

**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 # 6039
Name: L. D. DRILLING, INC.
Address: 7 SW 26 AVE.
City/State/Zip: GREAT BEND, KS 67530
Purchaser: NCRA
Operator Contact Person: L. D. DAVIS
Phone: (620) 793-3051
Contractor: Name: SHIELDS DRILLING CO., INC.
License: 5184
Wellsite Geologist: BOB SCHREIBER

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. _____

11/21/05 12/03/05 12/26/05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 009-24886-0000
County: BARTON
130S - W/2 - NW - NE Sec. 32 Twp. 16 S. R. 13 East West
790 feet from S (circle one) Line of Section
2310 feet from (circle one) E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE SE NW SW
Lease Name: MATER Well #: 1
Field Name: TRAPP
Producing Formation: KANSAS CITY
Elevation: Ground: 1925' Kelly Bushing: 1930'
Total Depth: 3430' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 409 Feet
Multiple Stage Cementing Collar Used? Yes No
If Alternates, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.
ALT I W/AM 6-29-06

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.: _____

ORIGINAL

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: Bessie Dewhuff
Title: SECRETARY/TREASURER Date: 1-31-06
Subscribed and sworn to before me this 31 day of January,
2006
Notary Public: Rashell Patten
Date Commission Expires: 2-02-07

KCC Office Use ONLY

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

NOTARY PUBLIC - STATE OF KANSAS
Rashell Patten
MY APPL. EXP. 2-2-07

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Operator Name: L. D. DRILLING, INC. Lease Name: MATER Well #: 1
 Sec. 32 Twp. 16 S. R. 13 East West County: BARTON

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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)
 List All E. Logs Run:

| Name | Top | Datum |
|---------------|------|-------|
| ANHYDRITE | 852 | +1078 |
| HOWARD | 2730 | -800 |
| HEEBNER | 3038 | -1108 |
| BROWN LIME | 3118 | -1188 |
| L KANSAS CITY | 3125 | -1195 |
| BASE KANSAS | 3347 | -1417 |
| BUCKLE | 3354 | -1424 |
| QUARTZITE | 3402 | -1472 |

ORIGINAL

RADIATION GUARD LOG
 SONIC CEMENT BOND LOG

| CASING RECORD <input checked="" type="checkbox"/> New <input 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# | 409' | COMMON | 250 | 2%GEL, 3% CC |
| PRODUCTION | 7 7/8" | 4 1/2" | 10.5# | 3428' | AA-2 | 150 | |
| RATHOLE | | | | | 60/40 POZMIX | 25 | |

| 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 |
|----------------|---|---|-------|
| 2 | 3156 - 3164 | 2000 GAL 28% | |
| 2 | 3207 - 3212 | | |
| 2 | 3277 - 3282 | | |
| 2 | 3320 - 3324 | | |

| TUBING RECORD | Size | Set At | Packer At | Liner Run |
|--|---|---------|-------------|---|
| | 2 3/8" | 3425' | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumerd Production, SWD or Enhr. | Producing Method | | | |
| 1-01-06 | <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | | | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio Gravity |
| | 15 | | 15 | |

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval

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As consideration, the Customer agrees:

a) To pay ACID SERVICES, LLC in accord with the rates and terms stated in ACID SERVICES, LLC's current price list. Invoices are payable NET 30 after date of invoice. Upon Customers' default payment of Customer's account by the last day of the month following the month in which the invoice is dated, Customer agrees to pay interest thereon after default at the highest lawful contract rate applicable but never to exceed 18% per annum. In the event it becomes necessary to employ attorneys to enforce collection of said account, Customer agrees to pay all collection cost and attorney fees in the amount of the unpaid account.

b) To defend, indemnify, release and hold harmless ACID SERVICES, LLC, its divisions, subsidiaries, parent and affiliated companies and the officers, directors, employees, agents and servants of all of them from and against any claims, liability, expenses, attorney's fees, and costs of defense to the extent permitted by law for:

1. Damage to property owned by, in the possession of, or leased by Customer, and/or the well owner (if different from Customer), including, but not limited to, surface and subsurface damage. The term "well owner" shall include working and royalty interest owners.
2. Reservoir, formation, or well loss or damage, subsurface trespass or any action in the nature thereof.
3. Personal injury of death or property damage (including, but not limited to, damage to the reservoir, formation or well), or any damages whatsoever, growing out of or in any way connected with or resulting from pollution, subsurface pressure, losing control of the well and/or a well blowout or the use of radioactive material. The amount of this invoice is due and payable at ACID SERVICES, LLC, Dept. No. 1131, Tulsa, Oklahoma 74182. All terms of the Service Order with customer are incorporated herein and made a part hereof by reference.

The defense, indemnity, release and hold harmless obligations of Customer provided for in this Section b) and Section c) below shall apply to claims or liability even if caused or contributed to by ACID SERVICES, LLC's negligence, strict liability, or operated, or furnished by ACID SERVICES, LLC or any defect in the data, products, supplies, materials, or equipment of ACID SERVICES, LLC whether the preparation, design, manufacture, distribution, or marketing thereof, or from a failure to warn any person of such defect. Such defense, indemnity, release and hold harmless obligations of Customer shall not apply where the claims or liability are caused by the gross negligence or willful misconduct of ACID SERVICES, LLC. The term "ACID SERVICES, LLC" as used in said Sections b) and c) shall mean ACID SERVICES, LLC, its divisions, subsidiaries, parent and affiliated companies, and the officers, directors, employees, agents and servants of all of them.

c) That because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others, ACID SERVICES, LLC is unable to guarantee the effectiveness of the products, supplies, or materials, nor the results of any treatment or service, nor the accuracy of any chart interpretation, research analysis, job recommendation or other data furnished by ACID SERVICES, LLC. ACID SERVICES, LLC personnel will use their best efforts in gathering such information and their best judgment in interpreting it, but Customer agrees that ACID SERVICES, LLC shall not be liable for and Customer shall indemnify ACID SERVICES, LLC against any damages from the use of such information.

d) That ACID SERVICES, LLC warrants only title to the products, supplies, and materials and that the same are free from defects in workmanship and materials. THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED OF MERCHANTABILITY, FITNESS OR OTHERWISE WHICH EXTEND BEYOND THOSE STATED IN THE IMMEDIATELY PRECEDING SENTENCE. Acid Services LLC's liability and Customer's exclusive remedy in and cause of action (whether in contract, tort, breach of warranty or otherwise) arising out of the sale or use of any products, supplies or materials in expressly limited to the replacement of such products, supplies or materials on their return to ACID SERVICES, LLC or, at ACID SERVICES, LLC's option, to the allowance to the Customer of credit for the cost of such items. In no event shall ACID SERVICES, LLC be liable for special, incidental, indirect, punitive or consequential damages.

e) To waive the provisions of the Deceptive Trade Practices - Consumer Protection Act, to the extent permitted by law. We certify that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of goods and/or with respect to service furnished under this contract.

f) That this contract shall be governed by the law of the state where services are performed or materials are furnished.

g) That ACID SERVICES, LLC shall not be bound by any changes or modifications in this contract, except where such change or modification is made in writing by a duly authorized manager of ACID SERVICES, LLC.

ALLIED CEMENTING CO., INC.

22608

Federal Tax I.D.# [REDACTED]

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Wheat Bend

ORIGINAL

| | | | | | | | |
|--------------------------------|----------------|-----------------------------------|------------------|---------------------------|--------------------------|--------------------------|---------------------------|
| DATE <u>11-22-05</u> | SEC. <u>32</u> | TWP. <u>16</u> | RANGE <u>13W</u> | CALLED OUT <u>9:30 AM</u> | ON LOCATION <u>11 AM</u> | JOB START <u>1:00 PM</u> | JOB FINISH <u>2:30 PM</u> |
| LEASE <u>Mater</u> | WELL# <u>1</u> | LOCATION <u>Susan 1 1/2 W S15</u> | | | COUNTY <u>Barton</u> | STATE <u>K.S.</u> | |
| OLD OR <u>NEW</u> (Circle one) | | | | | | | |

CONTRACTOR Shields

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 415 ft

CASING SIZE 2 1/4" # 8 3/4 DEPTH 412 ft

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15 ft

PERFS. _____

DISPLACEMENT 25 bbl

OWNER _____

CEMENT

AMOUNT ORDERED 250 Common
38 cc 20 gal

| | | | | |
|----------|----------------|---|--------------|----------------|
| COMMON | <u>250 net</u> | @ | <u>8.70</u> | <u>2175.00</u> |
| POZMIX | | @ | | |
| GEL | <u>5 net</u> | @ | <u>14.00</u> | <u>70.00</u> |
| CHLORIDE | <u>8 net</u> | @ | <u>38.00</u> | <u>304.00</u> |
| ASC | | @ | | |

EQUIPMENT

| | |
|-------------------------|-------------------------|
| PUMP TRUCK # <u>120</u> | CEMENTER <u>Mike M.</u> |
| BULK TRUCK # <u>342</u> | HELPER <u>J.D. D.</u> |
| BULK TRUCK # _____ | DRIVER <u>Steve T.</u> |
| BULK TRUCK # _____ | DRIVER _____ |

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| | | | | |
|----------|----------------|---|--------------|----------------|
| HANDLING | <u>263 net</u> | @ | <u>1.60</u> | <u>420.80</u> |
| MILEAGE | <u>263 net</u> | @ | <u>06 18</u> | <u>284.04</u> |
| TOTAL | | | | <u>3253.84</u> |

REMARKS:

Circulate Hole with Rig mud pump
Mix Cement + Release Plug Displace
Plug Down with water

Cement did circulate to
surface

SERVICE

| | | | | |
|-------------------|---------------|---|-------------|---------------|
| DEPTH OF JOB | <u>412 ft</u> | | | |
| PUMP TRUCK CHARGE | | | | <u>670.00</u> |
| EXTRA FOOTAGE | <u>212'</u> | @ | <u>55</u> | <u>116.60</u> |
| MILEAGE | <u>18</u> | @ | <u>5.00</u> | <u>90.00</u> |
| MANIFOLD | | @ | | |
| TOTAL | | | | <u>876.60</u> |

CHARGE TO: Palamino

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

| | | | | |
|----------------------|---|--------------|--------------|--------------|
| 1-8 3/8 Two Cup Plug | @ | <u>55.00</u> | <u>55.00</u> | |
| TOTAL | | | | <u>55.00</u> |

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Burton Beery

Burton Beery
PRINTED NAME

Thank you 495

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.