

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division 1218495

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:			Sec.	TwpS. R	East West
Address 2:			F	eet from North /	South Line of Section
City: S	tate: Zi _l	D:+	F	eet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section	Corner:
Phone: ()			□ NE □ NV	W □SE □SW	
CONTRACTOR: License #			GPS Location: Lat:	. Lona:	
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84	
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	V	Vell #:
	-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW	SWD	SIOW	Elevation: Ground:	Kelly Bushinç	g:
☐ Gas ☐ D&A	☐ ENHR	SIGW	Total Vertical Depth:	Plug Back Total	Depth:
OG OM (Cool Book Mathema)	☐ GSW	Temp. Abd.	Amount of Surface Pipe So	_	
☐ CM (Coal Bed Methane)☐ Cathodic ☐ Other (Contact of the Contact of the Conta	o Evol oto):		Multiple Stage Cementing		
			If yes, show depth set:		
If Workover/Re-entry: Old Well In			If Alternate II completion, of		
Operator:			feet depth to:		
Well Name:			leet depth to	w/	SX CIIII.
Original Comp. Date:	_				
Deepening Re-perf.	_	NHR Conv. to SWD	Drilling Fluid Manageme (Data must be collected from the		
☐ Plug Back	Conv. to GS	SW Conv. to Producer	(Data must be collected from t	llie rieselve rilj	
Commingled	Permit #:		Chloride content:	ppm Fluid volum	e: bbls
Dual Completion			Dewatering method used:		
SWD	Permit #:		Location of fluid disposal if	f hauled offsite:	
☐ ENHR	Permit #:		On a rate v Name a		
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date Rea	ached TD	Completion Date or	QuarterSec	TwpS. R	
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



Operator Name:			Lease Name: _			Well #:		
Sec Twp	S. R	East West	County:					
open and closed, flow and flow rates if gas t	ving and shut-in presson surface test, along w	formations penetrated. I ures, whether shut-in pro vith final chart(s). Attach	essure reached stati n extra sheet if more	c level, hydrosta space is neede	itic pressures, bott d.	tom hole tempe	erature, fluid r	recovery,
		otain Geophysical Data a or newer AND an image		egs must be ema	ailed to kcc-well-lo	gs@kcc.ks.gov	v. Digital elec	tronic log
Drill Stem Tests Taken (Attach Additional	•	Yes No		_	on (Top), Depth ar		Samp	
Samples Sent to Geo	ological Survey	☐ Yes ☐ No	Nam	e		Тор	Datur	m
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No						
List All E. Logs Run:								
		CASING	RECORD Ne	ew Used				
		Report all strings set-	conductor, surface, inte	ermediate, product	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 P Additiv	
		ADDITIONAL	OFMENTING / OOL					
Purpose:	Depth		CEMENTING / SQL	JEEZE RECORD		araant Additiraa		
Perforate	Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives				
Protect Casing Plug Back TD								
Plug Off Zone								
Did you perform a hydra	ulic fracturing treatment o	on this well?		Yes	No (If No, ski	p questions 2 ar	nd 3)	
	=	raulic fracturing treatment ex	xceed 350,000 gallons		= ' '	p question 3)	,	
Was the hydraulic fractu	ring treatment information	n submitted to the chemical	disclosure registry?	Yes	No (If No, fill	out Page Three	of the ACO-1)	
Shots Per Foot		ON RECORD - Bridge Plug Footage of Each Interval Per			cture, Shot, Cement			Depth
	Сроспу Г	octago of Laon morvari of	ioratou	(>1	mount and rand or ma	teriar Good)		<u> Борин</u>
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or EN							
Fotimeted Day 1 2	0" -	Flowing			Other (Explain)) O" D "		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf Wate	er B	bls. G	Gas-Oil Ratio	Gr 	ravity
DISPOSITI	ON OF GAS:	1	METHOD OF COMPLE	ETION:		PRODUCTIO	ON INTERVAL:	
Vented Sold		Open Hole	Perf. Dually	Comp. Con	mmingled			
	bmit ACO-18.)	Other (Specify)	(Submit)	ACO-5) (Sub	omit ACO-4)		-	

Form	ACO1 - Well Completion
Operator	Laymon Oil II, LLC
Well Name	Fulhage 34-14
Doc ID	1218495

Tops

Name	Тор	Datum
Soil	0	9
Shale	9	100
Lime	100	140
Shale	140	160
Lime	160	300
Shale	300	320
Lime	320	360
Shale	360	400
Lime	400	460
Shale	460	490
Lime	490	600
Big Shale	600	680
Lime	680	720
Shale	720	742
Lime	742	760
Shale	760	820
Shale & Lime	820	900
5" Lime	900	903
Black Shale	903	905
Upper Squirrel Sand	905	915
Shale	915	946
Cap Rock	946	947
Shale	947	948
Cap Rock	948	949

Form	ACO1 - Well Completion
Operator	Laymon Oil II, LLC
Well Name	Fulhage 34-14
Doc ID	1218495

Tops

Name	Тор	Datum
Lowe Squirrel Sand	949	975
Shale	975	1155

TAX AMOUNT

TOTAL AMOUNT

158.76

2048.76

THE NEW KLEIN LUMBER COMPANY

1115	1 Heavy I thinks Lil	COUNTY COULDING
	201 W.	MADISON
	P.O. E	OX 805
	IOLA, KS	66749
	PHONE: (620)) 365-2201

USTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCE	TERI	WS	CLERK	DATE	TIME
*5				CASH/CHECK/BANKCA	RD SE	5/:	15/14 1:	21
S **** (CASH ***		S HLAYMON OIL P T	DEL. DATE:	5/15/14 TE 001 IOLAL IO	*	DOC# 2946 ******** * *************************	**
SHIPPED	ORDERI 200	ED UM SKU	DESCRIPTION PORTLAND CEMENT	LOCATION	UNITS	PRICE/PER		ENSION
TP PP & COX CORD	Seel Steel	39-1 40-1 38-1 20 kebro 2 19-14 kebrand	+10 packs 410 packs 410 packs	Free	hage à	9.45 /EA 34-14-1	1,890.00	٧.
	110	** ORDER ** ORI	DER ** ORDER ** ORDER ** ORDER	** ORDER *		XABLE	1890.00	
			** DEPOSIT AMOUNT ** ** BALANCE DUE **		0.00 NO 2,048.76 SU	IN-TAXABLE IRTOTOL	0.00 1890.00	
7/					mg manager was	NY - 01 E I I I I I	on saf of lot it law let	

** PAYMENT RECEIVED **

RECEIVED BY

802 N. Industrial Rd. P.O. Box 664 Iola, Kansas 66749 Phone: (620) 365-5588 NOTICE TO OWNER

Payless Concrete Products, Inc.

CONDITIONS

Concrete to be delivered to the nearest accessible point over passable road, under truck's own power. Due to delivery at owner's or intermediary's direction, seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allotted time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for strength test when water is added at customer's request.

Contractor must provide place for truck to wash out. A \$30 charge will be added per truck if contractor does not supply a place to wash ruck out. Tow charges are buyers responsibility.

1998 SOUTEREL RD.

LEASE: FULHAGE

MIXING AND HAULING

OVERPASS) N 1.25 MI JUST PAST ST MEET & TANK

TIME	FORMULA	LOAD SIZE	VADDE ODDEDED				
		LOAD SIZE	YARDS ORDERED		DRIVER/TRUCK		PLANT/TRANSACTION #
8:85 AM	WELL	1.5 000			JU		
	DO MUNICIPALITY	16.00	16.00		32		WOOCO
DATE	PU NUMBE	1040 #	V/10000			19-4	
		LOAD #	YARDS DEL.	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER
9/1/14	WELL #34-						
MAR AS AS	WELL #34	14	16.00	-	0.00	4 000	37543
						11 4000 411	· with with all
	MADAIINIC		DDDDEDD(D111	ton auto M.			

IRRITATING TO THE SKIN AND EYES
Contains Portland Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY
CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of
Contact With Skin or Eyes, Flush Thoroughly With Water, If Irritation Persists, Get Medical
Attention. KEEP CHILDREN AWAY.

CONCRETE IS A PERISHABLE COMMODITY and BECOMES the PROPERTY of the PURICHASER UPON LEAVING the PLANT. ANY CHANGES OR CANCELLATION of ORIGINAL INSTRUCTIONS MUST be TELEPHONED to the OFFICE BEFORE LOADING STARTS.

The undersigned promises to pay all costs, including reasonable attorneys' fees, incurred in collecting any sums owed.

All accounts not paid within 30 days of delivery will bear interest at the rate of 24% per annum. Not Responsible for Reactive Aggregate or Color Quality. No Claim Allowed Uniess Made at Time Material is Delivered.

A \$30 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks, Excess Delay Time Charged @ \$60/HR.

(TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE)

Dear Customer-The driver of this truck in presenting this RELEASE to you for your signature is of the opinion that the size and weight of his truck may possibly catalog datase damage to the premises and/or adjacent property it a places the material in this load where you desire it, it is our went to help you in every way that we can, but in order to do this charter a requesting that you sign im selfLEASE releving him and this supplier from any responsibility from any damage that may occur to the premises and/or adjacent property or the premises and/or adjacent property and that you also agree to help him remove mud from the wheels of his vehicle so that he will not litter the public street. Further, as additional gonisideration, the undersigned agrees to indemnify and hold harmless the driver of this truck and this supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisin out of delivery of this order.

Excessive Water is Detrimental to Concrete Performance H₂0 Added By Request/Authorized By

GAL X

WEIGHMASTER

NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.

UNIT PRICE

EXTENDED PRICE

LOAD RECEIVED BY

QUANTITY CODE WELL (10 SACKS PER UNLT) TRUCKING CHARGE

V.				The second secon			
RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN		TIME ALLOWED		
LEFT PLANT	ARRIVED JOB	START UNLOADING	SLOW POUR OR PUMP TRUCK AHEAD ON JOB 8.	TRUCK BROKE DOWN ACCIDENT CITATION OTHER	TIME DUE	TAX 7.15	-
0-75						ADDITIONAL CHARGE 1	
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME			DELAY TIME	ADDITIONAL CHARGE 2	
				1		GRAND TOTAL	4