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WELL COMPLETION FORM

4/2/10

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33365
 Name: Layne Energy Operating, LLC
 Address: 1900 Shawnee Mission Parkway
 City/State/Zip: Mission Woods, KS 66205
 Purchaser: _____
 Operator Contact Person: Timothy H. Wright
 Phone: (913) 748-3960
 Contractor: Name: Thornton Air Rotary
 License: 33606
 Wellsite Geologist: _____
 Designate Type of Completion:
 _____ New Well _____ Re-Entry Workover
 _____ Oil _____ SWD _____ SLOW _____ Temp. Abd.
 Gas _____ ENHR _____ SIGW
 _____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: _____

KCC
 APR 02 2008
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Well Name: _____
 Original Comp. Date: 9/7/2007 Original Total Depth: 1775'
 _____ Deepening Re-perf. _____ Conv. to Enhr./SWD
 _____ Plug Back _____ Plug Back Total Depth
 Commingled Docket No. _____
 _____ Dual Completion Docket No. _____
 _____ Other (SWD or Enhr.?) Docket No. _____
 12/18/2007 12/18/2007
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 049-22454-00-01
 County: Elk
 _____ SE SE Sec. 31 Twp. 28 S. R. 12 East West
660 feet from N (circle one) Line of Section
660 feet from W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Kelly Well #: 16-31
 Field Name: Cherokee Basin Coal
 Producing Formation: Cherokee Coals
 Elevation: Ground: 1085' Kelly Bushing: _____
 Total Depth: 1775' Plug Back Total Depth: 1748.9'
 Amount of Surface Pipe Set and Cemented at 44 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 1748.9
 feet depth to Surface w/ 185 sx cmt.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content N/A ppm Fluid volume _____ bbls
 Dewatering method used N/A - Air Drilled
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: _____
 Title: Agent Date: 4/2/08

Subscribed and sworn to before me this 2 day of April
 2008

Notary Public: MacLaughlin Darling
 Date Commission Expires: 1-4-2009

MACLAUGHLIN DARLING
 Notary Public - State of Kansas
 My Appt. Expires 1-4-2009

KCC Office Use ONLY

Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received **APR 03 2008**

RECEIVED
 KANSAS CORPORATION COMMISSION

CONSERVATION DIVISION
 WICHITA, KS