

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31302
Name: Jones & Buck Development
Address 1: P.O. Box 68
Address 2: _____
City: Sedan State: KS Zip: 67361 + _____
Contact Person: P. J. Buck
Phone: (620) 725-3636
CONTRACTOR: License # 5831
Name: MOKAT Drilling
Wellsite Geologist: None
Purchaser: Coffeyville Resources

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., 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 Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____
3-29-10 3-30-10 4-10-10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 019-26984 - 0000
Spot Description: _____
NW SW SW SW Sec. 26 Twp. 34 S. R. 10 East West
400 Feet from North / South Line of Section
5,115 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Chautauqua
Lease Name: Lemmon Well #: JBD#1
Field Name: Elgin Oil & Gas
Producing Formation: Wayside
Elevation: Ground: 983 est Kelly Bushing: _____
Total Depth: 1490' Plug Back Total Depth: _____
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: 1471
feet depth to: surface w/ 190 sx cmt.

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 #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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.

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.

Signature: [Signature]
Title: Bookkeeper Date: 8-23-10

KCC Office Use ONLY

Letter of Confidentiality Received Date: 8/23/10 - 8/23/10 **Denied**
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: DG Date: 8/26/10
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Operator Name: Jones & Buck Development Lease Name: Lemmon Well #: JBD#1
 Sec. 26 Twp. 34 S. R. 10 East West County: Chautauqua

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 complete copy of all Electric Wire-line 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray/Cement Bond/CCL/VDL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Lenapah Limestone</td> <td>1384</td> <td></td> </tr> <tr> <td>Wayside Sandstone</td> <td>1398</td> <td></td> </tr> <tr> <td>Altamont limestone</td> <td>1444</td> <td></td> </tr> </table>	Name	Top	Datum	Lenapah Limestone	1384		Wayside Sandstone	1398		Altamont limestone	1444	
Name	Top	Datum											
Lenapah Limestone	1384												
Wayside Sandstone	1398												
Altamont limestone	1444												

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	11"	8 5/8"		40'	Portland "A"	8	None
Production	6 3/4"	4 1/2"		1471'	60/40 poz	190	See Cementing Ticket

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	1408-1420	300 gallons 15% HCL, 5500# 12/20 frac sand,	1408-1420
		313 barrels water	

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TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>1425'</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>4-10-10</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>8</u>	Gas Mcf <u>trace</u>	Water Bbls. <u>30</u>
Gas-Oil Ratio		Gravity <u>40</u>	

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ACKARMAN HARDWARE and LUMBER CO
 160 EAST MAIN STREET
 SEDAN, KS 67361

PAGE NO 1

PHONE: (620) 725-3103

THANKS FOR YOUR BUSINESS!!

Cust No	Job No	Purchase Order	Reference	Terms	Clerk	Date	Time
253636			LEMON	NET 10TH	SC	3/18/10	10:55

Sold To:
 JONES & BUCK DEVELOPMENT
 P. O. BOX 68
 SEDAN KS 67361

Ship To:

DOC# 184190
 DUPLICATE
 * INVOICE *

TAX : 001 KANSAS SALES TAX

LN#	SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SUGG	UNITS	PRICE/PER	EXTENSION
1	8		EA	RM44816	PORTLAND CEMENT 92.6#		8	10.85 /EA	86.80 *

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** AMOUNT CHARGED TO STORE ACCOUNT ** 93.57 TAXABLE 86.80
 NON-TAXABLE 0.00
 (JOHN CORNSTUBBLE) SUBTOTAL 86.80

TAX AMOUNT 6.77
 TOTAL AMOUNT 93.57

X _____
 Received By



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 233576

Invoice Date: 04/09/2010 Terms: 10/10,n/30 Page 1

J. B. D. & P. J. BUCK
P.O. BOX 68
SEDAN KS 67361
(620)725-3636

LEMMON JBD #1
22073
26-34-10
04-01-10

Part Number	Description	Qty	Unit Price	Total
1126	OIL WELL CEMENT	60.00	16.5000	990.00
1125	40/60 LIGHT WEIGHT POZ	130.00	8.9600	1164.80
1107A	PHENOSEAL (M) 40# BAG)	120.00	1.1200	134.40
1110	GILSONITE (50#)	650.00	.6300	409.50
1111	GRANULATED SALT (50 #)	300.00	.3200	96.00
1118B	PREMIUM GEL / BENTONITE	350.00	.1700	59.50
1123	CITY WATER	4200.00	.0145	60.90
4404	4 1/2" RUBBER PLUG	1.00	44.0000	44.00

Description	Hours	Unit Price	Total
398 CEMENT PUMP	1.00	900.00	900.00
398 EQUIPMENT MILEAGE (ONE WAY)	45.00	3.55	159.75
398 CASING FOOTAGE	1471.00	.20	294.20
T-90 WATER TRANSPORT (CEMENT)	3.00	108.00	324.00
518 MIN. BULK DELIVERY	1.00	305.00	305.00

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Amount Due 4615.63 if paid before 04/19/2010

Parts:	2959.10	Freight:	.00	Tax:	186.43	AR	5128.48
Labor:	.00	Misc:	.00	Total:	5128.48		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

MCALESTER, OK
918/426-7667

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-487-8676

233576

TICKET NUMBER 22073
LOCATION Barthesville, OK
FOREMAN Kirk Sanders

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-1-10	4291	Lemmon JBD #1	26	34	10	CO
CUSTOMER Jordan Buck (JBD)			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			398	John		
CITY			518	Eric		
STATE			402790	Drew		
ZIP CODE						

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2 10.5 #
 CASING DEPTH 1471' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.8/14.5 SLURRY VOL 1.31/1.47 WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 23.4 DISPLACEMENT PSI 500* MIX PSI 200* RATE 4-4.5 bpm

REMARKS: 200 gal / 100m to est circ., ran 130sx of 60/40 Poz w/ 2% gel / 5% salt / 5% Gilsomite / 1/4" Pheno & ran 60sx of OWC. Washed out pump & lines, dropped plug & disp. to set. Shut down & washed up.

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Circ Cement to Succ.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE (Long String)		900.00
5406	45	MILEAGE		159.75
5407	1	Bulk Trk		305.00
5402	1471'	Footage		294.20
5501C	3 hrs.	Transport		324.00
1126	60sx	OWC (Bottom)	#	990.00
1125	130sx	60/40 Poz Mix (60% Poz)	#	6164.20
1107A	120#	Pheno Seal	#	134.40
1110	650#	Gilsomite	#	409.50
1111	300#	Granulated Salt	#	96.00
1118B	350#	Premium Gel	#	59.50
1123	4200gal	City Water	#	60.90
4404	1	4 1/2 Rubber Plug	#	44.00
<p>10% Discount \$ 512.85</p> <p>6.3% SALES TAX</p>				186.43
ESTIMATED TOTAL				5,128.48

Ravin 3737

AUTHORIZATION

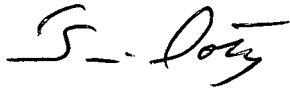
TITLE _____

DATE _____

Please hold confidential the information from side two of the ACO-1 form for the Lemmon Lease, Well JBD#1 located in:

NW/4 SW/4 SW/4 SW/4
Sec. 26 -T34S-R10E
400 feet from the South Line of Section
5115 feet from the East Line of Section
API No. 15-019-26,984-0000

Thank you,



Tim Doty, Agent
Jones & Buck Development

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