic pres	ssures, bottom h	ole temperature, fluid
Drill Stem Tests Taken (Attach Additional S	heets)	Yes Z No		Log Format	ion (Top), Depth a	nd Datum	Sample
Samples Sent to Geolo	ogical Survey	Yes V No		ime	Тор		
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)		Yes ✓ No Yes ✓ No Yes ✓ No	. <b>N/A</b>				
List All E. Logs Run:							
Purpose of String	Size Hole Drilled		G RECORD  it-conductor, surface, i  Weight Lbs. / Ft.		ction, etc.  Type of  Cement	# Sacks	Type and Percent
Surface	9.875	7	19	24	Portland	Used 6	Additives
		ADDITIONA	AL CEMENTING / SO	DUEEZE RECOR			
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used			Percent Additives	
Protect Casing Plug Back TD Plug Off Zone	-						
Shots Per Foot	PERFORATIO Specify Fo	IN RECORD - Bridge Plu potage of Each Interval Pe	ugs Set/Type erforated	Acid, Fr	acture, Shot, Cemen Amount and Kind of Ma	t Squeeze Record aterial Used)	Depth
		·····	··· ··· ··· ··· ··· ··· ··· ··· ··· ··				
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes [√  No		:
Date of First, Resumed Pi	roduction, SWD or ENH	R. Producing Me	f 21	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours	Oil BI	bis. Gas	Mcf Wa			Gas-Oil Ratio	Gravity
DISPOSITION	OF GAS;		METHOD OF COMPL	ETION:		PRODUCTION INTERVAL:	
Vented     Sold     Sold	Used on Lease		(Submit		mmingled omit ACO-4)		
		Other (Specify) F	-iuggea				



Tourist Harris

ticket NUMBER 35088

LOCATION OFF AWG

FOREMAN Alan Maden

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

## FIELD TICKET & TREATMENT REPORT

320-431-9210 C	or 800-467-8676	•		CEIVIEN					
DATE	CUSTOMER#	WELL	NAME & NUI	/BER		CTION	TOWNSHIP	RANGE	COUNTY
10-26-12 CUSTOMER	4448	Guetter	men	KR-28	NE	14	19	L 22	<u> </u>
Kanaga	Resource	S EXD	i ,		TF	UGK#	DRIVER	TRUCK#	OR:VER
Kansas Mailing addre	SS				5	16	Ala Mad	Safety	Meet
9393	W1107	14		_	36	8	ANMed	ARN	<u> </u>
CITY		STATE	ZIP CODE		67	5	Kei Det	$\kappa \rho$	
Overlar	ed Park	XS	66210		53		Ble Man	BM	:
JOB TYPE OF		HOLE SIZE	<i>35/8</i>	HOLE DEPT	H <u>8</u> :	¥2	CASING SIZE & V	/EIGHT	
CASING DEPTH		DRILL PIPE	A.	TUBING				OTHER	
SLURRY WEIGH	ıT	SLURRY VOL					CEMENT LEFT In		
DISPLACEMENT	T	DISPLACEMENT		MIX PSI_2			RATE 4 67	The state of the s	
REMARKS: H	ld meet	line Fs	Leblish	red Cat	e /	Pixel	It pump	al 100 3	
to cono	11 thon hi	le Pl	ucalne	orders	140	9/10	to fill	hote	botton
70 70%	2 1	that 1		stages		Elle	d well	to 50	erface.
30 707			•						
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ELONG	Eners	V. Mitc	hell		Mari 141 designar des services			Moder	:
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······································		(2) ************************************			<del></del>		17/200		
ACCOUNT CODE	QUANITY	or UNITS		DESCRIPTION	of SERV	ICES or PJ	RODUCT	UNIT PRICE	TOTAL
5405N			PUMP CHAR	RGE			369		1030.00
5406		30	MILEAGE				368		120.00
5407	M.	โห	ton	M: 10	5		558		350.00
35026	2		80	V4C			675		180,0
7)444		***************************************	X	Andrew Aller on the second					
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	111			·				SALES TAX	68.45
Ravin 3737		71111						ESTIMATED	19/1000 6
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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