

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

3-16-09
Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 3842
LARSON OPERATING COMPANY
Name: A DIVISION OF LARSON ENGINEERING, INC.
Address: 562 WEST STATE ROAD 4
City/State/Zip: OLMITZ, KS 67564-8561
Purchaser: _____
Operator Contact Person: TOM LARSON
Phone: (620) 653-7368
Contractor: Name: MURFIN DRILLING COMPANY, INC.
License: 30606
Wellsite Geologist: ROBERT C. 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. _____

11/28/2006 12/9/2006 12/9/2006
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 101-21968-00-00
County: LANE
APP W2 E2 SW Sec. 33 Twp. 16 S. R. 27 East West
1300 feet from SOUTH Line of Section
1550 feet from WEST Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: ANDERSON Well #: 1-33
Field Name: _____
Producing Formation: N/A
Elevation: Ground: 2682' Kelly Bushing: 2687'
Total Depth: 4646' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 249 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 17200 ppm Fluid volume 445 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: Carel Larson
Title: SECRETARY/TREASURER Date: 3/16/2007
Subscribed and sworn to before me this 16TH day of MARCH,
2007.
Notary Public: Debra J Ludwig
Date Commission Expires: MAY 5, 2008

DEBRA J. LUDWIG
Notary Public - State of Kansas
My Appt. Expires 5/5/2008

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
MAR 19 2007

CONSERVATION DIVISION
WICHITA, KS