

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

CONFIDENTIAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

* note : slight footage change from original Intent To Drill due to change in drlg contractor

Operator: License # 3842
Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC.
Address: 562 WEST HIGHWAY 4
City/State/Zip: OLMITZ, KS 67564-8561
Purchaser: _____
Operator Contact Person: TOM LARSON **KCC**
Phone: (620) 653-7368
Contractor: Name: SUMMIT DRILLING **NOV 18 2004**
License: 30141 **CONFIDENTIAL**
Wellsite Geologist: TIM HEDRICK

Designate Type of Completion:
____ New Well ____ Re-Entry ____ Workover
____ Oil ____ SWD ____ SLOW ____ Temp Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ X ____ PIPELINE CONNECTION
Other DELAYED COMPLETION WAITING ON

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. _____

7/27/2004 8/1/2004 DELAYED COMPLETION
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 053-21130-0000
County: ELLSWORTH
NW SW SE Sec. 18 Twp. 16 S. R. 7 East West
940 * 979 feet from SOUTH Line of Section
2130 * 2249 feet from EAST Line of Section
KCC GPS
Footages Calculated from Nearest Outside Section Corner:

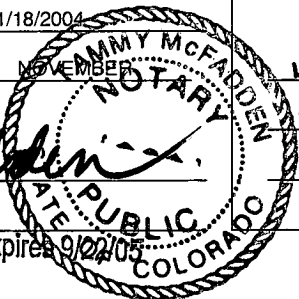
(circle one) NE **SE** NW SW
Lease Name: SCHROEDER TRUST Well #: 2X-18
Field Name: WILDCAT
Producing Formation: DELAYED COMPLETION
Elevation: Ground: 1588' Kelly Bushing: 1598'
Total Depth: 2220' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 269 Feet
Multiple State Cementing 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) **ALT I w/ km**
8-28-07
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____ **RECEIVED**
KANSAS CORPORATION COMMISSION
Lease Name: _____ License No.: **NOV 19 2004**
Quarter _____ Sec. _____ Twp. _____ S. R. East West
County: _____ Docket No.: _____ **CONSERVATION DIVISION**
WICHITA, KS

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: Thomas H Fental
Title: SR. GEOLOGIST Date: 11/18/2004
Subscribed and sworn to before me this 18TH day of NOVEMBER
2004.
Notary Public: Jammy McFadden
Date Commission Expires: _____
My Commission Expires 9/22/05



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

Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC. Lease Name: SCHROEDER TRUST Well #: 2X-18
 Sec. 18 Twp. 16 S. R. 7 East West County: ELLSWORTH

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Sample 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: <u>RADIATION GUARD LOG</u> <u>NEUTRON / DENSITY POROSITY LOG</u>	<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>HUTCHISON SALT</td> <td>600</td> <td>998</td> </tr> <tr> <td>HERRINGTON</td> <td>1006</td> <td>592</td> </tr> <tr> <td>FLORENCE</td> <td>1206</td> <td>392</td> </tr> <tr> <td>RED EAGLE</td> <td>1580</td> <td>18</td> </tr> <tr> <td>GRAND HAVEN</td> <td>1793</td> <td>-195</td> </tr> <tr> <td>SEVERY</td> <td>2159</td> <td>-561</td> </tr> <tr> <td>TOPEKA</td> <td>2190</td> <td>-592</td> </tr> <tr> <td>TD</td> <td>2220</td> <td></td> </tr> </table> <div style="text-align: center; margin-top: 20px;"> <p>KCC</p> <p>NOV 18 2004</p> <p>CONFIDENTIAL</p> </div>	Name	Top	Datum	HUTCHISON SALT	600	998	HERRINGTON	1006	592	FLORENCE	1206	392	RED EAGLE	1580	18	GRAND HAVEN	1793	-195	SEVERY	2159	-561	TOPEKA	2190	-592	TD	2220	
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TD	2220																											

CASING RECORD <input checked="" type="checkbox"/> New <input checked="" 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"	28	280'	CLASS A	175	2% GEL & 3% CC
PRODUCTION	7-7/8"	4-1/2"	10.5	2215'	ALW ASC	100 100	1/4#/sk flocele 7#/sk gilsonite

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			

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
	NONE -- WAITING ON PIPELINE CONNECTION	<p>RECEIVED</p> <p>KANSAS CORPORATION COMMISSION</p> <p>NOV 19 2004</p> <p>CONSERVATION DIVISION WICHITA, KS</p>	

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed 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 <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>If vented, submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID: _____

RECEIVED AUG 03 2004

 * I N V O I C E *

Invoice Number: 093933

Invoice Date: 07/31/04

Sold Larson Operating Co.
 To: 562 W. HiWay #4
 Olmitz, KS
 67564

KCC
 NOV 18 2004
CONFIDENTIAL

RECEIVED
 KANSAS CORPORATION COMMISSION

NOV 19 2004

CONSERVATION DIVISION
 WICHITA, KS

Cust I.D.....: Larson
 P.O. Number...: Schroeder TR. 2X-18
 P.O. Date.....: 07/31/04

Due Date: 08/30/04
 Terms: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	175.00	SKS	7.8500	1373.75	T
Gel	4.00	SKS	11.0000	44.00	T
Chloride	5.00	SKS	33.0000	165.00	T
Handling	184.00	SKS	1.3500	248.40	E
Mileage (50)	50.00	MILE	9.2000	460.00	E
184 sks @\$.05 per sk per mi					
Surface	1.00	JOB	570.0000	570.00	E
Mileage pmp trk	50.00	MILE	4.0000	200.00	E
Wooden Plug	1.00	EACH	55.0000	55.00	T

All Prices Are Net, Payable 30 Days Following Subtotal: 3116.15
 Date of Invoice 1 1/2% Charged Thereafter. Tax..... 94.99
 If Account CURRENT take Discount of \$ 311.61 Payments: 0.00
 ONLY if paid within 30 days from Invoice Date Total...: 3211.14
 <311.61>
 2899.53

DRLG COMP W/O LOE

AFE # _____
 ACCT # 135/60
 APPROVED BY *T.C. Larson*

RECEIVED AUG 6 2004

ALLIED CEMENTING CO., INC.

P.O. BOX 31
RUSSELL, KS 67665
PH (785) 483-3887
FAX (785) 483-5566
FEDERAL TAX I

*
* INVOICE *
*

Invoice Number: 093990

Invoice Date: 07/31/04

Sold Larson Operating Co.
To: 562 W. HiWay #4
Olmitz, KS
67564

KCC
NOV 18 2004
CONFIDENTIAL

RECEIVED
KANSAS CORPORATION COMMISSION

NOV 19 2004

CONSERVATION DIVISION
WICHITA, KS

Cust I.D. Larson
P.O. Number ... Schroeder TR 2X-18
P.O. Date 07/31/04

Due Date.: 08/30/04
Terms..... Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
ALW	100.00	SKS	7.3000	730.00	T
ASC	100.00	SKS	9.8000	980.00	T
FloSeal	25.00	LBS	1.4000	35.00	T
KolSeal	700.00	LBS	0.5000	350.00	T
CD-31	50.00	PER	5.5000	275.00	T
DeFoamer	16.00	PER	5.2500	84.00	T
ASF	500.00	GAL	1.0000	500.00	T
ClaPro	1.00	GAL	22.9000	22.90	T
Handling	237.00	SKS	1.3500	319.95	E
Mileage (50)	50.00	MILE	11.8500	592.50	E
237 sks @\$.05 per sk per mi					
Production	1.00	JOB	570.0000	570.00	E
Extra Footage	1918.00	PER	0.5000	959.00	E
Mileage pmp trk	50.00	MILE	4.0000	200.00	E
Rubber Plug	1.00	EACH	45.0000	45.00	T
Rotating Head	1.00	EACH	75.0000	75.00	T

All Prices Are Net, Payable 30 Days Following
Date of Invoice. 1 1/2% Charged Thereafter.
If Account CURRENT take Discount of \$ 573.83
ONLY if paid within 30 days from Invoice Date

Subtotal: 5738.35
Tax..... 179.62
Payments: 0.00
Total.... 5917.97

<573.83>

5344.14

DRLG COMP W/O LOE

AFE # _____

ACCT # 137/60

APPROVED BY J.L. Larson