

Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1088789

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #		API No. 15
Name:		Spot Description:
Address 1:		
Address 2:		Feet from Dorth / South Line of Section
City: State:	Zip:+	Feet from East / West Line of Section
Contact Person:		Footages Calculated from Nearest Outside Section Corner:
Phone: ()		
CONTRACTOR: License #		GPS Location: Lat:, Long:
Name:		(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84
Purchaser:		County:
Designate Type of Completion:		Lease Name: Well #:
New Well Re-Entry	Workover	Field Name:
		Producing Formation:
	SWD SIOW	Elevation: Ground: Kelly Bushing:
		Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl.,	etc.):	Multiple Stage Cementing Collar Used? Yes No
If Workover/Re-entry: Old Well Info as for	,	If yes, show depth set: Feet
Operator:		If Alternate II completion, cement circulated from:
Well Name:		feet depth to:w/sx cmt.
Original Comp. Date: C	Driginal Total Depth:	
	Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back	Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	-14 //.	Chloride content: ppm Fluid volume: bbls
	nit #:	Dewatering method used:
	nit #:	Location of fluid disposal if hauled offsite:
	nit #:	
	nit #:	Operator Name:
		Lease Name: License #:
Spud Date or Date Reached T	D Completion Date or	Quarter Sec TwpS. R East West
Recompletion Date	Recompletion Date	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
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

	Page Two	1088789
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East West	County:	
INCTRUCTIONS. Chain important tang of formations panetrated. De	tail all aaraa Bapart all final	agniag of drill atoms tools giving interval toolad, time tool

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken (Attach Additional She	eets)	Yes No		-	on (Top), Depth a		Sample
Samples Sent to Geolog	gical Survey	Yes No	Name	9		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
			RECORD Ne		ion, 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 / SQU	EEZE RECORD			
Purpose:	Depth					-	

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing				
Plug Back TD				
Plug Off Zone				

No

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

No	(If No, skip questions 2 and 3)
No	(If No, skip question 3)

(If No, fill out Page Three of the ACO-1)

Shots Per Foot				D - Bridge Plugs Set/Ty Each Interval Perforated	rpe		Acid, Fracture, Shot, Ce (Amount and Kind	ement Squeeze Record of Material Used)	Depth
TUBING RECORD:	Siz	e: S	Set At:	Pack	er At:	Liner F		No	
Date of First, Resumed	Producti	on, SWD or ENHR.		Producing Method:	nping	Gas Lift	Other <i>(Explain)</i>		
Estimated Production Per 24 Hours		Oil Bbls.		Gas Mcf	Wat	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF G	iAS:	!	METHOD	OF COMPL	ETION:		PRODUCTION INTI	ERVAL:
Vented Solo (If vented, Sul		Jsed on Lease -18.)		Dpen Hole Perf.	Duall (Submit	,	Commingled (Submit ACO-4)		

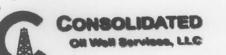
5/8/12 4758 Jacdan # 2-1 CUSTOMER	SECTION	PI*15-049-	RANGE	T
CUSTOMER .	1			COUNTY
CUSTOMER .	/	29	96	EL
MAILING ADDRESS	5	CEMENT LEFT in	OTHER	

"Thank You"

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	25	MILEAGE	4.00	100.00
11045	55 345	class A cemet	14.95	822.25
1102	155*	3% Call2	.74	114.70
11188	105#	270 gel	.21	22.05
5407	2.51	ton milege but tok	m/c	350.00
		arg633, 7.3%	SALES TAX	2234.00 70.00
	South Mide	TITLE Prilling for mon	ESTIMATED TOTAL DATE	2304.00

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.

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TICKET NUMBER 34672 LOCATION ELVERS

DATE	or 800-467-8676	WEL	L NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
				1	295	9E	EIK	
STOMER				Layne	TRUCK #	DRIVER	TRUCK #	DRIVER
ILING ADDR	RESS ENER	22		Eversy	520	John		
					479	Merle		
ry r	? O. Box 160	STATE	ZIP CODE	1	515	Catin		
	ramore	KS	67363					
B TYPE L		HOLE SIZE	Name of Street, or other Designation of Street, St	HOLE DEPTH	2585'	CASING SIZE & V	VEIGHT 51/2	15.5
				TURING			OTHER	
SING DEPT			4. A. 1 33 AL	WATER gal/s	k 9.	CEMENT LEFT in	CASING 0	
	GHT/3.7#_/2.6#					RATE		
SPLACEME	NT 61.3 - 39 44	DISPLACEME	NT PSI	_ MIA FOI	1 -1-1		and Indian	. I frah
MARKS: 4	Safety mectin	28- D.V. 7	ol set @ 10	49 G.L. L	19 - 6 512	Casing. BRak	CIRCIAL	1 CH
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103 -/1	<u>el 55/ man</u>	Water. The	pup pressure	un Cal	La Raylal	in cenent to pi	t. Cuculate	for 21/2 1
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ACCOUNT	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CODE	1	PUMP CHARGE Stage "1	1030.00	1030.00
5401	1	MILEAGE	4.00	100.00
5404	25		1030.00	1030.00
5401	1	Stage *2		
	120 446	thickset cement	19.20	2494.00
11267	130 545		.46	299.00
IlloA	650#	Stage # 1	1.29	167.70
IIOTA	130 #		10.55	168.80
113579	<u>الم</u>	Y870 CFL-115	12.55	3451.25
1131	275 545	60/40 Poznie cener	.21	399.00
11186	1900*	870 gel Stage #2	1.29	354.75
HOTA	275#	1th phenoseal Isk	1.61	161.00
1103	100#	Caustic soda pre-flush	1.34	635.50
SYOTA	18.97	ton mileage built true	344.00	344.00
4159	1	51/2" AFU floet shec		458.00
4104	2	Sh" cenat basicts	229.00	3220.00
4277	1	Ste" DU tool Stage coller u/ plugs	3220.00	3240.04
			Subtate!	14315.00
		250022 , 7.39,	SALES TAX	840.92
avin 3737	11	alle Alle	ESTIMATED TOTAL	15155.9
AUTHORIZTION	Jord Ma	TITLE Mriling former	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.



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

Mark Sievers, Chairman Thomas E. Wright, Commissioner Sam Brownback, Governor

July 26, 2012

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

Re: ACO1 API 15-049-22566-00-00 Jordan 2-1 NE/4 Sec.01-29S-09E Elk 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 PIKE WORD LOGGING SERVICE



COMPANY: WELL: LOCATION:	LAYNE ENERGY JORDAN #2-1 350TNL 1670TEL SW-NE-NW-NE SEC.1TWP-295,RNG-9E		DATES LOGGED : 5.9/12 to 5-14-12 DEPTHS LOGGED : 1052' to 2428 GL : 1188	2 GEOLOGIST: JASON BURRIS
API NO. :	ELK Co., KANSAS 15-049-22566	~	KB: 1197 UNIT No: PW#2 LOGGERS: DIKE WORD & TO	DM ROMANS Gas Units
	Drill Rate Min.Ft Por Lithology Flu	cut		Gas Units
	2 3 4 5			25 50 75 100 150 200 250
	50	f	RIGGED UP AND BECORDING AIR DRILLING 77/8"HOLE	
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5			SHIBLACK, HU, CARD LS:MOST EVEN, VY, MOST HD/ DNS, SCAT DUL/DH GREEN PLO: FAIR FAST MOD STRM CUTCR MED/DK GY SH INC AMED/DK GY SH	25 50 75 100 150 200 250
CL.	HOTE SCALE CHANGE	ļ	TR BEACH HEDVER GY SH LS:MOSTLY O-WH Y LT TN SM WH TR BRN MOSTLY EVEN FLO	
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È	50 _c	ļ	LARGE DECREASE IN LM W/ INCREASE MULTI COLORED SHALES TR OFP WH WH LS MOSTLY MOD/HD DNS SM W/ FAIR AMMY PF PORO NO LAST BLACK SH IN OUR SHELD WAS IN LOO DERL	
ſ		ļ	PLOST BLACK SH IN OUR SHELS WAS IN 1650 SMEL EQUAL TO 1636 ON PUQUA EARROX 39 LOW! MOSTLY RED BED SHALES	
5/11/12			SH BECOMING LT GY MICA TRIP TO MUD UP @1682' PICK UP PDC 1100 LAY DOWN AIR HAMMER	INSTR CHECK FROM PITS

