

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 6804
Name: LACHENMAYR OIL CO.
Address: 904 EMMALINE AVE.
City/State/Zip: NEWTON, KS 67114
Purchaser: SEMCRUDE
Operator Contact Person: HOWARD LACHENMAYR
Phone: (316) 282-0400
Contractor: Name: SCOTTS WELL SERVICE
License: 6819
Wellsite Geologist: NONE

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: TAYLOR OIL CO.
Well Name: VON FELDT #1
Original Comp. Date: 7/27/61 Original Total Depth: 3020'
 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. _____

5-25-07 8/07/07 8/08/07
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 173-03692-00-01
County: SEDGWICK
 NW NE SE Sec. 17 Twp. 25 S. R. 1 East West
2310 feet from (S) N (circle one) Line of Section
2310 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: HALEY Well #: 1
Field Name: GOODRICH
Producing Formation: _____
Elevation: Ground: 1414 Kelly Bushing: _____
Total Depth: 3048 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 150 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 WD NH 7-17-08
(Data must be collected from the Reserve Pit)
Chloride content 1700 ppm Fluid volume 150 bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: LACHENMAYR OIL CO.
Lease Name: GOODRICH License No.: 6804
Quarter NW Sec. 17 Twp. 25S S. R. 1E East West
County: SEDGWICK Docket No.: D-28341

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: Howard Lachenmayr
Title: Operator Date: 8-23-07
Subscribed and sworn to before me this 28th day of aug
07
Notary Public: Barbara L. Brown
Date Commission Expires: 10-11-10

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION

SEP 04 2007

BARBARA L. BROWN
Notary Public - State of Kansas
My Appt. Expires Oct. 11, 2010

CONSERVATION DIVISION
WICHITA, KS

Operator Name: LACHENMAYR OIL CO. Lease Name: HALEY Well #: 1
 Sec. 17 Twp. 25 S. R. 1 East West County: SEDGWICK

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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: GAMMA, NEUTRON, AND BOND	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>LANSING</td> <td>2326</td> <td>-912</td> </tr> <tr> <td>KANSAS CITY</td> <td>2506</td> <td>-1092</td> </tr> </table>	Name	Top	Datum	LANSING	2326	-912	KANSAS CITY	2506	-1092
Name	Top	Datum								
LANSING	2326	-912								
KANSAS CITY	2506	-1092								

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	# Sacks Used	Type and Percent Additives
SURFACE		8 5/8"		150'			SET BY OTHERS
PRODUCTION		5 1/2"		3008'			SET BY OTHERS

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 <i>(Amount and Kind of Material Used)</i>	Depth
		1000 GALS. 28% HCL ACID	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 7/8"		2980'		
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	

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

METHOD OF COMPLETION Production Interval

RECEIVED
 KANSAS CORPORATION COMMISSION
SEP 04 2007
 CONSERVATION DIVISION
 WICHITA, KS