

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

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

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

8/24/11

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

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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 #:

5-3-10 5-5-10 5-10-10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 019-26990-0000
Spot Description:
SW_NW_NW_SW Sec. 26 Twp. 34 S. R. 10 East West
2,170 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#5
Field Name: Elgin Oil & Gas
Producing Formation: Wayside
Elevation: Ground: 970 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: 1520
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: [Signature] Date: 8/24/10
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Operator Name: Jones & Buck Development Lease Name: Lemmon Well #: JBD#5
 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:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Lenapah Limestone</td> <td>1392</td> <td></td> </tr> <tr> <td>Wayside Sandstone</td> <td>1410</td> <td></td> </tr> <tr> <td>Altamont Limestone</td> <td>1454</td> <td></td> </tr> </table> <p style="text-align: center; font-weight: bold; font-size: 1.2em;">KCC AUG 24 2010 CONFIDENTIAL</p>	Name	Top	Datum	Lenapah Limestone	1392		Wayside Sandstone	1410		Altamont Limestone	1454	
Name	Top	Datum											
Lenapah Limestone	1392												
Wayside Sandstone	1410												
Altamont Limestone	1454												

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"		1520'	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	1414-1426 1434-1438	300 gallons 15% HCL, 5000# 12/20 frac sand,	1414-1426
		300 barrels water	1434-1438

TUBING RECORD: Size: <u>2 3/8"</u>	Set At: <u>1445'</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>5-12-10</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. .50	Gas Mcf trace	Water Bbls. 30
Gas-Oil Ratio		Gravity 40	

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) (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

PHONE: (620) 725-3103

THANKS FOR YOUR BUSINESS!!

Cust No	Job No	Purchase Order	Reference	Terms	Clerk	Date	Time
253636			LEMON NO 15	NET 10TH	SC	5/ 3/10	9:55

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

Ship To:

DOC# 185968
 TERM#552 **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	11.45 /EA	91.60 *

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** AMOUNT CHARGED TO STORE ACCOUNT ** 98.74 TAXABLE 91.60
 NON-TAXABLE 0.00
 (P.J. BUCK) SUBTOTAL 91.60
 TAX AMOUNT 7.14
 TOTAL AMOUNT 98.74

X _____
 Received By

RECEIVED
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 KCC WICHITA



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 # 234144

Invoice Date: 05/07/2010 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 #5
27486
26-34-10
05/05/10

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	1520.00	.20	304.00
T-90 WATER TRANSPORT (CEMENT)	3.00	108.00	324.00
T-93 MIN. BULK DELIVERY	1.00	305.00	305.00

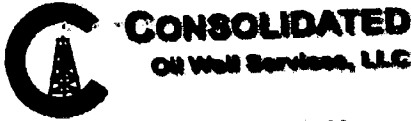
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Amount Due 4882.95 if paid before 05/17/2010

Parts:	3229.30	Freight:	.00	Tax:	203.45	AR	5425.50
Labor:	.00	Misc:	.00	Total:	5425.50		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



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

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 27486
LOCATION Barthesville, OK
FOREMAN Kirk Sanders

#234144

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-5-10	4291	Lemmon JBD #5	26	34	10	CO
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			398	John		
CITY			403 T93	Matt		
STATE			402 T90	Drew		
ZIP CODE						

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 1520' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.8/14.5 SLURRY VOL 1.31/1.45 WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 24.1 DISPLACEMENT PSI 600 MIX PSI 200 RATE 4.5 bpm

REMARKS: Ran gel from to est circ, ran 140sx of 60/40 POZ w/ 2% gel / 5% salt / 5" Kal Seal / .6" Pheno (lead) & 60sx of OWC (tail). Washed out pump & lines, dropped plug & disp. to set. Shut down & washed up.

Plug held — Circ. Cement to Surf. —

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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	1520'	Footage		304.00
5501C	3 hrs.	Transport		324.00
		RECEIVED AUG 24 2010		
1126	60sx	OWC	#	990.00
1131	140sx	60/40 POZ	KCC WICHITA #	1540.00
1107A	120"	Pheno Seal	#	134.40
1118A	700"	Kal Seal	#	280.00
1111	350"	Granulated Selt	#	112.00
1118B	400"	Premium Gal	#	68.00
1123	4200 gal	City Water	#	60.90
4404	1	4 1/2 Rubber Plug	#	44.00
10% Discounted Price \$4,882.95				
			6.3% #	203.45
			SALES TAX ESTIMATED	
			TOTAL	5,425.50

Ravin 3737

AUTHORIZATION

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.