



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

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: PO BOX 160 Address 2: City: SYCAMORE State: KS Zip: 67363 Contact Person: Victor H Dyal Phone: (620) 627-2499 CONTRACTOR: License # 33606 Name: Thornton Air Rotary, LLC Wellsite Geologist: N/A Purchaser:

Designate Type of Completion: [X] New Well [ ] Re-Entry [ ] Workover [X] Oil [ ] WSW [ ] SWD [ ] SLOW [ ] 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 #:

03/06/2012 03/07/2012 04/10/2012 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-125-32162-00-00 Spot Description: SE NE NW SW Sec. 30 Twp. 32 S. R. 14 [X] East [ ] West 2130 Feet from [ ] North / [X] South Line of Section 1175 Feet from [ ] East / [X] West Line of Section Footages Calculated from Nearest Outside Section Corner: [ ] NE [ ] NW [ ] SE [X] SW County: Montgomery Lease Name: Gartner Well #: 12H-30 Field Name: Sorghum Hollow Producing Formation: Weiser Elevation: Ground: 856 Kelly Bushing: 0 Total Depth: 1187 Plug Back Total Depth: 1178 Amount of Surface Pipe Set and Cemented at: 22 Feet Multiple Stage Cementing Collar Used? [ ] Yes [X] No If yes, show depth set: Feet If Alternate II completion, cement circulated from: 1178 feet depth to: 0 w/ 125 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 [X] Letter of Confidentiality Received Date: 06/12/2012 [ ] Confidential Release Date: [X] Wireline Log Received [ ] Geologist Report Received [ ] UIC Distribution ALT [ ] I [X] II [ ] III Approved by: NACMI JAMES Date: 06/18/2012