

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 6804
Name: LACHENMAYR OIL, LLC
Address 1: P. O. Box 526
Address 2: _____
City: Newton State: KS Zip: 67114 + _____
Contact Person: Howard Lachenmayr
Phone: (316) 283-5585
CONTRACTOR: License # 33350
Name: Southwind Drilling, Inc.
Wellsite Geologist: Jamie Hess
Purchaser: _____

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 #: _____

| 5/17/2011 | 5/27/2011 | 5/27/2011 |
|-----------------------------------|-----------------|---|
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-079-20686-00-00
Spot Description: _____
NE SW NE NE Sec. 13 Twp. 22 S. R. 2 East West
770 Feet from North / South Line of Section
950 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Harvey
Lease Name: Dyck Well #: ~~24~~ 2
Field Name: Graber
Producing Formation: Hunton
Elevation: Ground: 1458 Kelly Bushing: 1465
Total Depth: 3471 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 217 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Date must be collected from the Reserve Pit)
Chloride content: 3000 ppm Fluid volume: 400 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite:
Operator Name: Lachenmayr Oil LLC
Lease Name: Jones License #: 6804
Quarter NW Sec. 11 Twp. 22 S. R. 2 East West
County: Harvey Permit #: D-17,849

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: Howard Lachenmayr
Title: Operator Date: 7/29/2011

KCC Office Use ONLY

Letter of Confidentiality Received
Date: _____

Confidential Release Date: AUG 02 2011

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: DIS Date: 8/10/11

RECEIVED
KCC WICHITA

Operator Name: Lachenmayr Oil, LLC Lease Name: Dyck Well #: 2
 Sec. 13 Twp. 22 S. R. 2 East West County: Harvey

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 Wireline Logs surveyed. Attach final geological well site report.

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|-------|-----|-------|------------------|------|-------|--------------|------|-------|-------------|------|-------|------------|------|-------|--------|------|-------|-------|------|-------|--------------|------|-------|
| Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input 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 type="checkbox"/> Yes <input checked="" 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: None | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Base Kansas City</td> <td>2703</td> <td>-1238</td> </tr> <tr> <td>Miss. Warsaw</td> <td>2942</td> <td>-1477</td> </tr> <tr> <td>Miss. Osage</td> <td>2966</td> <td>-1501</td> </tr> <tr> <td>Kinderhook</td> <td>3281</td> <td>-1816</td> </tr> <tr> <td>Hunton</td> <td>3319</td> <td>-1854</td> </tr> <tr> <td>Viola</td> <td>3428</td> <td>-1963</td> </tr> <tr> <td>Simpson Sand</td> <td>3471</td> <td>-2006</td> </tr> </table> | Name | Top | Datum | Base Kansas City | 2703 | -1238 | Miss. Warsaw | 2942 | -1477 | Miss. Osage | 2966 | -1501 | Kinderhook | 3281 | -1816 | Hunton | 3319 | -1854 | Viola | 3428 | -1963 | Simpson Sand | 3471 | -2006 |
| Name | Top | Datum | | | | | | | | | | | | | | | | | | | | | | | |
| Base Kansas City | 2703 | -1238 | | | | | | | | | | | | | | | | | | | | | | | |
| Miss. Warsaw | 2942 | -1477 | | | | | | | | | | | | | | | | | | | | | | | |
| Miss. Osage | 2966 | -1501 | | | | | | | | | | | | | | | | | | | | | | | |
| Kinderhook | 3281 | -1816 | | | | | | | | | | | | | | | | | | | | | | | |
| Hunton | 3319 | -1854 | | | | | | | | | | | | | | | | | | | | | | | |
| Viola | 3428 | -1963 | | | | | | | | | | | | | | | | | | | | | | | |
| Simpson Sand | 3471 | -2006 | | | | | | | | | | | | | | | | | | | | | | | |

| 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 | 12.25 | 8.625 | 23 | 217 | Class A | 140 | 3%CC, 2%GEL |
| | | | | | | | |
| | | | | | | | |

| 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 |
|----------------|---|---|-------|
| | | | |
| | | | |
| | | | |
| | | | |

| | | | |
|---|-----------|--|-----------------------------------|
| TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ | | Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Date of First, Resumed Production, SWD or ENHR. _____ | | Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____ | |
| Estimated Production Per 24 Hours | Oil Bbls. | 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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL: <div style="text-align: center; border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">RECEIVED</div> |
|---|---|---|



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 31053
LOCATION # 90 Eldorado
FOREMAN Jacob Storm

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

Api - 079-20686-00-00

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|-------------------------------|-------------|--------------------|--------------------------------|----------|-------|--------|
| 5-27-11 | 4897 | Dyck #2 | 13 | 23 | 25 | Harvey |
| CUSTOMER Lachenmayer oil | | | Safety meeting J.S. T.S. | | | |
| MAILING ADDRESS PO Box 526 | | | | | | |
| CITY Newton | STATE KS | ZIP CODE 67114 | | | | |
| TRUCK # DRIVER TRUCK # DRIVER | | | | | | |
| | | | 446 | Jeff | | |
| | | | 491 | Ted | | |
| | | | 511 | Jacob | | |

JOB TYPE plug B HOLE SIZE 7 7/8 HOLE DEPTH _____ CASING SIZE & WEIGHT N/A
 CASING DEPTH N/A DRILL PIPE 4 1/2 TUBING N/A OTHER _____
 SLURRY WEIGHT 14.2 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 0 DISPLACEMENT PSI 200 MIX PSI 100 RATE 3 bpm

REMARKS: Safety meeting, Run pipe to 480 ft mix 35 sks 60/40 2 1/2 gal 1 Ycc
dis placed 4 bbl pulled pipe to 270 ft mixed 35 sks displaced 2 bbl, pulled
pipe up to 60 ft mixed 25 sks circulating cement to surface, plugged Root Hole
with 30 sks, taped surface off with 10 sks to re-fill

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|-----------------|---------|
| 5405N | 1 | PUMP CHARGE | 975.00 | 975.00 |
| 5406 | 50 | MILEAGE | 4.00 | 200.00 |
| 5407A | 50 | ton mile X 5.67 X | 1.26 | 357.21 |
| 1131 | 135 | 60/40 po2 | 11.95 | 1613.25 |
| 1118B | 250 lbs | Gel | 0.20 | 50.00 |
| 1102 | 110 lbs | Calcium chloride | 0.70 | 77.00 |
| 5404 | 4 | waiting time | 280.00 | 1120.00 |
| RECEIVED | | | | |
| AUG 02 2011 | | | | |
| KCC WICHITA | | | Sub total | 4392.46 |
| | | | SALES TAX | 144.44 |
| | | | ESTIMATED TOTAL | 4536.90 |

Ravin 3737

AUTHORIZATION

Robert Stevenson

TITLE

041690

DATE

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 31003
LOCATION # 80 Eldorado
FOREMAN Jacob Storm

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|-------------------------------|-------------|--------------------|---|----------|-------|--------|
| 5-17-11 | 4897 | Dyck #2 | 13 | 22 | 2 | Harvey |
| CUSTOMER Lachenmayer oil | | | TRUCK # DRIVER TRUCK # DRIVER 446 Jeff 502 Steve 511 Jacob | | | |
| MAILING ADDRESS PO Box 526 | | | | | | |
| CITY Newton | STATE KS | ZIP CODE 67114 | | | | |
| SAFETY MEETING JS J.S. SS. | | | | | | |

JOB TYPE Surface B HOLE SIZE 12 1/4 HOLE DEPTH 215 CASING SIZE & WEIGHT 8 5/8
 CASING DEPTH 207 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 6.5
 DISPLACEMENT 12.93 DISPLACEMENT PSI 200 MIX PSI 100 RATE 4bpm

REMARKS: Safety meeting, pumped 10 bbl flush, mixed 140 sks class A 3YCC
2 1/2 gal 1/4 lb poly displaced 12 1/2 bbl circulating cement to surface.

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE | TOTAL |
|--------------|-------------------|------------------------------------|-----------------|---------|
| 5401S | 1 | PUMP CHARGE | 275.00 | 275.00 |
| 5406 | 50 | MILEAGE | 4.00 | 200.00 |
| 5407 | 1 | min bulk delivery | 330.00 | 330.00 |
| 1104S | 140 sks | class A | 14.25 | 1995.00 |
| 1102 | 400 lb | calcium chloride | 0.70 | 280.00 |
| 1118B | 300 lb | gel | 0.20 | 60.00 |
| 1102 | 75 lb | poly Flake | 2.22 | 166.50 |
| RECEIVED | | | | |
| AUG 02 2011 | | | | |
| KCC WICHITA | | | Subtotal | 3806.50 |
| | | | SALES TAX | 207.63 |
| | | | ESTIMATED TOTAL | 4014.13 |

Revin 3737

AUTHORIZATION Robert Alexander

241521

TITLE _____

DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.