

CONFIDENTIAL 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 # 3842
 Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC.
 Address: 562 WEST HIGHWAY 4
 City/State/Zip: OLMITZ, KS 67564-8561
 Purchaser: _____
 Operator Contact Person: TOM LARSON
 Phone: (620) 653-7368
 Contractor: Name: PETROMARK DRILLING, LLC
 License: 33323
 Wellsite Geologist: RICHARD S. DAVIS JR.

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. _____

5/20/2004 5/28/2004 5/28/2004
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 159-22418-0000
 County: RICE
APP NW SW NW Sec. 28 Twp. 18 S. R. 9 East West
1600 feet from NORTH Line of Section
500 feet from WEST Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE **(NW)** SW
 Lease Name: COLBERG Well #: 1-28

Field Name: COW CREEK
 Producing Formation: _____

Elevation: Ground: 1710' Kelly Bushing: 1716'
 Total Depth: 3310' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 308 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/ **RECEIVED**
 KANSAS CORPORATION COMMISSION

ACT I P&H w/ Han **SEP 10 2004**

Drilling Fluid Management Plan 4-24-07
 (Data must be collected from the Reserve Pit) **CONSERVATION DIVISION WICHITA, KS**

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 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: Thomas J Ferial

Title: SR. GEOLOGIST Date: 9/9/2004

Subscribed and sworn to before me this 9TH day of SEPTEMBER, 2004.

Notary Public: Laura E. Alarid
 Date Commission Expires: 03/28/2005

LAURA E. ALARID
NOTARY PUBLIC
STATE OF COLORADO
 My Commission Expires 03/28/2005

KCC Office Use ONLY

Letter of Confidentiality Attached
 If Denied, Yes Date: _____

Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC. Lease Name: COLBERG Well #: 1-28
 Sec. 28 Twp. 18 S. R. 9 East West County: RICE

INSTRUCTIONS: Show important tops and base of formation penetrated. Detail all cores. Report all final copes of drill stem 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 geologist well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Sample Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <i>(Submit Copy)</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: DUAL INDUCTION DUAL COMP POROSITY MICRO LOG SONIC LOG	<table style="width:100%;"> <tr> <td style="width:30%;"><input checked="" type="checkbox"/> Log</td> <td style="width:40%;">Formation (Top), Depth and Datum</td> <td style="width:30%;"><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>TOPEKA</td> <td>2454</td> <td>-738</td> </tr> <tr> <td>HEEBNER</td> <td>2724</td> <td>-1008</td> </tr> <tr> <td>DOUGLAS</td> <td>2760</td> <td>-1044</td> </tr> <tr> <td>BRN LIME</td> <td>2848</td> <td>-1132</td> </tr> <tr> <td>LANSING</td> <td>2873</td> <td>-1157</td> </tr> <tr> <td>ARBUCKLE</td> <td>3227</td> <td>-1511</td> </tr> <tr> <td>TD</td> <td>3310</td> <td></td> </tr> </table> <div style="text-align: center; font-size: 24px; font-weight: bold; margin: 10px 0;">KCC</div> <div style="text-align: center; font-size: 18px; font-weight: bold; margin: 5px 0;">SEP 09 2004</div> <div style="text-align: center; font-size: 24px; font-weight: bold; margin: 5px 0;">CONFIDENTIAL</div>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	TOPEKA	2454	-738	HEEBNER	2724	-1008	DOUGLAS	2760	-1044	BRN LIME	2848	-1132	LANSING	2873	-1157	ARBUCKLE	3227	-1511	TD	3310	
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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	20	308'	CLASS A	175	2% GEL & 3% CC

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth Top	Depth 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
		RECEIVED KANSAS CORPORATION COMMISSION	
		SEP 10 2004	
		CONSERVATION DIVISION WICHITA, KS	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed 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 Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity	

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 _____

ALLIED CEMENTING CO., INC.
 P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

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 KANSAS CORPORATION COMMISSION
SEP 10 2004
 CONSERVATION DIVISION
 WICHITA, KS

RECEIVED JUN 3 2004

 * **INVOICE** *

Invoice Number: 093345
 Invoice Date: 05/26/04

KCC
SEP 09 2004
CONFIDENTIAL

Sold Larson Operating Co.
 To: 562 W. HiWay #4
 Olmitz, KS
 67564

Cust I.D.....: Larson
 P.O. Number...: Colberg 1-28
 P.O. Date.....: 05/26/04
 Due Date.: 06/25/04
 Terms....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	175.00	SKS	7.6500	1338.75	T
Gel	3.00	SKS	11.0000	33.00	T
Chloride	6.00	SKS	30.0000	180.00	T
Handling	184.00	SKS	1.2500	230.00	E
Mileage (30)	30.00	MILE	9.2000	276.00	E
184 sks @\$.05 per sk per mi					
Surface	1.00	JOB	520.0000	520.00	E
Extra Footage	15.00	PER	0.5000	7.50	E
Mileage pmp trk	30.00	MILE	4.0000	120.00	E
TWP	1.00	EACH	45.0000	45.00	T

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 275.02
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2750.25
 Tax.....: 112.57
 Payments: 0.00
 Total....: 2862.82
 (275.02)
2587.80

DRLG COMP W/O LOE
 AFE # _____
 ACCT # 135/60
 APPROVED BY T.C. Larson

ALLIED CEMENTING CO., INC.
 P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

RECEIVED
 KANSAS CORPORATION COMMISSION
 SEP 10 2004
 CONSERVATION DIVISION
 WICHITA, KS

RECEIVED JUN 3 2004

 * INVOICE *

Invoice Number: 093400

Invoice Date: 05/31/04

Sold Larson Operating Co.
 To: 562 W. HiWay #4
 Olmitz, KS
 67564

KCC
 SEP 09 2004
 CONFIDENTIAL

Cust I.D.....: Larson
 P.O. Number...: Colberg 1-28
 P.O. Date.....: 05/31/04

Due Date.: 06/30/04
 Terms....: Net 30

Item I.D./Desc.	Qty	Used	Unit	Price	Net	TX
Common	117.00		SKS	7.6500	895.05	T
Pozmix	78.00		SKS	4.0000	312.00	T
Gel	7.00		SKS	11.0000	77.00	T
Handling	202.00		SKS	1.2500	252.50	T
Mileage (30)	30.00		MILE	10.1000	303.00	T
202 sks @\$.05 per sk per mi						
Rotary Plug	1.00		JOB	630.0000	630.00	T
Mileage pmp trk	30.00		MILE	4.0000	120.00	T

All Prices Are Net, Payable 30 Days Following Subtotal: 2589.55
 Date of Invoice. 1 1/2% Charged Thereafter. Tax.....: 182.57
 If Account CURRENT take Discount of \$ 258.95 Payments: 0.00
 ONLY if paid within 30 days from Invoice Date Total....: 2772.12
 (258.95)
 2513.17

DRLG COMP W/O LOE
 AFE # _____
 ACCT # 135/72
 APPROVED BY T.C. Larson