

1367548

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

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

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

| 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 |
| <input type="checkbox"/> Perforate | | | | |
| <input type="checkbox"/> Protect Casing | | | | |
| <input type="checkbox"/> Plug Back TD | | | | |
| <input type="checkbox"/> Plug Off Zone | | | | |

- Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
- Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
- Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

| | | | | | |
|---|--|---------|-------------|---------------|---------|
| Date of first Production/Injection or Resumed Production/Injection: | Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____ | | | | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |

| | | | | | |
|---|---|--|--|--|--|
| 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> | | | PRODUCTION INTERVAL: Top _____ Bottom _____ | |
| | | | | | |

| Shots Per Foot | Perforation Top | Perforation Bottom | Bridge Plug Type | Bridge Plug Set At | Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i> |
|----------------|-----------------|--------------------|------------------|--------------------|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| | | | |
|----------------|-------|---------|------------|
| TUBING RECORD: | Size: | Set At: | Packer At: |
|----------------|-------|---------|------------|

THE NEW KLEIN LUMBER COMPANY
 281 W. MADISON
 P.O. BOX 885
 IOLA, KS 66749
 PHONE: (620) 365-2281

| CUSTOMER NO. | JOB NO. | PURCHASE ORDER NO. | REFERENCE | TERMS | CLERK | DATE | TIME |
|--------------|---------|--------------------|-----------|-------------------|-------|---------|------|
| 3447 | | | | NET 10TH OF MONTH | SE | 1/29/13 | 4:32 |

| | |
|--|----------------------------|
| LAYMON OIL II 1398 SQUIRREL RD WOODHO FALLS KS 66758 | S H I P T O |
|--|----------------------------|

DEL. DATE: 1/29/13 TERM#552
 TAX : 001 IOLA IOLA
 DOCH 269388

 * ORDER *

 ORDR 269388

| SHIPPED | ORDERED | UM | SKU | DESCRIPTION | LOCATION | UNITS | PRICE/PER | EXTENSION |
|--------------------|---------|----|-----|-----------------|----------|-------|-----------|-----------|
| | 300 | EA | PC | PORTLAND CEMENT | | 300 | 9.45 /EA | 2,835.00 |
| <i>McHone 5-12</i> | | | | | | | | |

| | | |
|---|-------------------|---------|
| ** ORDER ** ORDER ** ORDER ** ORDER ** ORDER ** ORDER * | TAXABLE | 2835.00 |
| ** DEPOSIT AMOUNT ** | 0.00 NON-TAXABLE | 0.00 |
| ** BALANCE DUE ** | 3,077.39 SUBTOTAL | 2835.00 |
| ** PAYMENT RECEIVED ** | 0.00 | |
| | TAX AMOUNT | 242.39 |
| | TOTAL AMOUNT | 3077.39 |

X

 RECEIVED BY

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

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.

NOTICE TO OWNER

Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filing of a mechanic's lien on the property which is the subject of this contract.

SOLD TO:

LA005
LAYMON OIL II, L.L.C.
1998 SQUIRREL RD.

NEOSHO FALLS KS
66758

SHIP TO:

LA005
LAWON OIL
54 W TO WILLOW, N 4.25 MI TO
180TH, W 7 MI (PRARIE), S 9D
LEASE McHONE WELL#5-12
TURN IN @HAY BARN 1/4

SSD

| TIME | FORMULA | LOAD SIZE | YARDS ORDERED | % CAL | DRIVER/TRUCK | % AIR | PLANT/TRANSACTION # |
|-----------|---------|-----------|---------------|------------|--------------|---------------|---------------------|
| 02:54:24p | WELL | 15.00 yd | 15.00 yd | 0.00 | MA 32 | 0.00 | WOODCO |
| DATE | LOAD # | YARDS DEL | BATCH# | WATER TRIM | SLUMP | TICKET NUMBER | |
| 02-13-13 | | 15.00 yd | 23398 | G/yd | 4.00 in | 33608 | |

WARNING

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 PURCHASER 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 Unless Made at Time Material is Delivered.

A \$25 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks.

Excess Delay Time Charged @ \$50/Hr.

PROPERTY DAMAGE RELEASE

(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 cause damage to the premises and/or adjacent property if it places the material in this load where you desire it. It is our wish to help you in every way that we can, but in order to do this the driver is requesting that you sign this RELEASE relieving him and this supplier from any responsibility from any damage that may occur to the premises and/or adjacent property, buildings, sidewalks, driveways, curbs, etc., by the delivery of this material, 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 consideration, 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 arisen out of delivery of this order.

SIGNED

X

Excessive Water is Detrimental to Concrete Performance

H₂O 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.

LOAD RECEIVED BY:

X

| QUANTITY | CODE | DESCRIPTION | UNIT PRICE | EXTENDED PRICE |
|----------|----------|--------------------------|------------|----------------|
| 15.00 | WELL | WELL (10 SACKS PER UNIT) | 51.00 | 765.00 |
| 15.00 | MIX&HAUL | MIXING & HAULING | 25.00 | 375.00 |
| 2.00 | TRUCKING | TRUCKING CHARGE | 50.00 | 100.00 |

*** Circulated from casing TD (1160') to surface, 150sx total'

| RETURNED TO PLANT | LEFT JOB | FINISH UNLOADING | DELAY EXPLANATION/CYLINDER TEST TAKEN | TIME ALLOWED |
|-------------------|------------------|------------------|---|--------------|
| | | | 1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER | |
| | | | 6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER | |
| | LEFT PLANT | ARRIVED JOB | | TIME DUE |
| | | | | |
| | TOTAL ROUND TRIP | TOTAL AT JOB | | DELAY TIME |
| | | | | |

SubTotal \$ 1240.00
Tax % 7.300 90.52
Total \$ 1330.52
Order \$ 1330.52

ADDITIONAL CHARGE 1

ADDITIONAL CHARGE 2

GRAND TOTAL