



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: _____



1069528

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 Bbbs.	Gas Mcf	Water Bbbs.	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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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MORNING COMPLETION REPORT

Report Called in by: JACOB

Report taken by: _____

LEASE NAME & #	AFE#	DATE	DAYS	CIBP	PBTD:
OSBURN 14-11		10/10/2011	1	DEPTH	TYPE FLUID
				TYPE	
PRESENT OPERATION: SET SURFACE PIPE					WT
					VIS
DEEPEST CASING	LINERS OD TOP & SHOE DEPT	REPAIR DOWN TIME HRS		CONTRACTOR	MOKAT
OD SHOE DEPTH				RIG NO	
84' OF 8-5/8		TEST PERFS			
PACKER OR ANCHOR	FISHING T OD ID			TEST PERFS	
				TO	
				TO	
				TO	
HRS	BRIEF DESCRIPTION OF OPERATION				
	MIRU THORNTON DRILLING, DRILLED 11" HOLE, 85' DEEP, RIH W/4 JT 8 5/8" SURFACE CASING,				
	RIGGED UP CONSOLIDATED TO 8-5/8 SURFACE CASING, BREAK CIRCULATION WITH FRESH WATER				
	MIXED 65 SKS CLASS A CEMENT WITH 3% CALC 2 % GEL & 1/4# FLO SEAL PER SK. DIDN'T GET CEMENT				
	CIRCULATED TO TOP OF HOLE. SAND AND 11' FROM SURFACE TAKING CEMENT RETURNS. JOB COMPLETE				
	RIG DOWN.				
DAILY COST ANALYSIS					

RIG	<u>2100</u>
SUPERVISION	_____
RENTALS	_____
SERVICES	<u>4946.81</u>
MISC	<u>1250</u>

DETAILS OF RENTALS, SERVICES, & MISC	
DRILLING	2100
CEMENT	2446.81
DIRTWORKS (LOC,RD, PIT)	2500
SURFACE CASING	1250
LAND/ LEGAL	
	8296.81

DAILY TOTALS 8296.81 PREVIOUS TCTD _____ 0 TCTD _____ 8296.81



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 33269
LOCATION Evexa
FOREMAN Rick Ledford

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

FIELD TICKET & TREATMENT REPORT
CEMENT

API# 15-125-32136

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/13/11	4758	Osburn 14-11	11	323	13E	MO
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Layne Energy			520	Allen B.		
MAILING ADDRESS			611	Chris A.		
P.O. Box 1160						
CITY	STATE	ZIP CODE				
Sycamore	KS	67363				

JOB TYPE L/S G HOLE SIZE 6 7/8" HOLE DEPTH 1402' CASING SIZE & WEIGHT 4 1/2" 10.5"
 CASING DEPTH 1383.76' DRILL PIPE _____ TUBING _____ OTHER Oil tool @ 110.86
 SLURRY WEIGHT 13.4# SLURRY VOL 51 Bbl total WATER gal/sk 9.0 CEMENT LEFT in CASING 17'
 DISPLACEMENT 21.7 - 17.7 gal DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting - 4 1/2" set @ 1383.76' O.V. tool set @ 110.86' Rig up to casing. Stage 1: load hole w/ 1/2 Bbl fresh water. Set basket shoe @ 900 PSI. Mixed 30 sacks thickset cement w/ 10" Kol-seal/sk @ 13.4#/gal. Washout pump + loss, release plug. Displace w/ 21.7 Bbl fresh water. Final pump pressure 400 PSI. Pump plug to 1000 PSI. release pressure, float + plug held. Pump trip bands, open stage collar @ 1200 PSI. Circulated cement to surface w/ fresh water = 6 Bbl slurry to pit. Stage 1 complete. wait 2 1/2 hrs. Stage 2: Pump 2 sacks caustic soda pre-flush, 5 Bbl water spacer, 8 Bbl dye water. Mixed 120 sacks thickset cement w/ 10" Kol-seal/sk @ 13.4#/gal. Washout pump + loss, release closing plug. Displace w/ 17.7 Bbl water. Final pump pressure 500 PSI. Pump plug to 1300 PSI. Tool closed @ 1000 PSI. release pressure, float + plug held. No flow back, Tool closed = 8 Bbl slurry to pit. Stage 2 complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	0	MILEAGE ; on location	n/c	n/c
1126A	40 sacks	thickset cement	18.30	732.00
110A	400 "	10" Kol-seal/sk	.44	176.00
1126A	120 sacks	thickset cement	18.30	2196.00
110A	1200 "	10" Kol-seal/sk	.44	528.00
1103	100 "	caustic soda pre-flush	1.52	152.00
5407A	8.8	for mileage bulk trk	1.26	443.52
4254	1	Type B basket shoe 4 1/2"	1035.00	1035.00
4276	1	Oil tool 4 1/2"	2760.00	2760.00
			Subtotal	8997.52
			SALES TAX 6.3%	477.49
			ESTIMATED TOTAL	9475.01

Ravin 3737

245109

AUTHORIZATION [Signature] TITLE Asst. Foreman 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

Air Drilling Specialist
Oil & Gas Wells

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

PO Box 449
Caney, KS 67333

Date Started	10/10/2011
Date Completed	10/13/2011

Well No.	Operator	Lease	A.P.I #	County	State
14-11	Layne Energy Operating	Osburn	15-125-32136-00-00	Montgomery	Kansas

1/4	1/4	1/4	Sec.	Twp.	Rge.
			11	32	13 E

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
Billy	Gas	Rig	86.1' 8 5/8	1402	6 3/4

Formation Record

0-6	DIRT	794-807	SHALE	1125-1127	LIME (V-LIME)
6-11	CLAY	807-817	LIME	1127-1129	SHALE
11-19	QUICK SAND / WET	817-820	BLACK SHALE	1129-1130	COAL (CROWBERG)
19-23	SHALE	820-826	LMY SHALE	1130-1159	SHALE
23-89	LIME	826-832	LIME	1136	GAS TEST - NO GAS
89-111	LMY SHALE	832-857	SHALE	1159-1160	COAL (MINERAL)
111-179	LIME	857-871	SNAD	1160-1169	SHALE
179-200	SHALE	871-877	SANDY SHALE	1161	GAS TEST - NO GAS
200-230	SAND / DAMP	877-887	SAND	1169-1170	COAL
230-387	SHALE	886	GAS TEST - NO GAS	1170-1209	SHALE
387-390	BLACK SHALE	887-943	SANDY SHALE	1209-1210	COAL
390-429	LMY SHALE	943-944	BLACK SHALE	1210-1220	SANDY SHALE
429-439	SAND	944-946	SHALE	1220-1227	SHALE
439-440	COAL	946-968	LIME (PAWNEE)	1227-1228	BLK SHALE / COAL
440-448	SHALE	968-973	BLACK SHALE	1228-1309	SHALE
448-449	COAL	973-998	SANDY SHALE	1309-1319	RED SHALE
449-465	LIME	986	GAS TEST - NO GAS	1319-1383	SHALE
465-475	SHALE	998-1029	SHALE	1383-1402	SAND
475-500	LIME	1029-1052	LIME (OSWEGO)	1389	LOTS OF GAS, 22#, 2"
500-511	SHALE	1052-1060	BLK SHALE (SUMMIT)	1402	TD
511-563	LIME	1060-1076	LIME		
563-570	SHALE	1061	GAS TEST - NO GAS		
570-586	SAND / DAMP	1076-1081	BLACK SHALE		
586-590	SANDY SHALE	1081-1082	COAL (MULKY)		
590-633	SAND	1082-1091	LIME		
633-647	SHALE	1086	GAS TEST - NO GAS		
647-688	LIME / DAMP	1091-1107	SHALE		
688-752	SHALE	1107-1108	COAL (BEVIER)		
752-763	LIME	1108-1125	SHALE		
763-794	SAND	1111	GAS TEST - NO GAS		

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

December 02, 2011

Victor H Dyal
Layne Energy Operating, LLC
PO BOX 160
SYCAMORE, KS 67363

Re: ACO1
API 15-125-32136-00-00
Osburn 14-11
SW/4 Sec.11-32S-13E
Montgomery County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Victor H Dyal