

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

Operator: License # 33269
 Name: Central Operating, Inc.
 Address: Denver, CO 80202 1600 Broadway #1050
 City/State/Zip: Denver, CO 80202
 Purchaser: NCRA
 Operator Contact Person: P.A. Brew
 Phone: (303) 894-9576
 Contractor: Name: Forrest Energy, LLC Rig 3
 License: 33436
 Wellsite Geologist: Jerry Green
 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: Central Operating, Inc.
 Well Name: Krug #1-4
 Original Comp. Date: 11-28-04 Original Total Depth: 3264'
 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. _____

<u>11-17-04</u>	<u>11-28-04</u>	<u>1-12-05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15- 167-23268-00-00
 County: Russell *Appx. 130'S + 30'E of*
N/2 - N/2 SW/4 Sec 4 Twp. 15 S. R. 14 East West
2190' feet from S N (circle one) Line of Section
1350' feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Krug Well #: 1-4
 Field Name: Kennebec
 Producing Formation: Arbuckle
 Elevation: Ground: 1767 Kelly Bushing: 1772
 Total Depth: 3260' Plug Back Total Depth: 3224'
 Amount of Surface Pipe Set and Cemented at 205' Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 3251'
 feet depth to surface w/ 450 sx cmt.

Drilling Fluid Management Plan *ALT II W/ Hm*
 (Data must be collected from the Reserve Pit) *7-24-04*
 Chloride content 49,000 ppm Fluid volume 600 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: P.A. Brew
 Title: President Date: March 4, 2005
 Subscribed and sworn to before me this 4th day of March
19 2005
 Notary Public: [Signature]
 Date Commission Expires: May 08, 2007

KCC Office Use ONLY

NO Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
MAR 17 2005
KCC WICHITA

Operator Name: Central Operating, Inc. Lease Name: Krug 1-4 Well #: 1-4

Sec. 4 Twp. 15 S. R. 14 East West County: Russell

INSTR. 107-108-109-110-111-112-113-114-115-116-117-118-119-120-121-122-123-124-125-126-127-128-129-130-131-132-133-134-135-136-137-138-139-140-141-142-143-144-145-146-147-148-149-150-151-152-153-154-155-156-157-158-159-160-161-162-163-164-165-166-167-168-169-170-171-172-173-174-175-176-177-178-179-180-181-182-183-184-185-186-187-188-189-190-191-192-193-194-195-196-197-198-199-200-201-202-203-204-205-206-207-208-209-210-211-212-213-214-215-216-217-218-219-220-221-222-223-224-225-226-227-228-229-230-231-232-233-234-235-236-237-238-239-240-241-242-243-244-245-246-247-248-249-250-251-252-253-254-255-256-257-258-259-260-261-262-263-264-265-266-267-268-269-270-271-272-273-274-275-276-277-278-279-280-281-282-283-284-285-286-287-288-289-290-291-292-293-294-295-296-297-298-299-300-301-302-303-304-305-306-307-308-309-310-311-312-313-314-315-316-317-318-319-320-321-322-323-324-325-326-327-328-329-330-331-332-333-334-335-336-337-338-339-340-341-342-343-344-345-346-347-348-349-350-351-352-353-354-355-356-357-358-359-360-361-362-363-364-365-366-367-368-369-370-371-372-373-374-375-376-377-378-379-380-381-382-383-384-385-386-387-388-389-390-391-392-393-394-395-396-397-398-399-400-401-402-403-404-405-406-407-408-409-410-411-412-413-414-415-416-417-418-419-420-421-422-423-424-425-426-427-428-429-430-431-432-433-434-435-436-437-438-439-440-441-442-443-444-445-446-447-448-449-450-451-452-453-454-455-456-457-458-459-460-461-462-463-464-465-466-467-468-469-470-471-472-473-474-475-476-477-478-479-480-481-482-483-484-485-486-487-488-489-490-491-492-493-494-495-496-497-498-499-500-501-502-503-504-505-506-507-508-509-510-511-512-513-514-515-516-517-518-519-520-521-522-523-524-525-526-527-528-529-530-531-532-533-534-535-536-537-538-539-540-541-542-543-544-545-546-547-548-549-550-551-552-553-554-555-556-557-558-559-560-561-562-563-564-565-566-567-568-569-570-571-572-573-574-575-576-577-578-579-580-581-582-583-584-585-586-587-588-589-590-591-592-593-594-595-596-597-598-599-600-601-602-603-604-605-606-607-608-609-610-611-612-613-614-615-616-617-618-619-620-621-622-623-624-625-626-627-628-629-630-631-632-633-634-635-636-637-638-639-640-641-642-643-644-645-646-647-648-649-650-651-652-653-654-655-656-657-658-659-660-661-662-663-664-665-666-667-668-669-670-671-672-673-674-675-676-677-678-679-680-681-682-683-684-685-686-687-688-689-690-691-692-693-694-695-696-697-698-699-700-701-702-703-704-705-706-707-708-709-710-711-712-713-714-715-716-717-718-719-720-721-722-723-724-725-726-727-728-729-730-731-732-733-734-735-736-737-738-739-740-741-742-743-744-745-746-747-748-749-750-751-752-753-754-755-756-757-758-759-760-761-762-763-764-765-766-767-768-769-770-771-772-773-774-775-776-777-778-779-780-781-782-783-784-785-786-787-788-789-790-791-792-793-794-795-796-797-798-799-800-801-802-803-804-805-806-807-808-809-810-811-812-813-814-815-816-817-818-819-820-821-822-823-824-825-826-827-828-829-830-831-832-833-834-835-836-837-838-839-840-841-842-843-844-845-846-847-848-849-850-851-852-853-854-855-856-857-858-859-860-861-862-863-864-865-866-867-868-869-870-871-872-873-874-875-876-877-878-879-880-881-882-883-884-885-886-887-888-889-890-891-892-893-894-895-896-897-898-899-900-901-902-903-904-905-906-907-908-909-910-911-912-913-914-915-916-917-918-919-920-921-922-923-924-925-926-927-928-929-930-931-932-933-934-935-936-937-938-939-940-941-942-943-944-945-946-947-948-949-950-951-952-953-954-955-956-957-958-959-960-961-962-963-964-965-966-967-968-969-970-971-972-973-974-975-976-977-978-979-980-981-982-983-984-985-986-987-988-989-990-991-992-993-994-995-996-997-998-999-1000

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:
 Dual Induction Log
 Radiation Guard Log
 Compensated Density/Neutron Log LKC
 Micro Log

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Name		
Grandhaven	2338-578 ^P	2338-574
Tarkio	2410-668	2406-634
Elmont	2440-668	2437-665
Howard	2613-841	2608-836
Topeka	2678-908	2672-900
Heebner	2899-1127	2904-1132
Toronto	2916-1144	2922-1150
LKC	2959-1187	2964-1192
Arbuckle	3209-1437	3204-1432
RTD	3264-1492	3260-1488

CASING RECORD <input 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	# Sacs Used	Type and Percent Additives
Production	7-7/8	5 & 1/2 New	14#	3251'	ALHD	450 SK	

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 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
	Perf Arb. 3209-12' (3'), 3-3/8 expendable HSC, 4 jspf		
	Perf L-KC "I" 3129-33' (4), 3-3/8 expendable HSC, 4 jspf. 500 gal. 15%MCA		
	Perf Arb. 3212-14' (2)', 3-3/8 expendable HSC, 4 jspf		
	Perf Arb. 3214-15' (1)', 3-3/8" expendable HSC 4 jspf.		
	Arb. 3209-15' w/250 gal. 15% MCA W5% acetic acid		
	Arb. 3210-18 & L-KC "I" 3129-33' w/1500 gal. 15% NEFE, 150# rock salt & a50# benzoic flakes		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-3/8	4.7#	3234.41	N/A
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

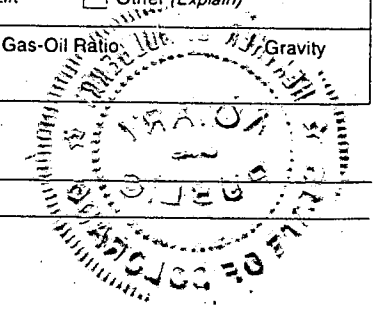
Date of First, Resumerd Production, SWD or Enhr. 1-19-05 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	5 Bbls.				

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval





FIELD ORDER N° 25790

ORIGINAL

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE 11-18 20 04

AUTHORIZED BY: CENTRAL OPERATING Co
(NAME OF CUSTOMER)
Address 1600 Broadway Ste 1050 City DENVER State CO 80202
To Treat Well As Follows: Lease KRUG Well No. 1-4 Customer Order No. _____
Sec. Twp. Range _____ County RUSSELL State KS

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED _____ By _____
Well Owner or Operator Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
410	40	MILEAGE	2.50	100.00
410	1	PUMP CHARGE		500.00
misc	1	WOODEN PLUG 8 5/8		75.00
4000	200	Common	7.25	1450.00
4051	7	CALCIUM CHLORIDE 39 CC	25.00	175.00
		7% Fuel Surcharge		164.38
			RECEIVED	
			MAR 17 2005	
			KCC WICHITA	
4200	200	Bulk Charge	1.00	200.00
4201		Bulk Truck Miles 9.4 TX 40m = 376 TM	.85	319.60
		Process License Fee on _____ Gallons		
		TOTAL BILLING		2819.60

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative A. G. CURTIS
Station OB _____
Well Owner, Operator or Agent Roger

Remarks _____



TREATMENT REPORT

ORIGINAL

Acid Stage No.

Date 11-18 04 District 6B F. O. No. 25790
 Company CENTRAL Op. Co
 Well Name & No. KRUG 1-4
 Location _____ Field _____
 County RUSSEN State KS
 Casing: Size 8 5/8 Type & Wt. _____ Set at 2 1/2 ft.
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Liner: Size _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes/No. Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. _____ Swung at _____ ft.
 Perforated from _____ ft. to _____ ft.
 Open Hole Size _____ T.D. _____ ft. P.B. to _____ ft.

Type Treatment: Amt. _____ Type Fluid _____ Sand Size _____ Pounds of Sand _____
 Bkdown: _____ Bbl. /Gal. _____
 _____ Bbl. /Gal. _____
 _____ Bbl. /Gal. _____
 _____ Bbl. /Gal. _____
 Flush _____ Bbl. /Gal. _____
 Treated from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 Actual Volume of Oil/Water to Load Hole: _____ Bbl. /Gal.
 Pump Trucks. No. Used: Std. _____ Sp. _____ Twin _____
 Auxiliary Equipment _____
 Packer: _____ Set at _____ ft.
 Auxiliary Tools _____
 Plugging or Sealing Materials: Type _____

Company Representative Roger Treater AIG. CURTIS

TIME a.m / p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
<u>04:30</u>				<u>ON LOCATION</u>
				<u>RIG CIRCULATING FOR 15 MINS</u>
				<u>MIX CEMENT</u>
				<u>200 COMMON 390 CC</u>
				<u>START DISPLACEMENT</u>
<u>05:45</u>				<u>PLUG DOWN</u>
				<u>CEMENT CIRCULATED</u>
				<u>25 SKS TO PIT</u>
				<u>RECEIVED</u>
				<u>MAR 17 2005</u>
				<u>KCC WICHITA</u>
				<u>JOB COMPLETE</u>
				<u>THANK YOU</u>
				<u>AIG. CURTIS</u>

ORIGINAL

Shane K. Brown
Shane's Tank Service, PO Box 215
Russell, KS 67665

Phone: 483-4029
Fax:

Invoice No.: 7544
Page No.: 1
Date: 03/01/05
Customer No.: CENTRAL

Bill To:

Central Operating Company
1600 Broadway Suite 1050
Denver, CO 80202

Lease: Krug 1-4

Attention:

Service Date: 02/19/05	Terms Net 30 Days	Due Date 03/31/05	P.O. Number	
Hours	Description		Rate	Amount

1.00	Hauled 80 bbl of water off reserve pit.		68.00	68.00
------	---	--	-------	-------

Item Total 68.00

Plus Sales Tax 0.00

Invoice Total \$ 68.00

Krug 1-4

10-12

JR

RECEIVED
MAR 17 2005
KCC WICHITA

1.5% Finance Charge Per Month on Past Due Balances

ALLIED CEMENTING CO., INC. 18970

ORIGINAL

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

SERVICE POINT:

Russell

DATE <u>1-27-04</u>	SEC. <u>4</u>	TWP. <u>15</u>	RANGE <u>14</u>	CALLED OUT <u>6:45PM</u>	ON LOCATION <u>9:30PM</u>	JOB START <u>9:00PM</u>	JOB FINISH <u>10:30PM</u>
LEASE <u>KRUG</u>	WELL # <u>1-4</u>	LOCATION <u>Russell S. To Rur. 2W</u>			COUNTY <u>Russell</u>	STATE <u>KANSAS</u>	
OLD OR <u>NEW</u> (Circle one)				<u>V.S.</u>			

CONTRACTOR Forrest Daly Rig #3
 TYPE OF JOB Production String (Circ. Cement)
 HOLE SIZE 7 7/8 T.D. 3260'
 CASING SIZE 5 1/2 New DEPTH 3251'
 TUBING SIZE 14# DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL AFU INSERT DEPTH 3235'
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT 16'
 CEMENT LEFT IN CSG. 16'
 PERFS. _____
 DISPLACEMENT 79 / BBL

EQUIPMENT

PUMP TRUCK CEMENTER Glen
 # 366 HELPER Shane
 BULK TRUCK _____
 # 213 DRIVER GARY
 BULK TRUCK _____
 # 362 DRIVER Russ

REMARKS:

Cement did circulate
@ 50 BBL disp. out.
LAND Plug @ 1,000#
FOAT DID NOT HOLD when released
LEFT shut in @ 500# overnight.
15 SK @ RATHole THANKS

CHARGE TO: Central Operating Inc.

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.

don't
F#T

OWNER _____
 CEMENT AMOUNT ORDERED 450 sk ALHD

COMMON	@		
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC	@		
ALHD	@	<u>450</u>	<u>1360</u>
	@		<u>6120.00</u>
RECEIVED			
MAR 17 2005			
KCC WICHITA			
HANDLING	@	<u>450</u>	<u>135</u>
MILEAGE	@	<u>54/sk/mile</u>	<u>225.00</u>
			TOTAL <u>6952.50</u>

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>1180.00</u>
EXTRA FOOTAGE	@		
MILEAGE	@	<u>10</u>	<u>400</u>
MANIFOLD	@		
	@		
	@		
			TOTAL <u>1220.00</u>

**5 1/2 WEATHERFORD
PLUG & FLOAT EQUIPMENT**

1- Guide Shoe	@		<u>150.00</u>
1- AFU INSERT	@		<u>235.00</u>
3- BASKETS	@	<u>128.00</u>	<u>384.00</u>
7- CENTRALIZERS	@	<u>50.00</u>	<u>350.00</u>
1- RUBBER Plug	@		<u>60.00</u>
			TOTAL <u>1179.00</u>

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