

ORIGINAL

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

Operator: License # 33335
 Name: IA Operating, Inc.
 Address: 9915 W. 21st Street N, Ste B
 City/State/Zip: Wichita, KS 67205
 Purchaser: None
 Operator Contact Person: Hal Porter
 Phone: (316) 721-0036
 Contractor: Name: Murfin Drilling Co., Inc.
 License: 30606
 Wellsite Geologist: Randall Kilian
 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. _____

06/03/08	06/08/08	06/08/08
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-137-20480-0000
 County: Norton
 SW - SW - NE - Sec. 21 Twp. 2 S. R. 25 East West
2300 feet from S / (N) (circle one) Line of Section
2300 feet from (E) / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: D. Stapp Well #: 21-1
 Field Name: Wildcat
 Producing Formation: None
 Elevation: Ground: 2577' Kelly Bushing: 2582'
 Total Depth: 3888' Plug Back Total Depth: 3888'
 Amount of Surface Pipe Set and Cemented at 329' Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from _____
 feet depth to PA-DIG - 7/3/08 w/ _____ sx cmt.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 5,000 ppm Fluid volume 400 bbls
 Dewatering method used Evaporation/Backfill
 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: Hal C. Porter
 Title: President Date: 6/16/08
 Subscribed and sworn to before me this 16 day of June,
 20 08.
 Notary Public: Julie Burrows
 Date Commission Expires: March 10, 2009

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

RECEIVED
 KANSAS CORPORATION COMMISSION

JUN 18 2008

JULIE BURROWS
 NOTARY PUBLIC
 STATE OF KANSAS
 My Appt. Exp. 3-10-09

CONSERVATION DIVISION
 WICHITA, KS

Operator Name: IA Operating, Inc. Lease Name: D. Stapp Well #: 21-1
 Sec. 21 Twp. 2 S. R. 25 East West County: Norton

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 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:

Geologist's Well Report, Micro Log, Dual Induction Log, Compensated Density/Neutron Log

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Anhydrite	2106'	+476
Topeka	3302'	-720
Toronto	3504'	-922
Lansing	3515'	-933
Regan Sand	3840'	-1258
Total Depth	3888'	-1306

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"	23#	329'	Common	200	3% CC, 2% gel

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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone		60/40 Poz	200	4% gel, 1/4# flo-seal

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumerd 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
	0	0	0		

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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KANSAS CORPORATION COMMISSION

JUN 18 2008

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 31663

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

SERVICE POINT:
Oakley

DATE <u>6-8-08</u>	SEC. <u>21</u>	TWP. <u>2</u>	RANGE <u>25</u>	CALLED OUT	ON LOCATION <u>6:30 AM</u>	JOB START <u>7:30 AM</u>	JOB FINISH <u>9:00 AM</u>
LEASE <u>D. Stapp</u>	WELL # <u>21-1</u>	LOCATION <u>Norton 13w 2 1/2 N w into</u>			COUNTY <u>Norton</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Murfin Drilling Rig 16 OWNER Same

TYPE OF JOB PTA
 HOLE SIZE 7 7/8 T.D. 3888'
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 2120'
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

CEMENT
AMOUNT ORDERED 200 sks 6 3/4 4 1/2 gel
14# Flo-seal

EQUIPMENT

PUMP TRUCK CEMENTER Andrew
 # 423-281 HELPER Alvin
 BULK TRUCK
 # 218 DRIVER Lonnie
 BULK TRUCK
 # _____ DRIVER _____

COMMON	<u>120 sks</u>	@	<u>14.20</u>	<u>1704.00</u>
POZMIX	<u>80 sks</u>	@	<u>7.20</u>	<u>576.00</u>
GEL	<u>7 sks</u>	@	<u>18.25</u>	<u>127.75</u>
CHLORIDE		@		
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>209 sks</u>	@	<u>2.15</u>	<u>449.35</u>
MILEAGE	<u>98 sk/mile</u>			<u>1598.85</u>
				TOTAL <u>4571.95</u>

REMARKS:

25 sks @ 2120'
100 sks @ 1325'
40 sks @ 380'
10 sks @ 40'
10 sks mouse hole
15 sks Rat holes
thank you

SERVICE

DEPTH OF JOB 2120'
 PUMP TRUCK CHARGE _____ 1625.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 85 miles @ 7.00 595.00
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL 1620.00

CHARGE TO: FA operating
 STREET _____
 CITY _____ STATE _____ ZIP _____

RECEIVED
KANSAS CORPORATION COMMISSION

JUN 18 2008

CONSERVATION DIVISION
WICHITA KS

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME AFD

SIGNATURE Andy Dinkel

PLUG & FLOAT EQUIPMENT

8 5/8
1 Dry hole plug @ 40.00
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL 40.00

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC. 31994

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

SERVICE POINT: Oakley, KS

DATE <u>6/3/08</u>	SEC. <u>21</u>	TWP. <u>2</u>	RANGE <u>25</u>	CALLED OUT	ON LOCATION <u>4:30pm</u>	JOB START <u>6:30pm</u>	JOB FINISH <u>7:00pm</u>
LEASE <u>Stapp</u>	WELL # <u>21-7</u>	LOCATION <u>Norton 13 1/2 to Rd 13 2 1/2 N</u>			COUNTY <u>Norton</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>				<u>W. into</u>			

CONTRACTOR Mur Fin #16

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 329'

CASING SIZE 8 7/8 DEPTH 329'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15 FT

PERFS.

DISPLACEMENT 20 BBL

OWNER Senne

CEMENT AMOUNT ORDERED 200 com 3070 CL 290 Gel

COMMON	<u>200 SKS</u>	@ <u>14.20</u>	<u>2840.00</u>
POZMIX		@	
GEL	<u>4 jly</u>	@ <u>18.75</u>	<u>75.00</u>
CHLORIDE	<u>7 SK</u>	@ <u>52.45</u>	<u>367.15</u>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>211 SKS</u>	@ <u>2.15</u>	<u>453.15</u>
MILEAGE	<u>94 SK/mile</u>		<u>1614.15</u>
TOTAL			<u>5349.25</u>

EQUIPMENT

PUMP TRUCK CEMENTER Alan

422 HELPER Wayne

BULK TRUCK

377 DRIVER Rex

BULK TRUCK

DRIVER

REMARKS:

Cement did Circulate

Thank You
Alan, Wayne, Rex

SERVICE

DEPTH OF JOB	<u>329</u>		
PUMP TRUCK CHARGE			<u>917.00</u>
EXTRA FOOTAGE	<u>29</u>	@ <u>.80</u>	<u>23.20</u>
MILEAGE	<u>85</u>	@ <u>7.00</u>	<u>595.00</u>
MANIFOLD		@	
		@	
		@	
TOTAL			<u>1535.20</u>

CHARGE TO: I.A. Operating

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
TOTAL _____		
SALES TAX (If Any) _____		
TOTAL CHARGES _____		
DISCOUNT _____ IF PAID IN 30 DAYS		

RECEIVED
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To Allied Cementing Co., LLC.

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PRINTED NAME AFO

SIGNATURE Andy Lingo