

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form AC0-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

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: MURFIN DRILLING COMPANY, INC.
License: 30606
Wellsite Geologist: STEVE DAVIS

API No. 15 - 101-21868-00-00
County: LANE
APPROX C NW Sec. 28 Twp. 18 S. R. 29 East West
560 feet from NORTH Line of Section
490 feet from WEST Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: STANLEY Well #: 1-28
Field Name: WILDCAT
Producing Formation: JOHNSON, PLEASANTON, L-KC
Elevation: Ground: 2820' Kelly Bushing: 2825'
Total Depth: 4643' Plug Back Total Depth: 4582'
Amount of Surface Pipe Set and Cemented at 269 Feet
Multiple State Cementing Collar Used? Yes No
If yes show depth set 2158' Feet
If Alternate II completion, cement circulated from 2158
feet depth to SURFACE w/ 175 sx cmt.

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. _____

2/5/2005 2/17/2005 3/10/2005
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

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Drilling Fluid Management Plan ALT II WHM
(Data must be collected from the Reserve Pit) 4-4-07
Chloride content 9800 ppm Fluid volume 1000 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: Carol Larson
Title: SECRETARY-TREASURER Date: 5/23/2005
Subscribed and sworn to before me this 23RD day of MAY,
2005.
Notary Public: Debra J Ludwig
Date Commission Expires: MAY 5, 2008

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

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

Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC. Lease Name: STANLEY Well #: 1-28
 Sec: A 28 Twp: 18 S. R. 29 East West County: LANE

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	2172	+653
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	BASE ANHYDRITE	2199	+626
List All E. Logs Run:	DUAL INDUCTION		HEEBNER	3923	-1098
	DUAL COMP POROSITY		LANSING	3968	-1143
	MICRO LOG		MUNCIE CREEK	4134	-1309
	SONIC LOG		STARK	4244	-1419
			MARMATON	4388	-1563
			FORT SCOTT	4494	-1669
			CHEROKEE SH	4518	-1693
			MISSISSIPPI	4587	-1762

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"	24	269	CLASS A	180	2% GEL, 3% CC
PRODUCTION	7-7/8"	5-1/2"	17	4632	SMD	125	1/4#/SK FLOCELE
					EA-2	125	5% CALSEAL, 10% SALT, 5#/SK GILSONITE, 1/2% H-322

ADDITIONAL CEMENTING/SQUEEZE RECORD

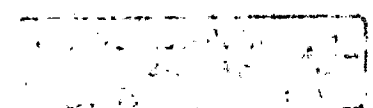
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<input checked="" type="checkbox"/> Perforate					
<input checked="" type="checkbox"/> Protect Casing	SURF	2158	SMD	175	1/4#/SK FLOCELE
<input type="checkbox"/> Plug Back TD					
<input type="checkbox"/> Plug Off Zone					

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
		Amount	Kind of Material Used	
4	4565-67, 4557-59, 4335-44, 4148-54	500 GAL	15% MCA	4565-67 4557-59
4	4336-41	1000 GAL	15% MCA	4565-67 4557-59
4	4149-53	500 GAL	15% MCA	4335-44
		100 SX	CLASS A SQZ	4335-44 4148-54
	500 GAL 15% MCA 4149-53 1000 GAL 15% MCA 4149-53	1000 GAL	15% NEFE	4336-41

TUBING RECORD	Size 2-3/8"	Set At 4564.57	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 3/12/05	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. 40	Gas Mcf 0	Water Bbls. 0	Gas-Oil Ratio 0
				Gravity 34

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

Production Interval: 4149-4567 OA



ALLIED CEMENTING CO., INC. 19014

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ORIGINAL

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

SERVICE POINT:
OAKLEY

KCC
MAY 23 2005

CONFIDENTIAL

DATE <u>2-5-05</u>	SEC <u>28</u>	TWP <u>18S</u>	RANGE <u>29W</u>	CALLED OUT	ON LOCATION <u>8:30 AM</u>	JOB START <u>11:00 AM</u>	JOB FINISH <u>11:30 AM</u>
LEASE <u>STANLEY</u>	WELL # <u>1-28</u>	LOCATION <u>DIGHTON 2W-1S-1/2W</u>			COUNTY <u>LANE</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR MURFIN DRILL, REG # 24

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4" TD. 270'

CASING SIZE 8 7/8" DEPTH 270'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 16 1/4 BBL.

OWNER SAME

CEMENT

AMOUNT ORDERED 180 SKS COM 390 CC 296 EL

COMMON	<u>180 SKS</u>	@	<u>8 30</u>	<u>1494 00</u>
POZMIX		@		
GEL	<u>3 SKS</u>	@	<u>13 00</u>	<u>39 00</u>
CHLORIDE	<u>6 SKS</u>	@	<u>36 00</u>	<u>216 00</u>
ASC		@		

EQUIPMENT

PUMP TRUCK CEMENTER TERRY

191 HELPER WAYNE

BULK TRUCK

377 DRIVER ALAN

BULK TRUCK

DRIVER

RECEIVED

MAY 24 2005

KCC WICHITA

HANDLING	<u>189 SKS</u>	@	<u>1 50</u>	<u>283 50</u>
MILEAGE	<u>5 1/2 PER SK / MILE</u>			<u>353 60</u>
TOTAL				<u>2386 10</u>

REMARKS:

CEMENT DTD CIRC.

THANK YOU

SERVICE

DEPTH OF JOB	<u>270'</u>			
PUMP TRUCK CHARGE			<u>625 00</u>	
EXTRA FOOTAGE		@		
MILEAGE	<u>34 MI</u>	@	<u>4 30</u>	
MANIFOLD		@		
TOTAL				<u>778 00</u>

CHARGE TO: LARSON OPERATING, CO

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>8 7/8 SURFACE 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.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Anthony Martin

Anthony Martin
PRINTED NAME



CHARGE TO:
WASOJ OPERATING
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET
 No 7658

PAGE 1 OF 1

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1. SERVICE LOCATIONS <u>NESS CO. KS</u>	WELL/PROJECT NO. <u>1-28</u>	LEASE <u>STANLEY</u>	COUNTY/PARISH <u>LANE</u>	STATE <u>Ks</u>	CITY	DATE <u>2-21-05</u>	OWNER <u>SAME</u>
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>FATRICK TRUCKING</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>CEMENT PORT COLLAR</u>	WELL PERMIT NO.	WELL LOCATION <u>DIGHTON, KS - 3w, 1s, 1w</u>			
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	UM	QTY.	UM	
575		1			MILEAGE # 104	40	ME	3.00		120.00
577		1			PUMP SERVICE	1	JOB	750.00		750.00
330		1			SWIFT MULTI-DESK STANDARDS	175	SKS	10.25		1793.75
276		1			FLOCCIE	60	UBS	1.00		60.00
581					SERVICE CHARGE CEMENT	240	SKS	1.10		264.00
583					DEBRAGE	23970	UBS	479.4	IM	431.46

KCC NICHITA
 MAY 24 2005
 REGENED

CONFIDENTIAL
 KCC
 MAY 23 2005

ORIGINAL

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 J.C. Larson
 DATE SIGNED 2-21-05 TIME SIGNED 1300
 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	3419.12
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	98
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	3517.10
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

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

SWIFT OPERATOR
WAKE WISSE
 APPROVAL

Thank You!

JOB LOG

CONFIDENTIAL

SWIFT Services, Inc.

ORIGINAL

DATE 2-21-05 PAGE NO. 1

CUSTOMER **LARSON OPERATING** WELL NO. **1-28** LEASE **STANLEY** JOB TYPE **CSMWT PORT COLLAR** TICKET NO. **7658**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1300							ON BOARD KCC PORT COLLAR @ 2167' 2 3/8 x 5 1/2 MAY 23 2005 CONFIDENTIAL
	1405				✓		1000	PSE TEST - HEAD
	1410	3	3	✓			400	OPEN PORT COLLAR - 2 1/2" RATE
	1415	4	97	✓			550	MAX CSMWT - 175 SKS SMC
	1437	3	7	✓			650	DISPLACE CSMWT
								CIRCULATE 15 SKS OUT TO POT
	1445			✓			1100	CLOSE PORT COLLAR - PSE TEST - HEAD
	1500	3	20	✓			350	RUN 3 OTS CIRCULATE CLEAN
								WASH UP TRUCK
								PULL TOOL
	1600							JOB COMPLETE

RECEIVED
 MAY 24 2005
 KCC WICHITA

THANK YOU
 WAYNE DUSTY ROBT



CHARGE TO:
WILSON OPERATING

ADDRESS

CITY, STATE, ZIP CODE

TICKET
No 7655

PAGE 1 OF 2

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SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. 1-28	LEASE STANLEY	COUNTY/PARISH LANE	STATE KS	CITY	DATE 2-17-05	OWNER SOME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR MURPHY DRUG # 24	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 5 1/2" LOGSTRING		WELL PERMIT NO.	WELL LOCATION DEIGHTON, KS - 3w, 1s, 1w, 1p	
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 104	40	ME			3.00	120.00
578		1			PUMP SERVICE	1	JOB	4637	FT	1250.00	1250.00
221		1			LIQUID KCL	4	GAL			19.00	76.00
281		1			MUD FLUSH	500	GAL			.65	325.00
403		1			CEMENT BASKET	1	EA	5 1/2"		140.00	140.00
419		1			ROTATING HEAD RENTAL	1	JOB			200.00	200.00

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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 7.C. Larson
DATE SIGNED: 2-17-05 TIME SIGNED: 10:30 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	AMOUNT	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#1	2111	
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	3806	
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				subtotal	5917.65	
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	201.60	
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO					TOTAL	6119.25
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						

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

SWIFT OPERATOR: Wayne Wilson APPROVAL:

Thank You!



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

TICKET CONTINUATION

TICKET No. 7655

CUSTOMER: LARSON OPERATING
WELL: STANLEY 1-28
DATE: 2-17-05
PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
325						STANDARD CEMENT	EA-2	125	SBS		7.50	937.50
330						SWIFT MULTI-DENSITY STANDARD		125	SBS		10.25	1281.25
276						FLOCEL		31	LBS		1.00	31.00
277						GILSONITE		600	LBS		.35	210.00
283						SALT		650	LBS		.17	110.50
284						CAISAL		6	SBS	600 LBS	28.00	168.00
286						HAZAD-1		59	LBS		5.50	324.50
581						SERVICE CHARGE						
533						MILEAGE CHARGE						
						TOTAL WEIGHT		26050				
						LOADED MILES		40				
						CUBIC FEET		250			1.10	275.00
						TON MILES		521			.190	468.190

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MAY 24 2015
KCC NICHITA

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MAY 23 2015

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CONTINUATION TOTAL 3806.65

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SWIFT Services, Inc.

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JOB LOG

DATE 2-17-05 PAGE NO. 1

CUSTOMER LARSON OPERATING WELL NO. 1-28 LEASE STAGLEY JOB TYPE 5 1/2" LONGSTRAWG TICKET NO. 7655

Table with columns: CHART NO., TIME, RATE (BPM), VOLUME (BBLS/GAL), PUMPS (T, C), PRESSURE (PSI) (TUBING, CASING), DESCRIPTION OF OPERATION AND MATERIALS. Includes entries for 1015, 1230, 1355, 1357, 1402, 1409, 1645, 1655, 1656, 1658, 1658, 1714, 1716, 1800.

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KCC MAY 23 2005

RECEIVED MAY 24 2005 KCC WICHITA

THANK YOU WAXIE, JUSTY, BRETT