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JUL 28 2005

KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

CONFIDENTIAL

Operator: License # 30606
Name: Murfin Drilling Company, Inc.
Address: 250 N. Water, Suite 300
City/State/Zip: Wichita, Kansas 67202
Purchaser: _____
Operator Contact Person: Tom W. Nichols
Phone: (316) 267-3241
Contractor: Name: Murfin Drilling Company, Inc.
License: 30606
Wellsite Geologist: Dave Goldack

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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. _____
7/7/05 7/17/05 N/A 7-16-05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

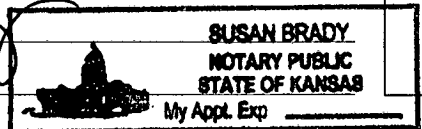
API No. 15 - 15-167-23292-00-00
County: Russell
SE NE SE Sec. 5 Twp. 15 S. R. 15 East West
1700S feet from S / N (circle one) Line of Section
330E feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Mudd Well #: 1-5
Field Name: Wildcat
Producing Formation: N/A
Elevation: Ground: 1873' Kelly Bushing: 1878'
Total Depth: 3470' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at 220 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 *ACT II PEA w/ln*
(Data must be collected from the Reserve Pit) 7-31-07
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 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: [Signature]
Title: Tom Nichols, Production Manager Date: 7-27-05
Subscribed and sworn to before me this 27th day of July,
2005.
Notary Public: Susan Brady
Date Commission Expires: 11-4-07



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

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Side Two

ORIGINAL

Operator Name: Murfin Drilling Company, Inc. Lease Name: Mudd Well #: 1-5
Sec. 5 Twp. 15 S. R. 15 [] East [x] West County: Russell

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 [x] Yes [] No
Samples Sent to Geological Survey [x] Yes [] No
Cores Taken [] Yes [x] No
Electric Log Run [x] Yes [] No
List All E. Logs Run:
Dual Induction, Compensated Porosity, Microresistivity
[x] Log Formation (Top), Depth and Datum [] Sample
Name Top Datum
SEE ATTACHED LIST

CASING RECORD [] New [] Used
Report all strings set-conductor, surface, intermediate, production, etc.
Table with columns: 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.
Row 1: Surface, 8 5/8, 220, Common, 150, 3% cc, 2% gel

ADDITIONAL CEMENTING / SQUEEZE RECORD
Table with columns: Purpose, Depth Top Bottom, Type of Cement, #Sacks Used, Type and Percent Additives.
Purpose: [] Perforate, [] Protect Casing, [] Plug Back TD, [] Plug Off Zone

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 [] Yes [x] No
Date of First, Resumerd Production, SWD or Enhr. Producing Method [] Flowing [] Pumping [] Gas Lift [] 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

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| MDCI Mudd #1-5 1700 FSL 330 FEL 1878' KB | | | | | | | Rains & Williamson Bosch #1 SW NE NW 1824' KB | |
|---|-------------|-------|-----|----------|-------|------|--|-------|
| Formations | Sample Tops | Datum | Ref | Log tops | Datum | Ref | Log Tops | Datum |
| Anhydrite | 935 | +943 | -4 | 937 | +941 | -6 | 877 | +947 |
| B/Anhydrite | 970 | +908 | -3 | 971 | +907 | -4 | 913 | +911 |
| Topeka | 2777 | -899 | +10 | 2780 | -902 | +7 | 2733 | -909 |
| Heebner | 3046 | -1168 | +4 | 3046 | -1168 | +4 | 2996 | -1172 |
| Toronto | 3063 | -1185 | +5 | 3066 | -1188 | +2 | 3014 | -1190 |
| Lansing | 3105 | -1227 | +2 | 3105 | -1227 | +2 | 3053 | -1229 |
| Lansing H | 3241 | -1363 | +3 | 3243 | -1365 | +1 | 3190 | -1366 |
| BKC | 3338 | -1460 | +1 | 3339 | -1461 | flat | 3285 | -1461 |
| Arbuckle | 3354 | -1476 | +44 | 3357 | -1479 | +41 | 3334 | -1520 |
| RTD | 3470 | | | | | | 3379 | |
| LTD | | | | 3472 | | | 3379 | |

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ORIGINAL 8-11-05

Allied Cementing Co., Inc
P.O. Box 31
Russell, KS 67665

* INVOICE *

Invoice Number: 097564

Invoice Date: 07/12/05

Sold Murfin Drilling Co.
To: 250 N. Water, St. #300
Wichita, KS
67202

COPY

operator pay
/DB

Cust I.D.....: Murfin
P.O. Number...: Mudd 1-5
P.O. Date.....: 07/12/05

Due Date.: 08/11/05
Terms.....: Net 30

| Item I.D./Desc. | Qty. Used | Unit | Price | Net | TX |
|------------------|-----------|------|----------|---------|----|
| Common | 150.00 | SKS | 8.7000 | 1305.00 | T |
| Gel | 3.00 | SKS | 14.0000 | 42.00 | T |
| Chloride | 5.00 | SKS | 38.0000 | 190.00 | T |
| Handling | 158.00 | SKS | 1.6000 | 252.80 | E |
| Mileage min.chg. | 1.00 | MILE | 180.0000 | 180.00 | E |
| Surface | 1.00 | JOB | 670.0000 | 670.00 | E |
| Mileage pmp trk | 15.00 | MILE | 5.0000 | 75.00 | E |
| Wooden Plug | 1.00 | EACH | 55.0000 | 55.00 | T |

All Prices Are Net, Payable 30 Days Following Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 276.98
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2769.80
 Tax.....: 108.26
 Payments: 0.00
 Total....: 2878.06

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276.98
2601.08

| Account | Unit | W | No. | Amount | Description |
|---------|-------|---|------|----------|----------------|
| | Rig | L | | | |
| 03600 | 02440 | | 2285 | 2878.06 | Cement S. (29) |
| | | | | (276.98) | |
| | | | | | |
| | | | | | |

ALLIED CEMENTING CO., INC.

21579 ORIGINAL

CONFIDENTIAL

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

SERVICE POINT:

Russell

| | | | | | | | |
|-------------------------|-------------------|---------------------------------------|--------------|-----------------------|---------------------------|-----------------------|--------------------------|
| DATE <u>7-7-05</u> | SEC. | TWP. | RANGE | CALLED OUT | ON LOCATION <u>5:15pm</u> | JOB START <u>5:40</u> | JOB FINISH <u>6:00pm</u> |
| LEASE <u>Mudd</u> | WELL# <u>H-15</u> | LOCATION <u>Gotham 5 1/2 S 1E 3 S</u> | | COUNTY <u>Russell</u> | | STATE <u>Ka</u> | |
| OLD OR NEW (Circle one) | | | <u>Wells</u> | | | | |

CONTRACTOR Martin Drilling Rig 24

TYPE OF JOB Surface

HOLE SIZE 12 1/4" T.D.

CASING SIZE 8 1/2" DEPTH 220'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 13 BU

OWNER

CEMENT

AMOUNT ORDERED 150 lbs Can 3 1/2 CC

2 1/2 Gal

| | | | | |
|----------|----------------------|---|--------------|-----------------|
| COMMON | <u>150</u> | @ | <u>870</u> | <u>1,305.00</u> |
| POZMIX | | @ | | |
| GEL | <u>3</u> | @ | <u>1400</u> | <u>42.00</u> |
| CHLORIDE | <u>5</u> | @ | <u>38.00</u> | <u>190.00</u> |
| ASC | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| HANDLING | <u>158</u> | @ | <u>1.60</u> | <u>252.80</u> |
| MILEAGE | <u>6 R/ SK/ mile</u> | | | <u>180.00</u> |
| TOTAL | | | | <u>1,969.80</u> |

EQUIPMENT

PUMP TRUCK CEMENTER Steve

345 HELPER Craig

BULK TRUCK

213 DRIVER Doug

BULK TRUCK

DRIVER

REMARKS:

Cement did Circulate

Thank You

CHARGE TO: Martin

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE 670.00

EXTRA FOOTAGE @ _____

MILEAGE 15 @ 500 75.00

MANIFOLD @ _____

@ _____

@ _____

TOTAL 745.00

PLUG & FLOAT EQUIPMENT

1 Wooden Plug @ 55.00

@ _____

@ _____

@ _____

TOTAL 55.00

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
Good Job

Anthony Martin
PRINTED NAME