

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 # 32710
Name: Laymon Oil II LLC
Address 1: 1998 Squirrel Rd
Address 2: _____
City: Neosho Falls State: KS Zip: 66758 + 7124
Contact Person: Michael Laymon
Phone: (620) 963-2495
CONTRACTOR: License # 32710
Name: Company Tools
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 #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
10-07-2010	10-09-2010	10-13-2010

API No. 15 - 207-27692-00-00
Spot Description: _____
NW NE NE SE Sec. 27 Twp. 23 S. R. 16 East West
495 Feet from North / South Line of Section
495 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Woodson
Lease Name: D Gleue Well #: 2-10
Field Name: Vernon
Producing Formation: Mississippi
Elevation: Ground: 1073 est Kelly Bushing: _____
Total Depth: 1480 Plug Back Total Depth: 1470
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 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: Michael Laymon
Title: Owner Date: 12-20-10

KCC Office Use ONLY

Letter of Confidentiality Received **RECEIVED**
Date: _____
 Confidential Release Date: DEC 22 2010
 Wireline Log Received
 Geologist Report Received **KCC WICHITA**
 UIC Distribution
ALT I II III Approved by: Dg Date: 12/30/10

Operator Name: Laymon Oil II LLC Lease Name: D Gleue Well #: 2-10
 Sec. 27 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 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 type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray Neutron	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See attached log
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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	
Production	6 1/8"	4 1/2"	11#	1470	portland	240	
Tubing		1"	1.8"	1470			

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	1398.5 - 1406.5	1000 gal 15% hcl acid frac	1398-1416
	1410 - 1416		
RECEIVED			
DEC 22 2010			

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	KCC WICHITA
Date of First, Resumed Production, SWD or ENHR. 10-20-2010		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. 2	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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Laymon Oil II LLC
1998 Squirrel Rd
Neosho Falls, KS 66758

620-963-2495

fax 620-963-2921

Lease : D Gleue Well # 2-10
API: 15-207-27692-00-00
Spud date: 10-07-2010
Completion date: 10-09-2010
27-23-16 Woodson County

Formation	From	To
Soil	0	20
Shale	20	100
Lime	100	104
Shale	104	150
Lime	150	280
Shale	280	283
Lime	283	470
Black Shale	470	473
Lime	473	660
Shale	660	819
Lime	819	880
Shale	880	968
Lime	968	1006
Shale	1006	1008
5' Lime	1008	1012
Black Shale	1012	1014
Upper Squirrel Sand	1014	1020
Shale	1020	1037
Lower Squirrel Sand	1037	1045
Shale	1045	1364
Lime	1364	1368
Shale	1368	1383
Lime	1383	1480
Total Depth		1480

Set 40' of 8 5/8" surface, cemented w/ 10 sacks
Ran 1470' of 4 1/2" casing

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DEC 22 2010
KCC WICHITA

THE NEW KLEIN LUMBER

ACCOUNT STATEMENT

P.O. BOX 805
 IOLA, KS 66749
 (620) 365-2201
 (620) 365-7542

TO:
 LAYMON OIL
 1998 SQUIRREL RD
 NEOSHO FALLS KS 66758

ACCOUNT NO. 3447
DATE 5/05/10
TERMS
AMOUNT ENCLOSED

DATE	DESCRIPTION	CHARGES	CREDITS	BALANCE
5/05/10	100 PORTLAND CEMENT	945.00		945.00
	M. Jones 14-10 10 PKs			
	M. Jones 15-10 10 PKs			
	M. Jones 16-10 10 PKs			
	M. Jones 17-10 10 Sacks			
	M. Jones 18-10 10 PKs			
	M. Jones 19-10 10 PKs			
	M. Jones 18-10 10 PKs			
	D. Glencoe 2-10 10 PKs			
				\$945.00
				TOTAL DUE

MAKE CHECKS PAYABLE TO:

THE NEW KLEIN LUMBER
 P.O. BOX 805
 IOLA, KS 66749

THANK YOU FOR YOUR BUSINESS!

RECEIVED
 DEC 22 2010
 KCC WICHITA

802 N. Industrial Rd.
P.O. Box 664
Tola, 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.

TIME	FORMULA	LOAD SIZE	YARDS ORDERED		DRIVER/TRUCK		PLANT/TRANSACTION #
DATE		LOAD #	YARDS DEL.	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER

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 on the road where you drive 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 releasing him and the 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 wheel's 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 *D-G/eye 2-10*

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
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RECEIVED

DEC 22 2010

KCC WICHITA

Mark De... [Signature]

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	START UNLOADING		TIME DUE
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME		DELAY TIME

ADDITIONAL CHARGE 1 _____

ADDITIONAL CHARGE 2 _____

GRAND TOTAL ▶ _____

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

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SIGNED _____
X _____

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H₂O Added By Request/Authorized By

_____ GAL X _____

WEIGHMASTER _____

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LOAD RECEIVED BY _____
X _____

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
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RECEIVED
DEC 22 2010

Mark D. St... **KCC WICHITA**

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

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SIGNED
X _____

Excessive Water is Detrimental to Concrete Performance H₂O Added By Request/Authorized By

_____ GAL X _____

WEIGHMASTER

Olave 2-10

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
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KCC WICHITA

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SIGNED

**Excessive Water is Detrimental to Concrete Performance
H₂O Added By Request/Authorized By**

GAL X _____

WEIGHMASTER

12-2-10

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
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KCC WICHITA

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ADDITIONAL CHARGE 1 _____
ADDITIONAL CHARGE 2 _____
GRAND TOTAL ▶ _____