

KANSAS CORPORATION COMMISSION 1089711
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

<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> WSW	<input type="checkbox"/> SWD	<input type="checkbox"/> SIOW
<input type="checkbox"/> Gas	<input type="checkbox"/> D&A	<input type="checkbox"/> ENHR	<input type="checkbox"/> SIGW
<input type="checkbox"/> OG	<input type="checkbox"/> GSW	<input type="checkbox"/> Temp. Abd.	
CM (Coal Bed Methane)			
Cathodic <input type="checkbox"/> Other (Core, Expl., etc.): _____			

If Workover/Re-entry: Old Well Info as follows:

Operator: Laymon Oil II LLC

Well Name: Kee 25 C

Original Comp. Date: 12/31/1974 Original Total Depth: 1031

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 #: _____

08/01/2012 08/01/2012 08/01/2012

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-207-20755-00-01

Spot Description: _____

E2 SW NW SE Sec. 18 Twp. 25 S. R. 16 East West
1650 Feet from North / South Line of Section
2280 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Woodson

Lease Name: KEE TOM Well #: 25 C

Field Name: _____

Producing Formation: Squirrel

Elevation: Ground: 1037 Kelly Bushing: 1042

Total Depth: 1031 Plug Back Total Depth: 1025

Amount of Surface Pipe Set and Cemented at: 75 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx crnt.

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 #: _____

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 Gantner Date: 08/13/2012

