

**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

**ORIGINAL**

Operator: License # 33550  
 Name: Relative Energy, Inc.  
 Address: 213 N.3rd, Lindsborg KS 67456  
 City/State/Zip: \_\_\_\_\_  
 Purchaser: NCRA  
 Operator Contact Person: Mark Casebeer  
 Phone: ( 620 ) 242-7766, 785-227-2886  
 Contractor: Name: Scott's Well Service, Inc.  
 License: 6819  
 Wellsite Geologist: N/A

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: DaMac Drilling/Diversified Land & Exploration  
 Well Name: Nelson #1

Original Comp. Date: 5/12/1986 Original Total Depth: 3575  
 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. \_\_\_\_\_

5-3-05  
~~5/5/1986~~ 5/12/1986 5/17/05  
 Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 113-21,176 -00-01  
 County: McPherson  
 \_\_\_\_\_ SW Sec. 18 Twp. 17 S. R. 3  East  West  
1320 feet from (S) N (circle one) Line of Section  
1320 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE NW (SW)  
 Lease Name: Nelson Well #: 1  
 Field Name: Lindsborg  
 Producing Formation: Maquoketa Dolomite

Elevation: Ground: 1342 Kelly Bushing: 1351  
 Total Depth: 3575 Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at 391 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.  
ALT I WITHM 1-17-07

**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.: \_\_\_\_\_

**RECEIVED  
MAY 23 2005  
KCC WICHITA**

**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: Mark Casebeer  
 Title: President Date: 5/18/05  
 Subscribed and sworn to before me this 18 day of May  
05  
 Notary Public: Gaylene Butler  
 Date Commission Expires: 10/24/08

**NOTARY PUBLIC  
STATE OF KANSAS  
Gaylene Butler  
My Appt Expires 10/24/08**

**KCC Office Use ONLY**

NO Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: Relative Energy, Inc. Lease Name: Nelson Well #: 1  
 Sec. 18 Twp. 17 S. R. 3  East  West County: McPherson

**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 <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets)  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy)  List All E. Logs Run: <u>Bond Log</u> <u>Gamma Ray Neutron</u>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <u>Maquoketa Dolomite</u> <u>3374</u> <u>-2032</u>
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**KCC WICHITA**

CASING RECORD <input 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
<b>Conductor</b>	17 1/2	13 3/8	68	126	60/40Poz	135	3%CC
<b>Surface</b>	12 1/4	8 5/8	20	393	60/40Poz	195	3%CC
<b>Production</b>	7 7/8	4 1/2	14	3574	Com	100	

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
4	Maq.Dol.-3374-3384	350 gals 15% mud acid & additives	

TUBING RECORD		Size <b>2 3/8</b>	Set At <b>3362</b>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls. <b>15</b>	Gas Mcf	Water Bbls. <b>35</b>	Gas-Oil Ratio	Gravity

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

METHOD OF COMPLETION

Production Interval  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_