

**CONFIDENTIAL**

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED ORIGINAL  
NOV 18 2010  
Form ACO-1  
June 2009  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

11/18/12

OPERATOR: License # 31302  
Name: Jones & Buck Development  
Address 1: P.O. Box 68  
Address 2:  
City: Sedan State: KS Zip: 67361 +  
Contact Person: P. J. Buck  
Phone: (620) 725-3636  
CONTRACTOR: License # 5831  
Name: MOKAT Drilling  
Wellsite Geologist: None  
Purchaser: Coffeyville Resources

**KCC**  
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API No. 15 - 019-27011-00-00  
Spot Description:  
SE SW SE NE Sec. 27 Twp. 34 S. R. 10  East  West  
2,805 Feet from  North /  South Line of Section  
705 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Chautauqua  
Lease Name: Dean Well #: JBD#2  
Field Name: Elgin Oil & Gas  
Producing Formation: Wayside  
Elevation: Ground: 1015 Kelly Bushing:  
Total Depth: 1715 Plug Back Total Depth: 1528  
Amount of Surface Pipe Set and Cemented at: 40 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: Feet  
If Alternate II completion, cement circulated from: 1528  
feet depth to: surface w/ 160 sx cmt.

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 #:  
9-23-10 9-27-10 10-8-10  
Spud Date or Date Reached TD Completion Date or Recompletion Date

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content: ppm Fluid volume: bbls  
Dewatering method used:  
Location of fluid disposal if hauled offsite:  
Operator Name:  
Lease Name: License #:  
Quarter Sec. Twp. S. R.  East  West  
County: Permit #:

**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

**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.  
Signature: [Signature]  
Title: Bookkeeper Date: 11-17-10

**KCC Office Use ONLY**  
 Letter of Confidentiality Received Date: 11/18/10 - 11/18/12  
 Confidential Release Date:  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: [Signature] Date: 12-3-10

Operator Name: Jones & Buck Development Lease Name: Dean Well #: JBD#2  
 Sec. 27 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 type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run: <b>Gamma Ray/Neutron/Cement Bond</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Layton Sandstone</td> <td>1070</td> <td></td> </tr> <tr> <td>Lenapah Limestone</td> <td>1431</td> <td></td> </tr> <tr> <td>Wayside Sandstone</td> <td>1448</td> <td></td> </tr> <tr> <td>Altamont Limestone</td> <td>1497</td> <td></td> </tr> <tr> <td>True Prue Sandstone</td> <td>1660</td> <td></td> </tr> </table>	Name	Top	Datum	Layton Sandstone	1070		Lenapah Limestone	1431		Wayside Sandstone	1448		Altamont Limestone	1497		True Prue Sandstone	1660	
Name	Top	Datum																	
Layton Sandstone	1070																		
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Altamont Limestone	1497																		
True Prue Sandstone	1660																		

CASING RECORD <input 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	11"	8 5/8"		40'	Portland "A"	8	None
Production	6 3/4"	4 1/2"		1530'	Thick Set	160	See Cementing Ticket

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 (Amount and Kind of Material Used)	Depth
2	1072-1076	300 gal. 15% HCL Acid, 800# 20/40 frac sand	1072-1076

TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>1465'</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>10-8-10</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbbs. <u>3</u>	Gas Mcf <u>trace</u>	Water Bbbs. <u>30</u> Gas-Oil Ratio _____ Gravity <u>40</u>

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ACKARMAN HARDWARE and LUMBER CO  
 160 EAST MAIN STREET  
 SEDAN, KS 67361

PAGE NO 1

PHONE: (620) 725-3103

THANKS FOR YOUR BUSINESS!!!

Cust No 253636	Job No	Purchase Order	Reference DEAN #2	Terms NET 10TH	Clerk SC	Date 9/23/10	Time 8:09
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Sold To:  
 JONES & BUCK DEVELOPMENT  
 P. O. BOX 68  
 SEDAN KS 67361

Ship To:

DOC# 191884  
 \*\*DUPLICATE\*\*  
 \* INVOICE \*  
 \*\*\*\*\*

TAX : 001 KANSAS SALES TAX

LN#	SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SUGG	UNITS	PRICE/PER	EXTENSION
1	8		EA	RM44816	PORTLAND CEMENT 92.6#		8	10.95 /EA	87.60 *

KCC  
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RECEIVED  
 NOV 18 2010  
 KCC WICHITA

\*\* AMOUNT CHARGED TO STORE ACCOUNT \*\*      96.18 TAXABLE      87.60  
 NON-TAXABLE      0.00  
 (JOHN CORNSTUBBLE )      SUBTOTAL      87.60  
 TAX AMOUNT      8.58  
 TOTAL AMOUNT      96.18

X \_\_\_\_\_  
 Received By



**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 236918

Invoice Date: 09/29/2010 Terms: 10/10,n/30 Page 1

J. B. D. & P. J. BUCK  
P.O. BOX 68  
SEDAN KS 67361  
(620)725-3636

DEAN #2  
27937  
09/28/10  
27-34S-10E

KCC  
NOV 18 2010  
CONFIDENTIAL

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	160.00	17.0000	2720.00
1110A	KOL SEAL (50# BAG)	800.00	.4200	336.00
1107A	PHENOSEAL (M) 40# BAG)	80.00	1.1500	92.00
1118B	PREMIUM GEL / BENTONITE	150.00	.2000	30.00
1123	CITY WATER	4200.00	.0149	62.58
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00

Description	Hours	Unit Price	Total
419 CEMENT PUMP	1.00	925.00	925.00
419 EQUIPMENT MILEAGE (ONE WAY)	54.00	3.65	197.10
419 CASING FOOTAGE	1530.00	.20	306.00
T-97 WATER TRANSPORT (CEMENT)	4.00	112.00	448.00
518 MIN. BULK DELIVERY	1.00	350.00	350.00

RECEIVED  
NOV 18 2010  
KCC WICHITA

Amount Due 5205.95 if paid before 10/09/2010

Parts:	3285.58	Freight:	.00	Tax:	272.71	AR	5784.39
Labor:	.00	Misc:	.00	Total:	5784.39		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

# 236918

TICKET NUMBER 27937  
LOCATION DONNIE TATE  
FOREMAN BARTLESVILLE, OK

PO Box 884, Chanute, KS 66720  
820-431-9210 or 800-467-8676

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/28/10	4291	DEAN #2	27	34S	10E	Muskogee
CUSTOMER JBD		KCC		TRUCK #		DRIVER
MAILING ADDRESS		NOV 18 2010		TRUCK #		DRIVER
CITY		CONFIDENTIAL		419		JAMES N
STATE				518		CLIFF
ZIP CODE				412 797		MARK C

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 4 1/2  
CASING DEPTH 1530' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT 13.8 SLURRY VOL 1.75 WATER gal/sk 8.5 CEMENT LEFT in CASING \_\_\_\_\_  
DISPLACEMENT 24.3 DISPLACEMENT PSI 1000\* MIX PSI 200\* RATE 4 1/2

REMARKS: RUN GEL/LCM TO EST CURS - RUN 160sx thick set w/ST  
KOL & .25 Pheno - wash out pump and lines and release  
PLUG - Disp 24.3 to SET SHOE

Cont to Surf

*Handwritten signature*

Supply Meter  
CDS  
MC

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925. <sup>00</sup>
5406	54	MILEAGE		197. <sup>00</sup>
5402	1530	FOOTAGE		306. <sup>00</sup>
5407	1	BULK TRUCK		350. <sup>00</sup>
5501C	4	TRANSPORT		448. <sup>00</sup>
1126A	160sx/15.040*	THICK SET		2720. <sup>00</sup>
1110A	800*	KOL SEAL		336. <sup>00</sup>
1107A	2sx/80*	PHENO		92. <sup>00</sup>
1118B	3sx/150*	GEL		30. <sup>00</sup>
1123	4200	CITY WATER	RECEIVED	62. <sup>58</sup>
4404	1	4 1/2 RUBBER PLUG	NOV 18 2010	45. <sup>00</sup>
			KCC WICHITA	
		10% DED	5784. <sup>39</sup>	
		AND WITHIN 30 DAYS	578. <sup>73</sup>	
			\$5205. <sup>90</sup>	
		6.3	SALES TAX	272. <sup>11</sup>
			ESTIMATED TOTAL	5784. <sup>39</sup>

Rev'n 3737

AUTHORIZATION

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 form.