



KANSAS CORPORATION COMMISSION 1078867
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 # 31302
Name: Jones & Buck Development, a General Partnership
Address 1: PO BOX 68
Address 2: _____
City: SEDAN State: KS Zip: 67361 + 0068
Contact Person: P.J. Buck
Phone: (620) 725-3636
CONTRACTOR: License # 5831
Name: M.O.K.A.T.
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 #: _____

<u>11/21/2011</u>	<u>11/23/2011</u>	<u>12/10/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-019-27098-00-00
Spot Description: _____
NW SW NW SW Sec. 26 Twp. 34 S. R. 10 East West
1731 Feet from North / South Line of Section
5105 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 #4
Field Name: _____
Producing Formation: Wayside
Elevation: Ground: 955 Kelly Bushing: 957
Total Depth: 1615 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 43 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1467
feet depth to: 0 w/ 150 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 0 ppm Fluid volume: 0 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	
<input checked="" type="checkbox"/> Letter of Confidentiality Received	Date: <u>04/16/2012</u>
<input type="checkbox"/> Confidential Release Date: _____	
<input checked="" type="checkbox"/> Wireline Log Received	
<input type="checkbox"/> Geologist Report Received	
<input type="checkbox"/> UIC Distribution	
ALT <input type="checkbox"/> I <input checked="" type="checkbox"/> II <input type="checkbox"/> III	Approved by: <u>NAOMI JAMES</u> Date: <u>04/16/2012</u>



1078867

Operator Name: Jones & Buck Development, a General Partnership Lease Name: Lemmon Well #: JBD #4

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray/Cement Bond/CCL/VDL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Lenapah Limestone</td> <td>1358</td> <td></td> </tr> <tr> <td>Wayside Sandstone</td> <td>1368</td> <td></td> </tr> <tr> <td>Altamont Limestone</td> <td>1422</td> <td></td> </tr> </table>	Name	Top	Datum	Lenapah Limestone	1358		Wayside Sandstone	1368		Altamont Limestone	1422	
Name	Top	Datum											
Lenapah Limestone	1358												
Wayside Sandstone	1368												
Altamont Limestone	1422												

CASING RECORD <input type="checkbox"/> New <input checked="" 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	8.625	20	43	portland	8	none
Production	6.75	4.50	9.5	1467	thick set	150	phenoseal/kol seal

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	1370-1374	250 gal. 15% HCL acid	1370-1374
2	1377-1381	5700# 20/40 frac sand	1377-1381
2	1388-1392	300# 12/20 frac sand	1388-1392

TUBING RECORD:	Size: <u>2.375</u>	Set At: <u>1395</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. <u>12/10/2011</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
Estimated Production Per 24 Hours	Oil Bbls. <u>3</u>	Gas Mcf <u> </u>	Water Bbls. <u>20</u>	Gas-Oil Ratio <u> </u>	Gravity <u>36</u>

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)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

April 16, 2012

P.J. Buck
Jones & Buck Development, a General
Partnership
PO BOX 68
SEDAN, KS 67361-0068

Re: ACO1
API 15-019-27098-00-00
Lemmon JBD #4
SW/4 Sec.26-34S-10E
Chautauqua County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
P.J. Buck

ACKARMAN HARDWARE and LUMBER CO
 160 EAST MAIN STREET
 SEDAN, KS 67361

PAGE NO 1

PHONE: (620) 725-3103

THANKS FOR YOUR BUSINESS!!

Cust No	Job No	Purchase Order	Reference	Terms	Clerk	Date	Time
253636			LEMON 4	NET 10TH	SC	11/21/11	2:45

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

Ship To:

DOC# K08587
 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	10.95 /EA	87.60 *

** AMOUNT CHARGED TO STORE ACCOUNT ** 96.18 TAXABLE 87.60
 NON-TAXABLE 0.00
 (P.J. BUCK) SUBTOTAL 87.60
 TAX AMOUNT 8.58
 TOTAL AMOUNT 96.18

x Manual Signature

Received By



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 # 246112

Invoice Date: 11/28/2011 Terms: 10/10/30,n/30

Page 1

J. B. D. & P. J. BUCK
P.O. BOX 68
SEDAN KS 67361
(620)725-3636

LEMMON JBD #4
32524
11/25/11
26-34S-10E
KS

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	150.00	18.3000	2745.00
1107A	PHENOSEAL (M) 40# BAG)	80.00	1.2200	97.60
1110A	KOL SEAL (50# BAG)	900.00	.4400	396.00
1118B	PREMIUM GEL / BENTONITE	300.00	.2000	60.00
1123	CITY WATER	7560.00	.0156	117.94
4404	4 1/2" RUBBER PLUG	1.00	43.0000	43.00

Sublet Performed	Description	Total
9999-240	CASH DISCOUNT	-241.44
9999-240	CASH DISCOUNT	-345.95

Description	Hours	Unit Price	Total
T-97 WATER TRANSPORT (CEMENT)	3.00	112.00	336.00
492 CEMENT PUMP	1.00	975.00	975.00
492 EQUIPMENT MILEAGE (ONE WAY)	45.00	4.00	180.00
492 CASING FOOTAGE	1467.00	.20	293.40
EARLT 80 BBL VACUUM TRUCK (CEMENT)	3.00	100.00	300.00
518 MIN. BULK DELIVERY	1.00	330.00	330.00

Amount Due 6161.09 if paid after 12/28/2011

Parts:	3459.54	Freight:	.00	Tax:	258.44	AR	5544.99
Labor:	.00	Misc:	.00	Total:	5544.99		
Sublt:	-587.39	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK 918/338-0808 EL DORADO, KS 316/322-7022 EUREKA, KS 620/583-7664 PONCA CITY, OK 580/762-2303 OAKLEY, KS 785/672-2227 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 GILLETTE, WY 307/686-4914



CONSOLIDATED
Oil Well Services, LLC

#246112

TICKET NUMBER 32524
LOCATION Buile
FOREMAN Jason Bell

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
11-25-11	4391	Lammon JBD #4	26	S 4s	10E	CO
CUSTOMER J.B.D.			TRUCK #			
MAILING ADDRESS			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
			DRIVER			

JOB TYPE L.S. HOLE SIZE 6 3/4 HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2
CASING DEPTH 1467 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 13.7 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT 23.3 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Run tests of established circulation. Run 150SES down at thickset cement. Shut down washed line clean. Dropped plug and displaced to bottom plug landed and held at 1800 psi.
- Cement circulated to surface -

Quality Meeting
J. Bell

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975.00
5406	45	MILEAGE		180.00
5407	1	bulk truck		330.00
5402	1467	footage		293.40
5501c	3 hrs	transport		336.00
5502c	3 hrs	90 min		300.00
1126A	150SES	thickset		2745.00
1107a	80#	Pheno		92.60
1110A	900#	Kalsol		396.00
1118b	300#	Gel		60.00
1123	7560 gal	City Water		117.94
4404	1	1/2 Plug		43.00
		1070 hrs work if paid in 30 days = 619.57		
		5544.99		
		4.3%	SALES TAX	259.44
			ESTIMATED TOTAL	6161.09

Rev'n 3737

AUTHORIZATION John Zarnath 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.

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



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April 16, 2012

P.J. Buck
Jones & Buck Development, a General
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PO BOX 68
SEDAN, KS 67361-0068

Re: ACO-1
API 15-019-27098-00-00
Lemmon JBD #4
SW/4 Sec.26-34S-10E
Chautauqua County, Kansas

Dear P.J. Buck:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 11/21/2011 and the ACO-1 was received on April 16, 2012 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department