

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 5056
Name: F.G. Holl Company, L.L.C.
Address: 9431 E. Central, P.O. BOX 780167
City/State/Zip: Wichita, Kansas 67278-0167
Purchaser: NCRA
Operator Contact Person: Franklin R. Greenbaum
Phone: (316) 684-8481
Contractor: Name: L.D. Drilling, Inc.
License: 6039
Wellsite Geologist: Kim Shoemaker

Designate Type of Completion:

New Well Re-Entry Workover
 Oil SWD SIW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc.)

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

Operator: F.G. Holl Company, L.L.C.

Well Name: WILSON-TRUST 1-24

Original Comp. Date: 10/11/2002 Original Total Depth: 3675'

Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

RU:02/06/2003 08/30/2002 02/12/2003
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15. 185-23-163-000-1

County: Stafford

E/2 E/2 NW Sec. 24 Twp. 21 S. R. 12 East West

1320 feet from S 1/4 (circle one) Line of Section

2210 feet from E 1/4 (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: WILSON-TRUST "OWO" Well #: 1-24

Field Name: Steve

Producing Formation: Viola & Arbuckle

Elevation: Ground: 1821' Kelly Bushing: 1826'

Total Depth: 3675' Plug Back Total Depth: 3622'

Amount of Surface Pipe Set and Cemented at 255' 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 cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 37,000 ppm Fluid volume 1,000 bbls

Dewatering method used Hauled Free Fluids to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: Paul's Oilfield Service

Lease Name: Stargel SWD License No.: 31085

Quarter NE Sec. 4 Twp. 22 S. R. 12 East West

County: Stafford Docket No.: D-21,908

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Franklin R. Greenbaum

Signature: Franklin R. Greenbaum Date: 05/01/2003
 Title: Exploration Manager Date: 05/01/2003

Subscribed and sworn to before me this 1st day of May, 2003,

Betty B. Herring
Betty B. Herring

Notary Public: _____

Date Commission Expires: 04/30/2006

KCC Office Use ONLY

N Letter of Confidentiality Attached

If Denied, Yes Date: _____

N Wireline Log Received

N Geologist Report Received

N UIC Distribution

Operator Name: F.G. Holl Company, L.L.C.

Lease Name: WILSON-TRUST

Well #: 1-24

Sec. 24 Twp. 21 S. R. 12

 East West

County: Stafford

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	See original
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
List All E. Logs Run:		
DIL/CNL-CDL/MEL/BHCS		

CASING RECORD <input checked="" 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	12-1/4"	8-5/8"	23#	255'KB	60/40 Pozmi	275sx	2% gel, 3% cc
Production	7-7/8"	5-1/2"	14#	3464'KB	50/50 Pozm	150sx	2 Holl

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 (Amount and Kind of Material Used)	Depth
4 SPF	3478' - 3492' Viola	Treat w/ 1000 gal 7-1/2% DSFE	
	3556' - 3612' Arbuckle (old zone)	Retreat w/ 3500 gal 15% FE acid	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	2-7/8"					

Date of First, Resumed Production, SWD or Enhr.	Producing Method	<input type="checkbox"/> Flowing	<input checked="" type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift	<input type="checkbox"/> Other (Explain)
02/12/2003					

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	1.72			41		

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Sumit ACO-18)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	3556- 3612' Arbuckle