

KANSAS CORPORATION COMMISSION 1072254
OIL & GAS CONSERVATION DIVISION

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 # 33365
 Name: Layne Energy Operating, LLC
 Address 1: P O Box 160
 Address 2: _____
 City: Sycamore State: KS Zip: 67363 + _____
 Contact Person: Victor Dyal
 Phone: (620) 627-2499
 CONTRACTOR: License # 33606
 Name: Thornton Air Rotary, LLC
 Wellsite Geologist: N/A
 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 #: _____

<u>12/3/2010</u>	<u>12/8/2010</u>	<u>12/12/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-205-27888-00-00

Spot Description: _____
NW NE SE SE Sec. 28 Twp. 30 S. R. 14 East West
1200 Feet from North / South Line of Section
400 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

 NE NW SE SWCounty: WilsonLease Name: HUMMER Well #: 16B-28

Field Name: _____

Producing Formation: N/AElevation: Ground: 885 Kelly Bushing: 0Total Depth: 1237 Plug Back Total Depth: 1220Amount of Surface Pipe Set and Cemented at: 40 FeetMultiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 1220feet depth to: 0 w/ 135 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 bblsDewatering method used: Evaporated

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
 Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: Deanna Gerrits Date: 01/24/2012



1072254

Operator Name: Layne Energy Operating, LLC Lease Name: HUMMER Well #: 16B-28
 Sec. 28 Twp. 30 S. R. 14 East West County: Wilson

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
 (If no, Submit Copy)

List All E. Logs Run:

Compensated Density Neutron-sent previously
 Dual Induction-sent previously
 CBL

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 See attached

CASING RECORD New 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	8.625	24	40	Type 1	8	
Production	6.75	4.5	10.5	1220	Thickset	135	

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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	Cattleman	14,500 lbs sand, 500 gallons 15% HCL, and 348 bbls gelled water	1114'-1117' & 1134'-11

TUBING RECORD: Size: <u>2.375</u> Set At: <u>1176'</u> Packer At: _____ Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>12/19/2011</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>7.14</u> Gas Mcf _____ Water Bbls. _____ Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>1114'-1143'</u>
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Summary of Changes

Lease Name and Number: HUMMER 16B-28

API/Permit #: 15-205-27888-00-00

Doc ID: 1072254

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value
Approved By	NAOMI JAMES	Deanna Garrison
Approved Date	04/22/2011	01/24/2012
Completion Or Recompletion Date	12/9/2010	12/12/2011
Date of First or Resumed Production or SWD or Enhr		12/19/2011
Disposition Of Gas - Sold	No	Yes
Elogs_PDF	Compensated Density Neutron	Compensated Density Neutron-sent previously 1220
If Alternate II Completion - Cement Circulated From If Alternate II Completion - Cement Circulated To		0
If Alternate II Completion - Sacks of Cement		135
Liner Run?		No

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
LocationInfoLink	https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=28&t	https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=28&t
Method Of Completion - Perf	No	Yes
Operator's City	MISSION WOODS	Sycamore
Operator's Contact Name	Victoe Dyal	Victor Dyal
Operator's Phone	748-3955	627-2499
Operator's Phone Area Code	913	620
Operator's Street Address - line 1	1900 SHAWNEE MISSION PKWY	P O Box 160
Operator's Zip	66205	67363
Operator's Zip Plus 4	2001	
Perf_Depth_1		1114'-1117' & 1134'-1143'
Perf_Material_1		14,500 lbs sand, 500 gallons 15% HCL, and 348 bbls gelled water
Perf_Record_1		Cattleman
Perf_Shots_1		2

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Producing Method Pumping	No	Yes
Production - Barrels Oil		7.14
Production Interval #1		1114'-1143'
Save Link	../kcc/detail/operatorE ditDetail.cfm?docID=10 54476	../kcc/detail/operatorE ditDetail.cfm?docID=10 72254
Tubing Record - Set At		1176'
Tubing Size		2.375
Well Type	SIOW	OIL