

CONFIDENTIAL

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

RECEIVED
KANSAS CORPORATION COMMISSION

WELL HISTORY - DESCRIPTION OF WELL & LEASE

DEC 01 2005

Operator: License # 3842
LARSON OPERATING COMPANY
Name: A DIVISION OF LARSON ENGINEERING, INC.
Address: 562 WEST STATE ROAD 4
City/State/Zip: OLMITZ, KS 67564-8561
Purchaser: NCRA, ONEOK
Operator Contact Person: TOM LARSON
Phone: (620) 653-7368
Contractor: Name: DUKE DRILLING CO., INC.
License: 5929
Wellsite Geologist: THOMAS BLAIR

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. _____

8/3/2005 8/12/2005 10/3/2005
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 007-22908-00-00 CONSERVATION DIVISION
County: BARBER WICHITA, KS

S/2 SW SW Sec. 4 Twp. 32 S. R. 15 East West
330 feet from SOUTH Line of Section
660 feet from WEST Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: MARSH Well #: 1-4

Field Name: WILDCAT

Producing Formation: MISSISSIPPIAN

Elevation: Ground: 2028' Kelly Bushing: 2039'

Total Depth: 5010' Plug Back Total Depth: 4975'

Amount of Surface Pipe Set and Cemented at 336 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 9500 ppm Fluid volume 1800 bbls

Dewatering method used REMOVED FREE FLUIDS

Location of fluid disposal if hauled offsite: _____

Operator Name: OIL PRODUCERS, INC. OF KANSAS

Lease Name: RICH #9 SWD License No.: 8061

Quarter SE Sec. 22 Twp. 32 S. R. 19 East West

County: COMANCHE Docket No.: 28,178

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: Carol Parsons


Title: SECRETARY/TREASURER Date: 11/30/2005

Subscribed and sworn to before me this 30TH day of NOVEMBER,
2005.

Notary Public: Debra J. Ludwig

Date Commission Expires: MAY 5, 2008

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

 **DEBRA J. LUDWIG**
Notary Public - State of Kansas
My Appt. Expires 5/5/2008