

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

ORIGINAL

Operator: License # 33335
Name: IA Operating, Inc.
Address: 9915 W. 21st Street, 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
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

01/07/08 01/12/08 01/12/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

RECEIVED
KANSAS CORPORATION COMMISSION
FEB 12 2008
CONSERVATION DIVISION
WICHITA, KS

API No. 15 - 137-20473-0000
County: Norton
NW SW NW Sec. 1 Twp. 3 S. R. 24 East West
1890 feet from S / (N) (circle one) Line of Section
660 feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Schulze Well #: 1-1
 Field Name: Wildcat

Producing Formation: None
 Elevation: Ground: 2356' Kelly Bushing: 2361'
 Total Depth: 3642' Plug Back Total Depth: 3642'
 Amount of Surface Pipe Set and Cemented at 242 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
 (Data must be collected from the Reserve Pit) ACT II with 3-12-08
 Chloride content 7000 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: [Signature]
 Title: President Date: 2/11/08
 Subscribed and sworn to before me this 11 day of February
2008.
 Notary Public: [Signature]
 Date Commission Expires: March 10, 2009

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

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

Operator Name: IA Operating, Inc. Lease Name: Schulze Well #: 1-1
 Sec. 1 Twp. 3 S. R. 24 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples 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: 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 <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>Anhydrite</td> <td>1918'</td> <td>+443</td> </tr> <tr> <td>Topeka</td> <td>3157'</td> <td>-796</td> </tr> <tr> <td>Toronto</td> <td>3362'</td> <td>-1001</td> </tr> <tr> <td>Lansing</td> <td>3376'</td> <td>-1015</td> </tr> <tr> <td>Gran. Wash</td> <td>3615'</td> <td>-1254</td> </tr> <tr> <td>Granite</td> <td>3628'</td> <td>-1267</td> </tr> <tr> <td>Total Depth</td> <td>3642'</td> <td>-1283</td> </tr> </table>	Name	Top	Datum	Anhydrite	1918'	+443	Topeka	3157'	-796	Toronto	3362'	-1001	Lansing	3376'	-1015	Gran. Wash	3615'	-1254	Granite	3628'	-1267	Total Depth	3642'	-1283
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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#	242'	Common	170	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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	RECEIVED KANSAS CORPORATION COMMISSION FEB 12 2008 CONSERVATION DIVISION WICHITA, KS		

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

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 _____	

ALLIED CEMENTING CO., INC.

32002

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

SERVICE POINT:

Oakley KS

Table with 8 columns: DATE, SEC, TWP, RANGE, CALLED OUT, ON LOCATION, JOB START, JOB FINISH. Includes handwritten entries like '1-7-08', '1', '35', '24W', '9:30 PM', '10:00 PM', '10:15 PM'.

LEASE Schulze WELL # 1-1 LOCATION 383+36 Jct 1 1/2 E-145 COUNTY Norton STATE Kan

CONTRACTOR MurFm Dls Co #16 OWNER Same
TYPE OF JOB Surface
HOLE SIZE 12 1/4 T.D. 242
CASING SIZE 8 5/8 DEPTH 241
TUBING SIZE DEPTH
DRILL PIPE DEPTH
TOOL DEPTH
PRES. MAX MINIMUM
MEAS. LINE SHOE JOINT
CEMENT LEFT IN CSG. 15'
PERFS.
DISPLACEMENT 14 1/4 BBL

CEMENT AMOUNT ORDERED 170- SKS com
3% cc - 2% gel

Table listing cement components: COMMON 170-SKS @ 14.20 = 2,414.00; POZMIX @; GEL 3 SKS @ 18.75 = 56.25; CHLORIDE 3 SKS @ 52.42 = 314.70; ASC @.

EQUIPMENT
PUMP TRUCK # 431 CEMENTER Walt HELPER Kelly
BULK TRUCK # 377 DRIVER Jerry
BULK TRUCK # DRIVER

Table with 3 columns: Description, Price, Total. Includes 'HANDLING 179 SKS @ 1.90 = 340.10' and 'TOTAL 4,333.30'.

REMARKS:

FEB 12 2008

Cement Did Cure
Thank You

Table titled 'SERVICE' with 3 columns: Description, Price, Total. Includes 'DEPTH OF JOB', 'PUMP TRUCK CHARGE 917.00', 'EXTRA FOOTAGE @', 'MILEAGE 75-miles @ 7.00 = 525.00', 'MANIFOLD @'.

CHARGE TO: I.A. Operating, Inc
STREET
CITY STATE ZIP

TOTAL 1,442.00

PLUG & FLOAT EQUIPMENT

Table with 3 columns: Description, Price, Total. Includes '1-Surface Plug 8 5/8 @ 68.00' and 'TOTAL 68.00'.

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX
TOTAL CHARGE
DISCOUNT IF PAID IN 30 DAYS

SIGNATURE Ardy Lindl

AFD

PRINTED NAME