

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 30076
 Name: Andy Anderson dba: A & A PRODUCTION
 Address: PO BOX 100
 City/State/Zip: HILL CITY KS 67642
 Purchaser: _____
 Operator Contact Person: ANDY ANDESON
 Phone: (785) 421-6266
 Contractor: Name: HT OIL LLC
 License: 32890
 Wellsite Geologist: KITT NOAH
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
 06-10-04 6-16-04 6-16-04
 Spud Date or ~~06-17-04~~ ~~06-17-04~~
 Recompletion Date Date Reached TD Completion Date or
 Recompletion Date

API No. 15 - 065-22972-00-00
 County: GRAHAM
E/2 E/2 NW Sec. 2 Twp. 9 S. R. 23 East West
1280 feet from S (N) (circle one) Line of Section
2300 feet from E (W) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE (NW) SW
 Lease Name: AMBROSIER Well #: 1
 Field Name: _____
 Producing Formation: _____
 Elevation: Ground: 2216 Kelly Bushing: _____
 Total Depth: 3770 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 206'@ 211' W/ 160 SACKS 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 12,000 ppm Fluid volume 380 bbls
 Dewatering method used EVAPORATE
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

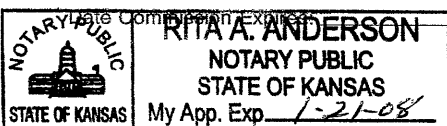
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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.

Signature: Andy Anderson
 Title: OPERATOR Date: 06-22-04
 Subscribed and sworn to before me this 22 day of June,
 20 04.
 Notary Public: Rita A. Anderson

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



Jan 21, 2008