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SEP 10 2005
KCC WICHITA

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 # 33335
Name: IA Operating, Inc.
Address: 900 N Tyler Road #14
City/State/Zip: Wichita, KS 67212
Purchaser: _____
Operator Contact Person: Hal Porter
Phone: (316) 721-0036
Contractor: Name: Murfin Drilling Co., Inc.
License: 30606
Wellsite Geologist: Randall Kilian
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. _____
8/31/05 9/07/05 9/07/05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

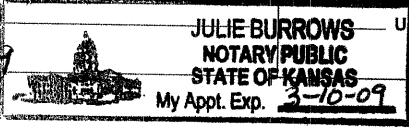
API No. 15 - 051-25451-00-00
County: Ellis
NW SW SE _____ Sec. 22 Twp. 14 S. R. 20 East West
930 feet from S / N (circle one) Line of Section
2310 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Helen Well #: 22-1
Field Name: Wildcat
Producing Formation: _____
Elevation: Ground: 2161' Kelly Bushing: 2166'
Total Depth: 3854' Plug Back Total Depth: 3750'
Amount of Surface Pipe Set and Cemented at 235' 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)
ALTELL P&A WITH
4-18-07
Chloride content 59,000 ppm Fluid volume 400 bbls
Dewatering method used Evaporation/Backfill
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 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: _____
Title: President Date: 9/15/05
Subscribed and sworn to before me this 15 day of September,
20 05.
Notary Public: Julie Burrows
Date Commission Expires: March 10, 2009



KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: IA Operating, Inc. Lease Name: Helen Well #: 22-1
 Sec. 22 Twp. 14 S. R. 20 East West County: Ellis

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Geologists Well Report, Borehole Compensated Sonic Log, Microresistivity Log, Dual Compensated Porosity Log, Dual Induction Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1418'</td> <td>+748</td> </tr> <tr> <td>Base</td> <td>1466'</td> <td>+700</td> </tr> <tr> <td>Topeka</td> <td>3146'</td> <td>-980</td> </tr> <tr> <td>Lansing</td> <td>3436'</td> <td>-1270</td> </tr> <tr> <td>Arbuckle</td> <td>3784'</td> <td>-1618</td> </tr> <tr> <td>Reagan Sd</td> <td>3790'</td> <td>-1624</td> </tr> <tr> <td>Total Depth</td> <td>3853'</td> <td>-1687</td> </tr> </table>	Name	Top	Datum	Anhydrite	1418'	+748	Base	1466'	+700	Topeka	3146'	-980	Lansing	3436'	-1270	Arbuckle	3784'	-1618	Reagan Sd	3790'	-1624	Total Depth	3853'	-1687
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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"	23#	235'	Common	165	3% cc 2% gel

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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone		60/40 Poz	100	6 % gel, 1/4 flo seal

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

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TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input 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.	Gas Mcf	Water Bbls.	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. 22118

Federal Tax I.D.# 48-0727860

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

well file
SERVICE POINT:
Russell

DATE <u>9/7/05</u>	SEC.	TWP.	RANGE	CALLED OUT <u>7:00 AM</u>	ON LOCATION <u>8:30 AM</u>	JOB START <u>9:00 AM</u>	JOB FINISH <u>Noon</u>
LEASE <u>Helen</u>	WELL # <u>22-1</u>		LOCATION <u>Ellis 8S 13E</u>			COUNTY <u>Ellis</u>	STATE <u>Kn</u>
OLD OR NEW (Circle one)							

CONTRACTOR MURFIN #16

TYPE OF JOB PLUG

HOLE SIZE _____ T.D. _____

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT AMOUNT ORDERED
200 sks 6 3/4" 6% Gel to #760
100

COMMON	<u>60</u>	@	<u>8.70</u>	<u>522.00</u>
POZMIX	<u>40</u>	@	<u>4.70</u>	<u>188.00</u>
GEL	<u>6</u>	@	<u>14.00</u>	<u>84.00</u>
CHLORIDE		@		
ASC		@		
<u>E/O SPN 25#</u>		@	<u>1.70</u>	<u>425.00</u>
HANDLING	<u>106</u>	@	<u>1.60</u>	<u>169.60</u>
MILEAGE	<u>64/52/mile</u>			<u>330.72</u>
TOTAL				<u>1336.82</u>

EQUIPMENT

PUMP TRUCK CEMENTER Bill

177 HELPER PAUL

BULK TRUCK

_____ DRIVER Brien

BULK TRUCK

_____ DRIVER _____

REMARKS:

25 sks c 3750

25 sks c 1470

25 sks c 800

15 sks c RH

10 sks c MH

CHARGE TO: IA Operating

STREET _____

CITY _____ STATE _____ ZIP _____

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.

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 785.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 52 @ 5.00 260.00

MANIFOLD _____ @ _____

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TOTAL 1,045.00

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
TOTAL _____		

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Andy Dinkel

Andy Dinkel
PRINTED NAME

ALLIED CEMENTING CO., INC. 21123

wellfield

Federal Tax I.D.# 48-0727860

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

SERVICE POINT:
Russell

DATE <u>9/1/05</u>	SEC. <u>22</u>	TWP. <u>14S</u>	RANGE <u>20</u>	CALLED OUT	ON LOCATION <u>12:00pm</u>	JOB START <u>12:30pm</u>	JOB FINISH <u>12:45pm</u>
LEASE <u>Helen</u>	WELL # <u>22-1</u>	LOCATION <u>Ellis 8S 1 1/2 E</u>	COUNTY <u>Ellis</u>	STATE <u>Ks.</u>			
OLD OR NEW (Circle one)		<u>Ninfo</u>					

CONTRACTOR Murphy #16 Drilling

TYPE OF JOB Sur face Job

HOLE SIZE 12 1/4 T.D. 235

CASING SIZE 8 5/8 23# DEPTH 235

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 14 661

OWNER _____

CEMENT AMOUNT ORDERED 165 Com 390 CC

290 Gcl

COMMON	<u>165</u>	@	<u>8.70</u>	<u>1,435.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>14.00</u>	<u>42.00</u>
CHLORIDE	<u>5</u>	@	<u>38.00</u>	<u>190.00</u>
ASC		@		
HANDLING	<u>173</u>	@	<u>1.60</u>	<u>276.80</u>
MILEAGE	<u>6¢/5¢/mile</u>			<u>514.80</u>
TOTAL				<u>2,459.10</u>

EQUIPMENT

PUMP TRUCK # 366 CEMENTER Shane HELPER Fred

BULK TRUCK # _____ DRIVER Brian

BULK TRUCK # _____ DRIVER _____

REMARKS:

Cement OK!

SERVICE

DEPTH OF JOB				
PUMP TRUCK CHARGE				<u>670.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>52</u>	@	<u>5.00</u>	<u>260.00</u>
MANIFOLD		@		
TOTAL				<u>930.00</u>

CHARGE TO: I.A. Operating, Inc.

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

		@		
		@		
	<u>8 5/8 Wood Plug</u>	@		<u>55.00</u>
		@		
TOTAL				<u>55.00</u>

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.

Thanks.

SIGNATURE Sam Siebel

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

Antony Dinkel
PRINTED NAME