

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 SLOW
- 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 #: _____

4-13-10	4-14-10	4-23-10
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 019-26985-0000
Spot Description: _____
E2 W2 W2 SW Sec. 26 Twp. 34 S. R. 10 East West
1,320 Feet from North / South Line of Section
4,860 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#2
Field Name: Elgin Oil & Gas
Producing Formation: Wayside
Elevation: Ground: 997 est Kelly Bushing: _____
Total Depth: 1540' 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: 1514
feet depth to: surface w/ 200 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: 8/24/10 - 8/24/11
 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#2
 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>1408</td> <td></td> </tr> <tr> <td>Wayside Sandstone</td> <td>1418</td> <td></td> </tr> <tr> <td>Altamont Limestone</td> <td>1464</td> <td></td> </tr> </table>	Name	Top	Datum	Lenapah Limestone	1408		Wayside Sandstone	1418		Altamont Limestone	1464	
Name	Top	Datum											
Lenapah Limestone	1408												
Wayside Sandstone	1418												
Altamont Limestone	1464												

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"		1514'	60/40 poz	200	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 <i>(Amount and Kind of Material Used)</i>	Depth
2	1435-1444	300 gallons 15% HCL, 5000# 12/20 frac sand,	1435-1444
		295 barrels water	

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TUBING RECORD:	Size: <u>2 3/8"</u>	Set At: <u>1450'</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>4-24-10</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>10</u>	Gas Mcf <u>trace</u>	Water Bbls. <u>30</u>	Gas-Oil Ratio <u>40</u>

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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. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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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 # 233732

Invoice Date: 04/15/2010 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 #2
14739
26-34-10
04/14/10

Part Number	Description	Qty	Unit Price	Total
1126	OIL WELL CEMENT	60.00	16.5000	990.00
1131	60/40 POZ MIX	140.00	11.0000	1540.00
1107A	PHENOSEAL (M) 40# BAG)	120.00	1.1200	134.40
1110A	KOL SEAL (50# BAG)	700.00	.4000	280.00
1111	GRANULATED SALT (50 #)	350.00	.3200	112.00
1118B	PREMIUM GEL / BENTONITE	400.00	.1700	68.00
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	1514.00	.20	302.80
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 4881.87 if paid before 04/25/2010

Parts:	3229.30	Freight:	.00	Tax:	203.45	AR	5424.30
Labor:	.00	Misc:	.00	Total:	5424.30		
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, INC. # 233732
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 14739
 LOCATION Bartholomew, OK
 FOREMAN Kirk Sanders

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-14-10	4291	Lemmon JBD #2	26	34	10	CG
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			398	John		
CITY			518	Matt		
STATE			402 TPO	Drew		
ZIP CODE						

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 1514' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 12.8/14.5 SLURRY VOL. 1.31/1.45 WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 24 DISPLACEMENT PSI 500 MIX PSI 200 RATE 4.5 bpm

REMARKS: Run gal/100m to est circ., ran 14000 of 60/40 Poz w/ 2% gal/
5% salt / 15" Kal Seal / 1.6" Plano & ran 10000 of OWC. Washed
out pump & lines, dropped plug & disp. Shut down & washed up.

Circ. Cement to Surf.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE (Long String) RECEIVED		900.00
5406	45	MILEAGE		159.25
5407	1	Bulk Trk. AUG 23 2010		305.00
5402	1514'	Footage		302.00
5501C	3 hrs.	Transport KCC WICHITA		324.00
1126	6000	OWC *		990.00
1131	14000	60/40 Poz *		1540.00
1107A	120"	Plano Seal *		134.40
1110A	700"	Kal Seal *		240.00
1111	350"	Granulated Salt *		112.00
1118B	400"	Premium Gal *		68.00
1123	4200 gal	City Water *		60.00
4904	1	4 1/2 Rubber Plug *		44.00
<p><10% Discount \$542.43> \$4,881.86</p>				
			6.3% SALES TAX	203.45
			ESTIMATED TOTAL	5,424.30

AUTHORIZATION [Signature]


TITLE _____

DATE _____

Please hold confidential the information from side two of the ACO-1 form for the Lemmon Lease, Well JBD#2 located in:

E/2 W/2 W/2 SW/4
Sec. 26 -T34S-R10E
1320 feet from the South Line of Section
4860 feet from the East Line of Section
API No. 15-019-26,985-0000

Thank you,



Tim Doty, Agent
Jones & Buck Development

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