

**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 26th Avenue
 City/State/Zip: Great Bend, KS 67530
 Purchaser: NCRA
 Operator Contact Person: L. D. Davis
 Phone: (620) 793-3051
 Contractor: Name: Southwind Drilling, Inc.
 License: #33350
 Wellsite Geologist: Kim Shoemaker
 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>3-24-04</u>	<u>3-31-04</u>	<u>4-6-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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API No. 15 - 009-24787-00-00
 County: Barton
SE NE NE Sec. 12 Twp. 18 S. R. 14 East West
4290 feet from (S) N (circle one) Line of Section
330 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: Don Well #: 2
 Field Name: Boyd
 Producing Formation: Arbuckle
 Elevation: Ground: 1838' Kelly Bushing: 1848'
 Total Depth: 3334' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 823 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: ALT I WITHIN 10-16-06
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

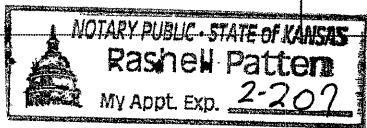
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202. within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Bessie Dewarff
 Title: Secretary/Treasurer Date: 5-25-04
 Subscribed and sworn to before me this 25th day of May,
20 04.
 Notary Public: Rashell Patten
 Date Commission Expires: 2/2/07

KCC Office Use ONLY

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



X

Operator Name: L. D. Drilling, Inc. Lease Name: Don Well #: 2
 Sec. 12 Twp. 18 S. R. 14 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:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

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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
Surface	12 1/4"	8 5/8" (used)	24#	823'	A-con 60/40	190 150	3% cc 3% cc
Production		5 1/2" (new)	14#	3331'	Poz 50/50	125 15 RH	10% salt, 5# Gll, 3 FR .8 FLA

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
1.32	4" HEC	3331-3334	250 Gal 15% NEFE	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 7/8	3330'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First Resumerd Production, SWD or Enhr.			Producing Method		
4-13-04			<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
	20		0		

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify) _____

METHOD OF COMPLETION _____

Production Interval _____

TREATMENT REPORT



Customer ID		Date	
Customer <i>L.D. Dalg</i>		<i>3-25-04</i>	
Lease <i>Don</i>	Lease No.	Well # <i>2</i>	

Field Order # <i>8392</i>	Station <i>Pratt KS</i>	Casing <i>8 5/8</i>	Depth <i>823</i>	County <i>Barton</i>	State <i>KS</i>
Type Job <i>Surface New Well</i>			Formation	Legal Description <i>12-18s-14w</i>	

PIRE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>8 5/8</i>	Tubing Size	Shots/Ft <i>2,54 ft³</i>	<i>12.0 ppg</i>	Acid <i>190 sk. A-Con 3% PC</i>	Pre Pad	RATE	PRESS <i>500</i>	ISIP
Depth <i>803</i>	Depth <i>PBTD</i>	From	To	Max				5 Min.
Volume <i>51</i>	Volume	From <i>1.25 ft³</i>	To <i>14.5 ppg</i>	Pad <i>150 sk. 60-40 p02</i>	Min <i>3% PC</i>			10 Min.
Max Press <i>500</i>	Max Press	From	To	Frac	Avg			15 Min.
Well Connection	Annulus Vol.	From	To	<i>85.9 + 33.3 =</i>		HHP Used <i>119 Bbl. sl</i>		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume			Total Load

Customer Representative <i>Darby Krier</i>	Station Manager <i>Dave Austry</i>	Treater <i>D. Scott</i>
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>1330</i>					<i>On hoc w/ Trki Safety mtg</i>
					<i>Csg on Bottom Circ^u/Rig</i>
<i>1523</i>	<i>200</i>		<i>85.9</i>	<i>6</i>	<i>St mixing head Amt @ 12.0 ppg 190s</i>
<i>1537</i>	<i>150</i>		<i>33.3</i>	<i>5</i>	<i>St mixing Tail Amt @ 14.5 ppg 150s</i>
<i>1545</i>	<i>⊖</i>				<i>Chose In & Release Top wood Plu</i>
<i>1547</i>	<i>100</i>			<i>5</i>	<i>St Disp w/ H₂O</i>
<i>1555</i>	<i>400</i>		<i>51</i>	<i>⊖</i>	<i>Disp In Chose In manifold</i>
					<i>Circ 20 Bbli Amt = 40 ski</i>
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					<i>Job Complete</i>
					<i>Thank you Scotty</i>



INVOICE NO.
Date 3-25-04
Customer ID

Subject to Correction
Lease Don
County Barton

FIELD ORDER 8392
Well # 2
State KS
Legal 12-185-14w
Station Pratt KS

CHARGE

Depth
Casing 8 5/8
Customer Representative Daryl Krier

Formation TP = 823' 24" ppf
Casing Depth 823
TD 825
Treater D. Scott

Shoe Joint 20' Requested
Job Type Surface N.W.

AFE Number
PO Number

Materials Received by X Daryl Krier

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
D263	130 sk.	60-40 por Common				
D261	190 sk.	A-Con Cmt Common				
C310	924 Lbs	Calcium Chloride				
F163	1 cg	Top Wood Plug 8 5/8				
E100	1 cg	Trk mi. 1 way 65 mi.				
E107	340 sk.	Cmt Serv Chg				
E104	1001 tm	Bulk Delv Pk				
R262	1 cg	Pump Chg				
F161	1 cg	Pickup mi. 1 way 65 mi.				
R761	1 cg	Cmt Head Rental				
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Discounted Price = 5436.03						

10244 NE Hiway 61 - P.O. Box 8613 - Pratt, KS 67124-8613 - Phone (620) 672-1201 - Fax (620) 672-5383

TOTAL

TREATMENT REPORT



Customer ID		Date	
Customer <i>L.I.D. Drly.</i>		3-31-04	
Lease <i>Don</i>		Lease No.	Well # <i>2</i>

Field Order # <i>8395</i>	Station <i>Pratt KS</i>	Casing <i>5 1/2</i>	Depth <i>3330</i>	County <i>Barton</i>	State <i>KS</i>
Type Job <i>long string New Well</i>			Formation	Legal Description <i>12-18s-14w</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>5 1/2</i>	Tubing Size	Shots/Ft <i>1.32 #3</i>	<i>1418 ppg</i>	Acid <i>125 sk. 50-50 poz 5 #1/set</i>	Rate <i>2000</i>	Press <i>2000</i>	ISIP	
Depth <i>3330</i>	Depth	From	To	Prog. Pad <i>5 # C./sonite 10% SGLT</i>	Max	<i>1.5 FR, 8 FL A-322</i>		5 Min.
Volume <i>81.6</i>	Volume	From	To	Pad <i>1.5 sk poz Plug R.H.</i>	Min			10 Min.
Max Press <i>2000</i>	Max Press	From	To	Frac <i>29.3 Bbli SL</i>	Avg			15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush <i>10 Bbli H2O</i>	Gas Volume			Total Load

Customer Representative <i>L.I.D. Davis</i>	Station Manager <i>Dave Autry</i>	Treater <i>D. Scott</i>
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Service Units	<i>118</i>	<i>46</i>	<i>57</i>	<i>47</i>	<i>70</i>
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Time	Casing Pressure	Tubing Pressure	Bbbls. Pumped	Rate	Service Log
<i>1000</i>					<i>on hoc w/Trk, Safety mtg</i>
					<i>PKR Shoe Bottom & L.I.D. Baffle Top SJ</i>
					<i>Cent. 1-3-S</i>
					<i>Csg on Bottom Circ w/Rig</i>
					<i>Drop Setting Ball & load L.I.D. Plug</i>
<i>1535</i>	<i>1260</i>		<i>5</i>	<i>1</i>	<i>Set PKR Shoe w/Trk</i>
			<i>10</i>		<i>H2O Spacer</i>
<i>1537</i>	<i>200</i>		<i>29.3</i>	<i>4.5</i>	<i>mix Cmt @ 1418 ppg 125 sk</i>
<i>1545</i>	<i>0</i>		<i>10</i>	<i>5</i>	<i>Close In & Wash Pump & line</i>
<i>1547</i>	<i>100</i>			<i>7</i>	<i>Release Plug & St Disp w/H2O</i>
<i>1555</i>	<i>250</i>		<i>65</i>	<i>7</i>	<i>Lifting Cmt 65 Bbli Disp Out</i>
<i>1559</i>	<i>1000</i>		<i>81.6</i>	<i>0</i>	<i>Plug Down & psi Test Psg</i>
<i>1601</i>	<i>0</i>				<i>Release psi Held</i>
					<i>Good Circ Thru Job</i>
					<i>Plug R.H. w/1.5 sk 60-40 poz</i>
					<i>wo M.H.</i>
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					<i>KCC WICHITA</i>
					<i>Job Complete</i>
					<i>Thank you</i>
					<i>Scotty</i>

D.S.&W. WELL SERVICING, INC.

P.O. Box 231
 CLAFLIN, KANSAS 67525

Date: 04/06/04

Lease: Don

Company: L.D. Drilling

Well: #2

Address: RR1 Box 183 B, Great Bend, Ks 67530

Invoice #: 62596

WELL PULLING REPORT

PULLED			EQUIPMENT	RUN		
JTS.	FT.	DESCRIPTION		JTS.	FT.	DESCRIPTION
			MUD ANCHOR		8	2-7/8" 8rd
			SEATING NIPPLE		1	2-7/8"
			WORKING BARREL			
			TUBING	102		2-7/8" 8rd
			TUBING SUBS	1	8	2-7/8" 8rd
			TUBING SUBS	1	2	2-7/8" 8rd
			STRAINER GAS ANCHOR		1	1-1/2"
			TRAVELING VALVE			
			PUMP			2-1/2"x1-1/2"x12'
			RODS	131		3/4"
			ROD SUBS	2	8	3/4"
			ROD SUBS	1	2	3/4"
			POLISH ROD		16	1-1/4"
			LINER		7	1-1/2"

Cardwell KB 150 Double Drum Pole Rig #17, operator & crew of 2 men 42.0 hrs @ \$151.00 \$ 6,342.00

Materials & Equipment Used: 5-1/2" Wire Swab Cups \$ 112.30

Oil Saver Rubbers - 3 @ \$10.75 \$ 32.25

Solvent - 7 gallons @ \$2.75 \$ 19.25

Thread Dope - 2 trips @ \$15.00 \$ 30.00

Weight Indicator \$ 45.00

Workover Head \$ 100.00

MP&PS - 8 hrs. @ \$85.00 \$ 680.00

Sales Tax - Barton Co. Ks. - 6.55% \$ 482.13

Total Due \$ 7,842.93

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04/06/04 - 4 hrs. - M.I.R.U. Got ready to run bit, collars and tubing for Wednesday. Shut down for the day.

04/07/04 - 15 hrs. & MP&PS - 8 hrs. - Drove to location. Tallied and trip in hole with bit, bit sub, 3 drill collars, change over sub and tubing. Tagged shoe drill 16' - circulated hole clean. Trip out of hole with tubing, collars and bit. Rigged up swab for casing. Swabbed until 8:00 P.M. Swabbed back 82 barrels. Shut in and shut down for the day.

04/08/04 - 10 hrs. - Drove to location. Checked overnight fill-up - 500'. Swabbed down - rigged up perforators. Perforated open hole - 3331'-3334'. Rigged down perforators. Rigged up swab - 50' in hole - swabbed down. Rigged up acid - spot 250 gallons

D.S.&W. WELL SERVICING, INC.

Date Work Commenced 04/06/04

Date Work Completed 04/10/04

By Mike Ryan

Phone (620)587-3361

CONTINUATION SHEET #1

D.S.&W. WELL SERVICING, INC.

P.O. Box 231
CLAFLIN, KANSAS 67525

Date: 04/06/04

Lease: Don

Company: L.D. Drilling

Well: #2

Address: RR1 Box 183 B, Great Bend, Ks 67530

Invoice #: 62596

CONTINUATION SHEET #1

of 15% NEFE. Loaded hole - pressured to 200#. Shut in and shut down for the night.

04/09/04 - 13 hrs. - Drove to location. Fluid is at 225' from surface. Swabbed down in 16 pulls - swabbed dry. 30 minute test - 75' - 90% oil; 30 minute test - 75' - 90% oil; 30 minute test - 75' - 90% oil - Rigged down swab. Ran tubing in for production. Ran pump and rods - respaced pump - longstroked with good blow - rigged down and moved off.

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12135

LOG-TECH, INC. INVOICE
 1011 240th Ave.
 HAYS, KANSAS 67601
 (785) 625-3858

11937

Date 4-8-04

CHARGE TO: L.D. Drilling

ADDRESS _____

LEASE SOURCE NO. _____

CUSTOMER ORDER NO. NW

LEASE AND WELL NO. Don #2

FIELD _____

NEAREST TOWN _____

COUNTY Barton

STATE Ks

POT LOCATION _____

SEC. _____

TWP. _____

RANGE _____

PERO S'AGL

CASING SIZE 5 1/2"

WEIGHT _____

CUSTOMER'S J.T.D. _____

LOG TECH _____

FLUID LEVEL _____

ENGINEER K. Schmeidler

OPERATOR Ernst

PERFORATING

Description	No. Shots	Depth		Amount
		From	To	
<u>4" HEC 3x4P</u>	<u>12</u>	<u>3331</u>	<u>3334</u>	<u>1360.00</u>
<u>Shot off bottom without corr. log</u>				

DEPTH AND OPERATIONS CHARGES

Description	Depth		Total No. Ft.	Price Per Ft.	Amount
	From	To			

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318500.00

MISCELLANEOUS

Description	Quantity	Amount
Service Charge		<u>450.00</u>

PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT

RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

Mike Karschman

Customer Signature

Date

..... Sub Total

1830 00

Code Ref. Tool Insurance

..... Tax

IF PAID WITHIN 30 DAYS

PAY DISCOUNT AMOUNT

1270 00

OILMAN'S ACID, INC.

18090 Plymouth Road
Russell, Kansas 67665

OFFICE: (785) 483-6666

NO 7155

DATE 4-8-04

OWNER OR P.O. NUMBER				LEASE <u>DON</u>			WELL <u>#2</u>	COUNTY <u>BT</u>	STATE <u>KS</u>
LOCATION	SECTION	TOWNSHIP	RANGE	FORMATION <u>Arbuckle openhole</u>			CONTRACTOR <u>D&W</u>		

To: Oilman's Acid, Inc.
You are hereby requested to rent acidizing equipment to do work as listed:
Charge To L.D. Drilling Inc.
Street RR#1 Box 1833
City Great Bend St KS Zip 67530
The above order was done to satisfaction and supervision of owner, agent or contractor.

WELL DATA			PERFORATIONS		TREATMENT	
SIZE	DEPTH	VOLUME	SHOTS FT.		Max. Pressure	
TUBING			From	To	Min. Pressure	
CASING	<u>5 1/2</u>	<u>81.34</u>	<u>3334</u>	From	To	Avg. Inj. Rate
TREATING VOLUME			From	To	Avg. Trt. Pressure	
			From	To	Total Fluid Pumped	
OPEN HOLE	<u>3334</u>		From	To	Bbbls.	

TREATMENT INSTRUCTIONS: The signee hereby request Oilman's Acid, Inc., to furnish equipment, servicemen and materials for servicing the above well under his supervision as follows:

Treat with 250 gal 15% NE Fe

As consideration, the above named (well owner or contractor) agrees to (a) pay you in accordance with your current price schedule; (b) Oilman's Acid, Inc. shall not be liable for damage to property of well owner and/or customer unless caused by willful negligence this provision applying but not limited to subsurface damage and surface damage arising from subsurface damage. Well owner and/or customer shall be responsible for and secure Oilman's Acid, inc. against any liability for reservoir loss or damage, or property damage arising from a well blowout, unless such loss or damage is caused by willful negligence of Oilman's Acid, Inc. If equipment or instruments of Oilman's Acid, Inc. are lost or damaged at the well, well owner and/or customer shall either recover the same or pay for such equipment or instruments unless, however, such loss or damage is caused by the negligence of Oilman's Acid, Inc.; (c) that you make no guarantee of the effectiveness of the materials to be used or the results of treatments; (d) that you will not be bound by any representation or agreement not herein contained. It is understood you will pay wages (and payroll taxes and withholding hereon) and comply with workman's compensation statutes applicable to servicemen you furnish.

EQUIPMENT AND PERSONNEL

<u>STAN</u>	<u>#12</u>

Service Engineer

Customer's Signature _____

TREATMENT LOG

TIME AM/PM	PRESSURE		TOTAL BBLs. FLUID PUMPED	BBLs. OF FLUID INFORMATION	BPM INJECTION RATE	EXPLANATION
	TBG	CSG				
<u>2:17</u>						<u>Start Acid via 5 1/2</u>
<u>2:19</u>			<u>6</u>			<u>Start Flush</u>
<u>2:38</u>			<u>80.34</u>			<u>Loaded, Bleed off Air</u>
<u>2:53</u>		<u>200#</u>	<u>81</u>			<u>Reload + pressure up</u>
						<u>Shut In + Soak.</u>
<u>6:34</u>		<u>200#</u>	<u>82.34</u>	<u>3/4</u>		<u>Bleed off Air + Reload</u>
						<u>pressure up + Shut In overnight.</u>
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <p>RECEIVED</p> <p>MAY 27 2004</p> <p>KCC WICHITA</p> </div> <div style="font-size: 2em; font-family: cursive;"> <p>Thanks</p> </div> </div>						

PRICE REFERENCE	MATERIALS USED	AMOUNT	UNIT PRICE	TOTAL COST
	<u>Standard pump Truck</u>	<u>1</u>		<u>425.00</u>
	<u>203 + 301 15% mud Acid</u>	<u>250 gal</u>	<u>1.37</u>	<u>342.50</u>
	<u>Inhibitor</u>	<u>1 gal</u>		<u>27.50</u>
				<u>795.00</u>
	<u>LESS DISCOUNT</u>			<u>- 119.25</u>

- New Producer
- Old Producer
- Old Producer - New Zones
- New SWD or Injection
- Old SWD or Injection

SUB-TOTAL	<u>675.75</u>
New well TAX	<u>0</u>
TOTAL	<u>675.75</u>

x x
Service Engineer

By Owner Operator or his Agent