

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

RECEIVED
AUG 0, 6 2005
KCC WICHITA

API No. 15- 195-20,608-00-01

County Trego

100' North of E
- NE - SE - SE Sec. 35 Twp. 12S Rge. 21 X W

1090 1141 Feet from (SYN) (circle one) Line of Section
330 436 Feet from (EW) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)

Lease Name Duncan Well # SWD

Field Name Ellis

SWD Formation Cedar Hills

Elevation: Ground 2201' KB 2206'

Total Depth 3850' PBDT 1345'

Amount of Surface Pipe Set and Cemented at _____ 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 OWWO SWD KGR 12/19/07
(Data must be collected from the Reserve PTT)

Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

Operator: License # 5135

Name: John O. Farmer, Inc.

Address P.O. Box 352

City/State/Zip Russell, KS 67665

Purchaser: _____

Operator Contact Person: John O. Farmer III

Phone (785) 483-3144

Contractor: Name: _____

License: _____

Wellsite Geologist: _____

Designate Type of Completion

_____ New Well _____ Re-Entry X Workover

_____ Oil X SWD _____ SIOW _____ Temp. Abd.

_____ Gas _____ ENHR _____ SIGW

_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-Entry: old well info. as follows:

Operator: A. Scott Ritchie

Well Name: #1 Duncan

Comp. Date 2-21-80 Old Total Depth 3850'

_____ Deepening _____ Re-perf. X Conv. to Inj. (SWD)

_____ Plug Back _____ PBDT

_____ Commingled _____ Docket No. D-28,040

_____ Dual Completion _____ Docket No. _____

_____ Other (SWD or Inj?) _____ Docket No. _____

7-22-02 8-1-02

Re-entry Date _____ Date Reached TD _____ Recompletion Date _____

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 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 John O. Farmer III

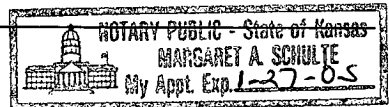
John O. Farmer III

Title President Date 8-5-02

Subscribed and sworn to before me this 5th day of August,
20 02.

Notary Public Margaret A. Schulte
Margaret A. Schulte

Date Commission Expires _____



K.C.C. OFFICE USE ONLY
F N Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received
Distribution
_____ KCC _____ SWD/Rep _____ NGPA
_____ KGS _____ Plug _____ Other
(Specify)

SIDE TWO

Operator Name John O. Farmer, Inc. Lease Name Duncan Well # SWD

East

County Trego

Sec. 35 Twp. 12S Rge. 21
 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken
(Attach Additional Sheets.) Yes No

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run
(Submit Copy.) Yes No

List All E.Logs Run:
Gamma Ray Neutron CCL Log

Log Formation (Top), Depth and Datums Sample
Name Top Datum

CASING RECORD

New 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"		218'		150	
Production	7-7/8"	5-1/2"		3846'		125	
			DV-Tool	1543'		450	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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	
	1 SPF	1246-1262' (Cedar Hills)		Natural

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-3/8"		1212'	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. _____ Producing Method Flowing Pumping Gas Lift Other (Explain) _____ (SWD)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
			200		

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

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

XXXXXXXXXX Interval
(SWD)
1246-1262'