

1-5-08

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 30076
 Name: A & A PRODUCTION
 Address: PO BOX 100
 City/State/Zip: HILL CITY KS 67642
 Purchaser: _____
 Operator Contact Person: ANDY ANDERSON
 Phone: (785) 421-2234
 Contractor: Name: ANDERSON DRILLING
 License: 33237
 Wellsite Geologist: MARK TORR
 Designate Type of Completion:
 _____ New Well _____ Re-Entry _____ Workover
 Oil _____ SWD _____ SIOW _____ 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. _____

<u>12-09-06</u>	<u>12-16-06</u>	<u>12-17-06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

KCC
JAN 05 2007
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API No. 15 - 065-23257-00-00
 County: GRAHAM
SW SE NE NW Sec. 26 Twp. 8 S. R. 21 East West
1180 feet from S / (circle one) Line of Section
2090 feet from E / (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: BERLAND TRUST Well #: 1
 Field Name: WILDCAT
 Producing Formation: _____
 Elevation: Ground: 2083' Kelly Bushing: _____
 Total Depth: 3745 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 218 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 _____ 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 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: 12-20-06
 Subscribed and sworn to before me this 20th day of December,
 2006.

Notary Public: Rita A. Anderson
 Date Commission Expires: January 21, 2008
 STATE OF KANSAS
 My Exp. 1-21-08

KCC Office Use ONLY

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

RECEIVED
 KANSAS CORPORATION COMMISSION
 JAN 08 2007

CONSERVATION DIVISION
WICHITA, KS