

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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

4/20/13

OPERATOR: License # 5135
Name: John O. Farmer, Inc.
Address 1: P.O. Box 352
Address 2: _____
City: Russell State: KS Zip: 67665 + 0 3 5 2
Contact Person: Marge Schulte
Phone: (785) 483-3145, Ext. 214
CONTRACTOR: License # 33575
Name: WW Drilling, LLC
Wellsite Geologist: Steven P. Murphy
Purchaser: Coffeyville Resources, LLC

KCC
APR 20 2011
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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: John O. Farmer, Inc.
Well Name: Johnson #1
Original Comp. Date: 8-31-09 Original Total Depth: 3690'
 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 #: _____

2-14-11 2-18-11
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-065-23,565-00-01
Spot Description:
NE_SW_SE_SE Sec. 20 Twp. 7 S. R. 21 East West
550 Feet from North / South Line of Section
940 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Graham
Lease Name: Johnson Well #: 1
Field Name: Holsman Northeast
Producing Formation: Lansing "D", "I", "J", "K" & Arbuckle
Elevation: Ground: 2097' Kelly Bushing: 2102'
Total Depth: 3690' Plug Back Total Depth: 3657'
Amount of Surface Pipe Set and Cemented at: 219 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 3688
feet depth to: surface w/ 370 sx cmt.

RECEIVED

APR 21 2011

KCC WICHITA

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 17,000 ppm Fluid volume: 900 bbls
Dewatering method used: evaporation
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: John O. Farmer
Title: John O. Farmer IV, Vice-President Date: 4-20-11

KCC Office Use ONLY

Letter of Confidentiality Received
Date: 4/20/11 - 4/20/13
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: MS Date: 4-27-11

Operator Name: John O. Farmer, Inc. Lease Name: Johnson Well #: 1
 Sec. 20 Twp. 7 S. R. 21 East West County: Graham

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 checked="" type="checkbox"/> Yes <input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual Compensated Porosity Log, Dual Induction Log, Microresistivity Log (DST'S, E-LOGS, GEOLOGICAL REPORT SUBMITTED ON 11-2-09 AFTER ORIGINAL COMPLETION)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1698'</td> <td>(+404)</td> </tr> <tr> <td>Topeka</td> <td>3089'</td> <td>(-987)</td> </tr> <tr> <td>Heebner</td> <td>3294'</td> <td>(-1192)</td> </tr> <tr> <td>Toronto</td> <td>3314'</td> <td>(-1212)</td> </tr> <tr> <td>Lansing</td> <td>3326'</td> <td>(-1224)</td> </tr> <tr> <td>Base/KC</td> <td>3521'</td> <td>(-1419)</td> </tr> <tr> <td>Arbuckle</td> <td>3605'</td> <td>(-1503)</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Anhydrite	1698'	(+404)	Topeka	3089'	(-987)	Heebner	3294'	(-1192)	Toronto	3314'	(-1212)	Lansing	3326'	(-1224)	Base/KC	3521'	(-1419)	Arbuckle	3605'	(-1503)
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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	12-1/4"	8-5/8"	23#	219'	Common	150	3% C.C., 2% gel
Production	7-7/8"	5-1/2"	14#	3688'	SMD	370	
D.V. Tool							

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
4 SPF	3476-80' (Lansing "I") 3488-90' (Lansing "J") 3507-10' (Lansing "K")	1000 gals. 15% NE (Lansing zones treated together)	
4 SPF	3610-14' & 3617-20' (Arbuckle)	500 gals. 15% NE (Arbuckle zones treated together)	
4 SPF	3380-86' (Lansing "D") (ZONE PERFORATED 2-15-11)	500 gals. 15% NE	

TUBING RECORD: Size: <u>2-7/8"</u> Set At: <u>3652'</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>2-20-11</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 Bbls. <u>23.62</u>	Gas Mcf _____ Water Bbls. <u>0.98</u> Gas-Oil Ratio _____ Gravity <u>35.0°</u>

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 checked="" type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3380-3510' (Lansing) OA</u> <u>3610-3620' (Arbuckle) OA</u>
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