

KANSAS CORPORATION COMMISSION 1074641
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 # 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: Laymon Oil II, LLC

Wellsite Geologist: None

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 #: _____

01/26/2012

01/27/2012

01/31/2012

Spud Date or
Recompletion Date

Date Reached TD

Completion Date or
Recompletion Date

API No. 15 - 15-207-28035-00-00

Spot Description:

SE. NW. SW. SE. Sec. 17 Twp. 24 S. R. 16 East West

825 Feet from North / South Line of Section

2145 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Woodson

Lease Name: Shepard Well #: 25-12

Field Name:

Producing Formation: Squirrel

Elevation: Ground: 1071 Kelly Bushing: 1076

Total Depth: 1100 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: 0
feet depth to: 40 w/ 10 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 80 bbls

Dewatering 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: Deanne Garrison Date: 02/22/2012



1074641

Operator Name: Laymon Oil II, LLC Lease Name: Shepard Well #: 25-12
 Sec. 17 Twp 24 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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name Attached	Top Attached	Datum Attached
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 <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				
Gamma Ray Neutron				

CASING RECORD <input checked="" 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	10.2500	8.6250	24	40	portland	10	
Production	6.1250	2.8750	6.7	1090	common	150	

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: — Perforate — Protect Casing — Plug Back TD — Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives	
-					
-					

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
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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) _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
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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> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion	
Operator	Laymon Oil II, LLC	
Well Name	Shepard 25-12	
Doc ID	1074641	

Tops

Tops		
Soil	0	9
Shale	9	190
Lime	190	280
Shale	280	300
Lime	300	460
Shale	460	480
Lime	480	700
Shale	700	780
Lime	780	820
Shale	820	824
Lime	824	860
Shale	860	900
Lime & Shale	900	990
Shale	990	994
5' Lime	994	1000
Shale	1000	1003
Upper Squirrel Sand	1003	1015
Shale	1015	1048
Cap Rock	1048	1049
Shale	1049	1050
cap Rock	1050	1051
Lower Squirrel Sand	1051	1058
Shale	1058	1100

Jola Auto Parts[®] & Oil Field Supply

210 S. State
Iola, KS 66749
Phone: 620-365-3131
Fax: 620-365-3138

**SALES DELIVERY
PACKING SLIP**

DATE: 1-24-17

CUSTOMER

ACCOUNT #: 12495

SALESMAN: Pete

SOLD TO: Haymon Oil LLC

LOCATION:

ALL Claims and Returned Goods MUST Be Accompanied By This Bill

SIGNATURE

802 N. Industrial Rd.
P.O. Box 664
Iola, 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 wait time for unloading trucks is 6 minutes per yard. A charge will be made for no show 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 MADE IN THE OFFICE BEFORE LOADING STARTS.

The undersigned consents to pay all legal, including reasonable attorneys' fees, incurred in collecting any sums owed.

A deposit will be held without interest for delivery within 30 days of delivery at the rate of 2% per month.

The responsible for Filling Accidents or Damages to Curb or Sidewalks is the Supplier.

A \$5.00 fee will be charged for each credit note issued for a returned check. From 1/44, The Credit Note will be reduced to a returned check.

PROPERTY DAMAGE RELEASE
TO BE SIGNED IF DELIVERY IS TO BE MADE INSIDE CURB LINE.
Dear Customer: The driver of this truck is presenting the RELEASE to you for your signature so the concern that the size and weight of his truck may possibly cause damage to the premises and/or adjacent property if it places the material in this load where you desire it is. 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 the RELEASE releasing him and this supplier from any responsibility from any damage that may occur to the premises and/or adjacent property, buildings, sidewalks, curbs, etc., by the delivery of this material, and that you also agree to help him remove said from the areas of his vehicle so that he will not harm 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 caused by anyone to have any sort of delivery of the 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 _____

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE

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	TIME DUE
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME		DELAY TIME
GRAND TOTAL ►				