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

11/05/10

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 LLC
License: 33935
Wellsite Geologist:

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API No. 15 - 135-20300-00-02
County: NESS
SW SE Sec. 30 Twp. 18 S. R. 26 ☐ East ☒ West
693 660 feet from SOUTH Line of Section
1951 1980 feet from EAST Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: ELY Well #: 1 OWWO
Field Name: WILDCAT
Producing Formation: MARMATON
Elevation: Ground: 2579' Kelly Bushing: 2584'
Total Depth: 4700' Plug Back Total Depth: 4652'
Amount of Surface Pipe Set and Cemented at previously set Feet
Multiple State Cementing Collar Used? ☒ Yes ☐ No
If yes, show depth set 1899 Feet
If Alternate II completion, cement circulated from 1899
feet depth to SURFACE w/ 180 sx cmt.

Per GB 7/30/08.
KCC 11/07/08

Designate Type of Completion:
___ New Well ___ Re-Entry X Workover
X 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: T & D OIL COMPANY
Well Name: ELY #1 OWWO 1 4590'
Original Comp. Date: 6/30/1979 Original Total Depth: 4585'
X 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.

7/14/2008 Spud Date or Recompletion Date
7/16/2008 Date Reached TD
8/8/2008 Completion Date or Recompletion Date

**Drilling Fluid Management Plan**
*(Data must be collected from the Reserve Pit)*
Chloride content 22000 ppm Fluid volume 200 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 Lem
Title: SECRETARY/TREASURER Date: 11/5/2008
Subscribed and sworn to before me this 5th day of November, 20 08.
Notary Public: Debra J. Ludwig
Date Commission Expires: MAY 5, 2012

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

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

RECEIVED
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WICHITA, KS