



KANSAS CORPORATION COMMISSION 1050468
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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

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 #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

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 #: _____

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: _____ Date: _____



1050468

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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

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: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 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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Air Drilling Specialist
Oil & Gas Wells

THORNTON AIR ROTARY, LLC
Office Phone: 620-879-2073

PO Box 449
Caney, KS 67333

Date Started	9/21/2010
Date Completed	9/22/2010

Well No.	Operator	Lease	A.P.I #	County	State
9C-28	Layne Energy Operating	Hummer	15-205-27862-00-00	Wilson	Kansas

1/4	1/4	1/4	Sec.	Twp.	Rge.
			28	30	14E

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
Sean	Oil	8	42 8 5/8	1211	6 3/4

Formation Record

0-2	DIRT	702-718	LIME	1036	GAS TEST - SAME
2-15	CLAY	718-741	SANDY SHALE	1040-1042	LIME
15-35	SHALE	741-752	LIME	1042-1045	SHALE
35-109	LIME	752-765	SAND	1045-1046	COAL
109-172	SHALE	765-787	SHALE	1046-1058	SAND
172-175	LIME	787-793	SAND	1058-1063	SANDY SHALE
175-190	SHALE	793-796	SHALE	1063-1081	SHALE
190-205	LMY SHALE	796-804	SAND	1081-1082	COAL
205-212	SHALE	804-815	SHALE	1082-1090	SANDY SHALE
212-228	LIME	815-848	SANDY SHALE	1086	GAS TEST - SAME
228-308	SHALE	848-855	SHALE	1090-1106	SHALE
308-313	LIME	855-858	LIME	1106-1110	SAND /GOOD ODOR
313-322	SANDY SHALE	858-859	COAL (MULBERRY)	1110-1115	SANDY SHALE
322-381	SAND	859-889	LIME (PAWNEE)	1115-1117	LIME
385	WENT TO WATER	861	GAS TEST-SLIGHT BLOW	1117-1133	SAND/1122-1133 GOOD ODOR
381-382	COAL	889-891	SHALE	1133-1160	SANDY SHALE
382-400	SHALE	891-896	LIME	1160-1211	SHALE
400-403	LIME	896-901	BLK SHALE (LEXINGTON)	1211	TD
403-436	SHALE	901-938	SANDY SHALE		
410	GAS TEST - NO GAS	911	GAS TEST - SAME		
436-540	LIME	938-959	LIME (OSWEGO)		
540-546	BLACK SHALE	959-966	BLK SHALE (SUMMIT)		
546-567	LIME	966-975	LIME		
567-580	SAND	975-980	BLK SHALE (EXCELLO)		
580-606	LIME	980-983	LIME		
606-611	SHALE	983-990	SANDY SHALE		
611-650	LIME	986	GAS TEST - SAME		
650-683	SHALE	990-1025	SHALE		
683-686	LIME	1025-1026	COAL		
686-702	SANDY SHALE	1026-1040	SHALE		

Well Report

HUMMER 9C-28

API Number:

AFE Number: G01013600400

Project Area:

SYCAMORE

AFE Amount: \$0.00

KS Wilson

30S - 14E - 28

2465FSL - 860FEL

Activity Date

Activity Description

9/21/2010

MIRU THORNTON DRILLED 11" HOLE 42' DEEP, RIH W/2 JOINTS 8-5/8" SURFACE CASING MIXED 8 SX TYPE 1 CEMENT, DUMPED DOWN THE BACKSIDE. SDFN



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 29058

LOCATION EUREKA KS

FOREMAN Rick Ledford

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-23-10	4758	Hummer 9C-28				Wilson
CUSTOMER <u>Layne Energy</u>			Safety markings D6 JJ			
MAILING ADDRESS <u>P.O. Box 1160</u>						
CITY <u>Sycamore</u>	STATE <u>Ks</u>	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
			<u>445</u>	<u>Justin</u>		
			<u>543</u>	<u>Dave</u>		

JOB TYPE <u>logstring 0</u>	HOLE SIZE <u>6 3/4"</u>	HOLE DEPTH <u>1211'</u>	CASING SIZE & WEIGHT <u>4 1/2"</u>
CASING DEPTH <u>1200'</u>	DRILL PIPE	TUBING	OTHER
SLURRY WEIGHT <u>13.4"</u>	SLURRY VOL <u>42 BW</u>	WATER gal/sk <u>8.0</u>	CEMENT LEFT in CASING <u>0'</u>
DISPLACEMENT <u>19 BW</u>	DISPLACEMENT PSI <u>600</u>	PSI <u>1000</u>	RATE

REMARKS: Safety markings. Rig up to 4 1/2" casing. Break circulation w/ 30 Bbl fresh water. Pump 10 ses gal-flush w/ bulls. 20 Bbl caustic soda pre-flush, 10 Bbl dye water. Mixed 135 ses thickset cement w/ 8" Kol-seal 1sk, 1/2" phenoxal 1sk, 1/2" R-110 + 1/4" CAF-38 @ 13.4"/gal. Washout pump + lines shut down, release plug. Displace w/ 19 Bbl fresh water. Final pump pressure 600 PSI. Bump plug to 1000 PSI. wait 2 minutes, release pressure, float held. Grad cement returns to surface. 8 Bbl slurry to pit. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	40	MILEAGE	3.65	146.00
1126A	135 ses	thickset cement	17.00	2295.00
1110A	1080"	8" Kol-seal 1sk	.42	453.60
1107A	17"	1/2" phenoxal 1sk	1.15	19.55
1135	68"	1/2" R-110	7.50	510.00
1146	34"	1/4" CAF-38	7.70	261.80
1118B	500"	gal-flush	.20	100.00
1105	50"	bulls	.39	19.50
1103	100"	caustic soda	1.45	145.00
5407A	7.43	ten mileage bull tire	1.20	891.64
4404	1	4 1/2" top rubber plug	45.00	45.00
			Subtotal	5277.09
			SALES TAX	246.53
			ESTIMATED TOTAL	5523.62

Revin 3737

AUTHORIZATION [Signature]

TITLE Drill Farmer

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.