

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

ORIGINAL

Operator: License # 32710  
Name: Laymon Oil II, LLC  
Address: 1998 Squirrel Road  
City/State/Zip: Neosho Falls, KS 66758  
Purchaser: Coffeyville Resources  
Operator Contact Person: Kenneth Laymon  
Phone: (620) 963-2495  
Contractor: Name: company tools  
License: 32710  
Wellsite Geologist: \_\_\_\_\_  
Designate Type of Completion:  
 New Well     Re-Entry     Workover  
 Oil     SWD     SIOW     Temp. Abd.  
 Gas     ENHR     SIGW  
 Dry     Other (Core, WSW, Expl., Cathodic, 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./SWD  
 Plug Back     Plug Back Total Depth  
 Commingled    Docket No. \_\_\_\_\_  
 Dual Completion    Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?)    Docket No. \_\_\_\_\_  
10/04/06    10/09/06    10/31/06  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

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API No. 15 - 207-27051 -00-00  
County: Woodson  
nw-se-ne-ne Sec. 29 Twp. 23 S. R. 16  East  West  
3660 feet from  N (circle one) Line of Section  
1990 feet from  W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE  NW SW  
Lease Name: Robison Well #: 19-06  
Field Name: Vernon  
Producing Formation: Squirrel  
Elevation: Ground: n/a Kelly Bushing: \_\_\_\_\_  
Total Depth: 1160 Plug Back Total Depth: 1159  
Amount of Surface Pipe Set and Cemented at 40' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from 40'  
feet depth to surface w/ 10 <sup>sq</sup> cm.

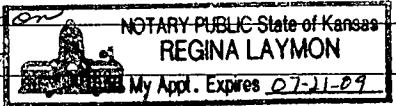
**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used \_\_\_\_\_  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License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

AITZ-DIG-12/2/08

**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: Kenneth Laymon  
Title: Owner Date: 11/07/06  
Subscribed and sworn to before me this 7<sup>th</sup> day of November,  
2006.  
Notary Public: Regina Laymon  
Date Commission Expires: 07-11-09



**KCC Office Use ONLY**

Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: Laymon Oil II, LLC Lease Name: Robison Well #: 19-06  
 Sec. 29 Twp. 23 S. R. 16  East  West County: Woodson

**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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum          <div style="text-align: center;"> <p><b>RECEIVED</b></p> <p><b>NOV 13 2006</b></p> <p><b>KCC WICHITA</b></p> </div>
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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
Surface	10 1/4"	8 5/8"	24#	40'	common	10	2%
Tubing	5 7/8"	2 7/8"	6.7#	1159'	common	170	50/50 poz mix
Production		1"	1.8#	1148'			

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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)		Depth
2	1103 - 1119	100 gal 15% HCL Acid		1103-1119
		frac w/114 sks sand		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. <b>10/31/06</b>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	.1				

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

FED ID #  
 Shop # (620) 437-2661  
 Cellular # (620) 437-7582  
 Office # (316) 685-5908  
 Office Fax # (316) 685-5926

**Hurricane Truck Services, Inc.**  
**P.O. Box 782228**  
**Wichita, KS 67278-2228**

MC ID # 165290

Shop Address: Route 1  
 Madison, KS 66860

Customer:  
 LAYMON OIL COMPANY  
 1998 SQUIRREL RD.  
 NEOSHO FALLS, KS 66758

Invoice Date 10/16/2006  
 Invoice # 7113  
 Lease Name ROBINSON 2  
 Well # 19 - 06

Date	Description	Hrs/Qty	Rate	Total
10/10/2006	Drove to location and cemented long string per attached Service ticket #T1540.			
	50/50 Poz Mix Cement	170.00	6.73	1,144.10
	Gel - 2%	280.00	0.18	50.40
	2 7/8" Top Rubber Plug	1.00	15.00	15.00
	Bulk truck mileage	1.00	242.06	242.06
	Pump Charge	1.00	700.00	700.00
	Pump truck mileage - One way	35.00	2.75	96.25
	LESS 10% DISCOUNT	-1.00	224.78	-224.78
	PAID WITH CHECK #13326 DATED 10/12/06			
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**Total** \$2,023.03

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

**WE APPRECIATE YOUR BUSINESS!**

THE NEW KLEIN LUMBER COMPANY  
 201 W. MADISON  
 P.O. BOX 805  
 IOLA, KS 66749  
 PHONE: (620) 365-2201

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCE	TERMS	CLERK	DATE	TIME
3447			NET	10TH OF MONTH	SE	9/25/06	10:18

LAYMON OIL II  
 1998 SQUIRREL RD  
 NEOSHO FALLS KS 66750

SHIP TO

DOCH 78208  
 \*\*\*\*\*  
 \* INVOICE \*  
 \*\*\*\*\*

TAX : 001 IOLAL IOLA

QUANTITY		UM	SKU	DESCRIPTION	SUGG	UNITS	PRICE/PER	EXTENSION
SHIPPED	ORDERED							
75		EA	PC	PORTLAND CEMENT		75	7.99 /EA	599.25
50		EA	80FA	FLY ASH 80#		50	3.85 /EA	192.50
1		EA	DELIVERY	DELIVERY CHARGE		1	10.00 /EA	10.00

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\*\* AMOUNT CHARGED TO STORE ACCOUNT \*\*  
 860.28 TAXABLE 801.75  
 NON-TAXABLE 0.00  
 SUBTOTAL 801.75

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TAX AMOUNT 58.53  
 TOTAL AMOUNT 860.28 *111.26*