

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Must Be Typed
RECEIVED
KANSAS CORPORATION COMMISSION
DEC 01 2005

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

CONSERVATION DIVISION
WICHITA, KS

Operator: License # 3842
Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC.
Address: 562 WEST STATE ROAD 4
City/State/Zip: OLMITZ, KS 67564-8561
Purchaser: NCRA
Operator Contact Person: TOM LARSON
Phone: (620) 653-7368
Contractor: Name: ACE DRILL'N, INC.
License: 33006
Wellsite Geologist: ROBERT LEWELLYN

API No. 15 - 135-24381-00-00
County: NESS
APP S/2 SE NW Sec. 19 Twp. 18 S. R. 26 East West
2280 feet from NORTH Line of Section
1860 feet from WEST Line of Section

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Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: MCLEISH Well #: 2-19
Field Name: WILDCAT
Producing Formation: (MISSISSIPPIAN)
Elevation: Ground: 2656' Kelly Bushing: 2659'
Total Depth: 4626' Plug Back Total Depth: 4626'
Amount of Surface Pipe Set and Cemented at 254 Feet
Multiple State Cementing Collar Used? Yes No
If yes, show depth set 2013 Feet
If Alternate II completion, cement circulated from 2013
feet depth to SURFACE w/ 185 sx cmt.

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. _____

8/6/2005 8/18/2005 9/15/2005
Spud Date or Date Reached TD Completion Date or
Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) *ALT II WITH 3-9-07*
Chloride content 17000 ppm Fluid volume 630 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: Carl Larson
Title: SECRETARY/TREASURER Date: 11/30/2005
Subscribed and sworn to before me this 30TH day of NOVEMBER,
2005.
Notary Public: Debra 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

Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC. Lease Name: MCLEISH Well #: 2-19
 Sec. 19 Twp. 18 S. R. 26 East West County: NESS

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 (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Sample Sent to Geological Survey	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	ANHYDRITE	2022	+637
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	BASE ANHYDRITE	2050	+609
List All E. Logs Run:	DUAL INDUCTION		HEEBNER SH	3962	-1303
	BOREHOLE COMP SONIC		LANSING	4003	-1344
	DUAL COMP POROSITY		STARK SH	4259	-1600
	MICRO LOG		BASE KC	4368	-1709
			MARMATON	4377	-1718
			ALTAMONT	4390	-1731
			PAWNEE	4466	-1807
			FORT SCOTT	4516	-1857
			CHEROKEE SH	4539	-1880
			MISSISSIPPIAN	4620	-1961
			TD	4626	-1967

CASING RECORD <input checked="" type="checkbox"/> New <input checked="" 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"	28#	254'	CLASS A	165	2% GEL, 3% CC
PRODUCTION	7-7/8"	5-1/2"	15.5#	4623'	SMD	150	1/4#/SL FLOCELE
					EA-2	100	10% SALT, 5% CALSEAL, 5#/SK GILSONITE, 1/2% HALAD-1

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<input checked="" type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	SURF	2013	SMD	185	1/4#/SK FLOCELE

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)	
		Amount	Depth
4	4622-25, 4530.5-34.5, 4466-69, 4446-49	500 GAL 15% MCA	4530.5-34.5
		500 GAL 15% MCA	4466-69 & 4446-49

TUBING RECORD	Size 2-3/8"	Set At 4599'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 9/21/05	Producing Method <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. 80	Gas Mcf 0	Water Bbls. 20	Gas-Oil Ratio 0
				Gravity 40

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval 4530-4626'



CHARGE TO: WALSON OPERATING
 ADDRESS _____
 CITY, STATE, ZIP CODE _____

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 WICHITA, KS

TICKET No 8896

PAGE 1 OF 2

SERVICE LOCATIONS 1. <u>NESS CITY KS</u>	WELL/PROJECT NO. <u>2-19</u>	LEASE <u>MFLUSH</u>	COUNTY/PARISH <u>NESS</u>	STATE <u>Ks</u>	CITY	DATE <u>8-19-05</u>	OWNER <u>SAME</u>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>ACE DRILLING</u>	RIG NAME/NO.	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.	
3.	WELL TYPE <u>OIL</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>5'1/2" LONGSTRECK</u>	WELL PERMIT NO.	WELL LOCATION <u>BEESE, KS - W/NO CURVE, 1/2N, 1/2E</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575	CONFIDENTIAL	1			MILEAGE # 106	30		MC		4.00	120.00
578		1			PUMP SERVICE	1		JOB	4622	12.50	1250.00
221		1			LIGAND KCL	2		GAL		25.00	50.00
281		1			MUD FLUSH	500		GAL		.75	375.00
325		1			STANDARD CEMENT	100		SBS	EA-2	8.80	880.00
330		1			SWIFT MULTI-DRIFT STANDARD	150		SBS		11.00	1650.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X T.C. Janson
 DATE SIGNED 8-19-05 TIME SIGNED 5:00 P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL #1	4325.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				#2	1399.18
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				subtotal	5724.18
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TAX	195.59
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	5919.77



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 8896

CUSTOMER LARSON OPERATING WELL M425H 2-19 DATE 8-19-05 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF			QTY.	U/M	QTY.	U/M			
276		1				FLOCUE	38	LBS			1.10	41	80
283		1				SALT	500	LBS			1.17	85	00
284		1				CALSEAL	5	SKS	500	LBS	30.00	150	00
286		1				CE HAND-1	47	LBS			5.50	258	50
277		1				625WSTE	500	LBS			1.40	200	00
581		1				SERVICE CHARGE							
583		1				MILEAGE CHARGE							
						TOTAL WEIGHT	25	925					
						LOADED MILES		30					
						CUBIC FEET			250		1.10	275	00
						TON MILES			388	875	1.00	388	88

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CONTINUATION TOTAL 1399.18

JOB LOG

SWIFT Services, Inc.

DATE 8-19-05 PAGE NO. 1

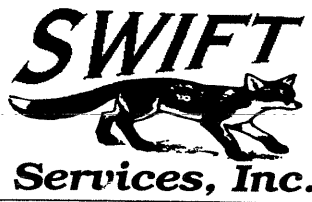
CUSTOMER **CARSON OPERATING** WELL NO. **2-19** LEASE **MCLISH** JOB TYPE **5 1/2" LONGSTRENGTH** TICKET NO. **8896**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1000							ON LOCATION
								TD-4625 SET 4622
								TD-4626 5 1/2" #/FT 15.5
								SJ-42'
								PORT COURSE 2013'
								1100 CIRCULATE WELL - SET PACKERSH
	1052	6	12		✓		450	PUMP 500 GAL MUD FISH
	1054	6	20		✓		450	PUMP 20 BBLs KCL FLUSH
	1140		4					PLUG RH
	1145	5	62		✓		300	MIX CEMENT - 150 SLS SMD 12.2 PPG
		4	24		✓		250	100 SLS SA-2 15.4 PPG
	1222							WASH OUT PUMP - LINES
	1224							RELEASE LATCH DOWN PLUG
	1225	4	0		✓			DEGRADE PLUG
		6 1/4	108				950	
	1250	6	109.1				1750	PLUG DOWN - PSE UP LATCH 2 PLUG
	1252						OK	RELEASE ASE - HEAD
								WASH UP
	1330							JOB COMPLETE

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THANK YOU
WAWA, DUSTY BEIT



CHARGE TO: Larson Operating
 ADDRESS:
 CITY, STATE, ZIP CODE:

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 TICKET N^o 8615

PAGE 1 OF 1

CONSERVATION DIVISION

1. <u>Hays, Ks.</u>	WELL/PROJECT NO. <u>#2</u>	LEASE <u>McCleish</u>	COUNTY/PARISH <u>Ness</u>	STATE <u>Ks</u>	CITY <u>WICHITA, KS</u>	DATE <u>8-26-05</u>	OWNER <u>Same</u>
2. <u>Ness City, Ks.</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>Fritzer</u>	RIG NAME/NO.	SHIPPED VIA <u>eff</u>	DELIVERED TO <u>Location</u>	ORDER NO.	
3.	WELL TYPE <u>oil</u>	WELL CATEGORY <u>development</u>	JOB PURPOSE <u>cement Port Collar</u>	WELL PERMIT NO.	WELL LOCATION		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<u>575</u>		<u>1</u>			MILEAGE <u>#103</u>	<u>30</u>	<u>mi</u>			<u>4⁰⁰</u>	<u>120⁰⁰</u>
<u>578</u>		<u>1</u>			<u>pump charge cement P.C.</u>	<u>1</u>	<u>ea</u>	<u>2072</u>	<u>'</u>	<u>1250⁰⁰</u>	<u>1250⁰⁰</u>
<u>330</u>	OVERDUE	<u>2</u>			<u>SMD cement</u>	<u>185</u>	<u>sk</u>			<u>11⁰⁰</u>	<u>2035⁰⁰</u>
<u>276</u>		<u>2</u>			<u>Flocele</u>	<u>50</u>	<u>#</u>			<u>1¹⁰</u>	<u>55⁰⁰</u>
<u>581</u>		<u>2</u>			<u>Cement Service Charge</u>	<u>225</u>	<u>sk</u>			<u>1¹⁰</u>	<u>247⁵⁰</u>
<u>583</u>		<u>2</u>			<u>Drayage</u>	<u>330.69</u>	<u>T/M</u>			<u>1⁰⁰</u>	<u>330⁶⁹</u>

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X J.C. Larson
 DATE SIGNED 8-26-05 TIME SIGNED 1920
 A.M.
 P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				<u>4038</u>	<u>19</u>
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				<u>Ness TAX</u>	<u>110</u>
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		<u>5.39⁰⁰</u>	<u>77</u>
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	<u>4148</u>
					<u>96</u>

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR Nick Korbe APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 8-26-05 PAGE NO. 1

CUSTOMER Larson Operating WELL NO. #2 LEASE McCleish JOB TYPE Cement Port Collar TICKET NO. 8615

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1545							on loc / set up Trks
								2 3/8 tbg x 5 1/2" ESG x 2012' P.C.
	1645							locate P.C.
	1650						1000	Test csg
	1700							Open P.C.
	1705	4	4				150	take injection rate
	1710	4	0				150	start Cement 185'sks SMD
	1730		78					end Cement
		4	0					start Displacement
	1732	4	7					Cement displaced
								Close PC
	1740						1000	Test Csg
	1750	3	0					run 3jts
	1755		16					Reverse out hole clean

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WICHITA, KS

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Thank you

Nick, Dan & Brett

ALLIED CEMENTING CO., INC. 17584

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

CONFIDENTIAL SERVICE POINT: Cement Band

DATE <u>8-6-05</u>	SEC <u>19</u>	TWP. <u>13</u>	RANGE <u>26w</u>	CALLED OUT <u>4:00 pm</u>	ON LOCATION <u>6:50 pm</u>	JOB START <u>9:00 pm</u>	JOB FINISH <u>9:00</u>
LEASE <u>McLeish</u>	WELL # <u>2-19</u>	LOCATION <u>West of Access City & Rd.</u>		COUNTY <u>McPherson</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)		A. - North 1 3/4 miles west & south into					

CONTRACTOR Age? Drlg
 TYPE OF JOB Surface Pipe
 HOLE SIZE 12 1/4 T.D. 255
 CASING SIZE _____ DEPTH 255'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. approx 15'
 PERFS. _____
 DISPLACEMENT 15 BBLS

OWNER Hanson Oil
 CEMENT
 AMOUNT ORDERED 165 sq Common
302

COMMON	<u>165 sq</u>	@	<u>8.70</u>	<u>1,435.50</u>
POZMIX		@		
GEL	<u>3 sq</u>	@	<u>14.00</u>	<u>42.00</u>
CHLORIDE	<u>5 sq</u>	@	<u>38.00</u>	<u>190.00</u>
ASC		@		

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HANDLING	<u>173 sq</u>	@	<u>1.60</u>	<u>276.80</u>
MILEAGE	<u>173 sq</u>	@	<u>06 20</u>	<u>207.60</u>
TOTAL				<u>2151.90</u>

EQUIPMENT

PUMP TRUCK	CEMENTER	<u>Jack</u>
# <u>120</u>	HELPER	<u>J.P.</u>
BULK TRUCK		
# <u>342</u>	DRIVER	<u>Ricky</u>
BULK TRUCK		
# _____	DRIVER	

REMARKS:

Ran 5 hrs of 870 sq cement with 165 sq cement - Displacement with 15 BBLS of fresh water. cement did cure.

Thanks

CHARGE TO: Hanson Oil
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>255'</u>			
PUMP TRUCK CHARGE				<u>670.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>2.0</u>	@	<u>5.00</u>	<u>100.00</u>
		@		
		@		

TOTAL 770.00

PLUG & FLOAT EQUIPMENT

cemented thru swedge

MANIFOLD		@		
		@		
		@		
		@		
		@		

TOTAL _____

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Paul N. Griffin

PRINTED NAME _____