

CONFIDENTIAL

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

RECEIVED
KANSAS CORPORATION COMMISSION
Form ACO-1
September 1999
Must Be Typed

JUN 05 2006

ORIGINAL

Operator: License # 3842
Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC.
Address: 562 WEST STATE ROAD 4
City/State/Zip: OLMITZ, KS 67564-8561 **KCC**
Purchaser: _____
Operator Contact Person: TOM LARSON
Phone: (620) 653-7368
Contractor: Name: SOUTHWIND DRILLING, INC.
License: 33350
Wellsite Geologist: ROBERT LEWELLYN

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. _____

2/4/2006 2/18/2006 2-19-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 135-24452-0000
County: NESS
220' N OF C N/2 Sec. 30 Twp. 18 S. R. 26 East West
1100 feet from NORTH Line of Section
2640 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: DELANEY Well #: 1-30
Field Name: WILDCAT
Producing Formation: _____
Elevation: Ground: 2644' Kelly Bushing: 2654'
Total Depth: 4685' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 260 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 ALLOWED TO DRY
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 Larson
Title: PRESIDENT Date: 6/2/2006

Subscribed and sworn to before me this 2ND day of JUNE,
2006.

Notary Public: Carol S. Larson

Date Commission Expires: CAROL S. LARSON
Notary Public - State of Kansas
My Appt. Expires 6-25-2009

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