

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Handwritten initials and date

7/15/10

Operator: License # 3842
Name: 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: H. D. DRILLING
License: 33935
Wellsite Geologist: ROBERT LEWELLWN

API No. 15 - 135-24754-00-00
County: NESS
SE NE SW SE Sec. 30 Twp. 18 S. R. 26 East West
700 feet from SOUTH Line of Section
1570 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: VOGEL Well #: 1-30
Field Name: WILDCAT
Producing Formation: MISSISSIPPI
Elevation: Ground: 2581' Kelly Bushing: 2586'
Total Depth: 4612' Plug Back Total Depth: 4565'
Amount of Surface Pipe Set and Cemented at 260' Feet
Multiple State Cementing Collar Used? Yes No
If yes, show depth set 1925' Feet
If Alternate II completion, cement circulated from 1925'
feet depth to SURFACE w/ 200 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)

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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. _____

3/22/2008 3/31/2008 4/23/2008
Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 14400 ppm Fluid volume 610 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: 7/15/2008
Subscribed and sworn to before me this 15TH day of JULY,
2008.
Notary Public: Debra J. Ludwig
Date Commission Expires: MAY 5, 2012

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

RECEIVED
KANSAS CORPORATION COMMISSION
JUL 17 2008

DEBRA J. LUDWIG
Notary Public - State of Kansas
My Appt. Expires 5/5/2012

CONSERVATION DIVISION
WICHITA