

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 3842
LARSON OPERATING COMPANY
 Name: A DIVISION OF LARSON ENGINEERING, INC.
 Address: 562 WEST HIGHWAY 4
 City/State/Zip: OLMITZ, KS 67564-8561
 Purchaser: _____
 Operator Contact Person: TOM LARSON
 Phone: (620) 653-7368
 Contractor: Name: SUMMIT DRILLING
 License: 30141
 Wellsite Geologist: TIM HEDRICK
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp Abd.
 Gas ENHR SIGW
 Dry PIPELINE CONNECTION
 Other DELAYED COMPLETION WAITING ON

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. _____

7/21/2004 7/26/2004 DELAYED
 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date
COMPLETION

API No. 15 - 053-21129-0000
 County: ELLSWORTH
 APP E/2 SW NW Sec. 17 Twp. 16 S. R. 7 East West
1900 feet from NORTH of Section
990 feet from WEST of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE **NW** SW
 Lease Name: HOFFMAN Well #: 1-17
 Field Name: WILDCAT
 Producing Formation: DELAYED COMPLETION
 Elevation: Ground: 1560' Kelly Bushing: 1570'
 Total Depth: 2200 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 270 Feet
 Multiple State 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 _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 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 information shall be filed with the Kansas Corporation Commission, 130 South 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 on 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: Thomas Hortal
 Title: SR. GEOLOGIST Date: 11/16/2004
 Subscribed and sworn to before me this 16TH day of NOVEMBER,
2004.
 Notary Public: Laura E. Alarid
 Date Commission Expires: 2005
LAURA E. ALARID
NOTARY PUBLIC
STATE OF COLORADO
 My Commission Expires 03/28/2005

KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution