

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Handwritten initials and date:
m
2/2/09

WELL HISTORY - DESCRIPTION OF WELL & LEASE

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: RICHARD S DAVIS JR.
 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. _____

<u>10/4/2008</u>	<u>10/14/2008</u>	<u>11/20/2008</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 101-22116-00-00
 County: LANE
NE SW NW SW Sec. 29 Twp. 18 S. R. 29 East West
1970 1855 S feet from SOUTH Line of Section
4879 1855 E feet from WEST Line of Section *Per 6/5/08 10/21/08*
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: MELISSA Well #: 1-29
 Field Name: WILDCAT
 Producing Formation: L-KC, MARMATON, CHEROKEE
 Elevation: Ground: 2826' Kelly Bushing: 2831'
 Total Depth: 4654' Plug Back Total Depth: 4606'
 Amount of Surface Pipe Set and Cemented at 260 Feet
 Multiple State Cementing Collar Used? Yes No
 If yes, show depth set 2121 Feet
 If Alternate II completion, cement circulated from 2121
 feet depth to SURFACE w/ 210 sx cmt.

Drilling Fluid Management Plan *Ait II NCR 3-23-09*
 (Data must be collected from the Reserve Pit)
 Chloride content 6900 ppm Fluid volume 1200 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 Rose*
 Title: SECRETARY/TREASURER Date: 1/30/2009
 Subscribed and sworn to before me this 30 day of January,
 2009.
 Notary Public: *Debra J Ludwig*
 Date Commission Expires: MAY 5, 2012

KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
FEB 02 2009

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

CONSERVATION DIVISION
WICHITA, KS

Operator Name: LARSON ENGINEERING, INC. Lease Name: MELISSA Well #: 1-29
 Sec. 29 Twp. 18 S. R. 29 East West County: LANE

INSTRUCTIONS: Show important tops and base of formation penetrated. Detail all cores. Report all final copes of 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geologist well site report.

Drill Stem Tests Taken (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Sample Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	ANHYDRITE	2139	+692
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	BASE ANHYDRITE	2198	+633
List All E. Logs Run:	DUAL INDUCTION	HEEBNER	3903	-1072
	DUAL COMP POROSITY	LANSING	3945	-1114
	MICRORESISTIVITY	STARK	4231	-1400
		MARMATON	4347	-1516
		FORT SCOTT	4472	-1641
		CHEROKEE SH	4494	-1663
		MISSISSIPPI	4551	-1720

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#	260'	CLASS A	175	2% GEL, 3% CC
PRODUCTION	7-7/8"	5-1/2"	15.5#	4653'	SMD	125	1/4#/SK FLOCELE
					EA-2	100	5% CALSEAL, 5% SALT, 7#/SK GILSONITE & 1/2% CFR-1

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	SURF	2121'	SMD	210	1/4#/SK FLOCELE

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
	SEE ATTACHED				

TUBING RECORD				Liner Run	
Size	Set At	Packer At		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2-3/8"	4597'				
Date of First, Resumed Production, SWD or Enhr. 11/20/08			Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls. 92	Gas Mcf 0	Water Bbls. 22	Gas-Oil Ratio 0	Gravity 34

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

METHOD OF COMPLETION

Production Interval 4194 - 4535 OA

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Operator Name: LARSON ENGINEERING, INC. Lease Name: MELISSA Well #: 1-29
 Sec. 29 Twp. 18 S. R. 29 East West County: LANE

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
4	4533-35, 4511-13, 4502-04	500 GAL 15% MCA	4533-35, 4511-13, 4502-04
4	4400-03, 4379-81	250 GAL 15% MCA	4400-03
		250 GAL 15% MCA	4379-81
4	4348-51, 4322-24	250 GAL 15% MCA	4348-51
		250 GAL 15% MCA	4322-24
4	4276-80	250 GAL 15% NE	4276-80
4		SQZ: 100 SX CLASS A	4276-80
4	4271-73	250 GAL 15% MCA	4271-73
4	4253-56	250 GAL 15% MCA	4253-56
4	4244-47, 4235-37	250 GAL 15% MCA	4244-47, 4235-37
4	4194-4200	250 GAL 15% MCA	4194-4200

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ALLIED CEMENTING CO., LLC. 32865

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

SERVICE POINT:
Ness City, Ks

DATE <u>10-4-08</u>	SEC <u>29</u>	TWP <u>18</u>	RANGE <u>29</u>	CALLED OUT <u>2:00 pm</u>	ON LOCATION <u>4:30 pm</u>	JOB START <u>9:30 pm</u>	JOB FINISH <u>10:00 pm</u>
LEASE <u>Melissa</u>	WELL # <u>1-29</u>	LOCATION <u>Dighton, 5W, 1 1/2 S</u>			COUNTY <u>Lane</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>E/S</u>				

CONTRACTOR H-D #1

TYPE OF JOB Surface

HOLE SIZE 12 1/4" T.D. 263'

CASING SIZE 8 3/8" DEPTH 263'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 200 # MINIMUM 0

MEAS. LINE _____ SHOE JOINT 15'

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 15 3/4 BBLs of water

OWNER Larson Operating

CEMENT AMOUNT ORDERED 175 sx Common 3% CC

2% Gel

COMMON	<u>175 sx</u>	@	<u>13.65</u>	<u>2,388.75</u>
POZMIX		@		
GEL	<u>3 sx</u>	@	<u>20.40</u>	<u>61.20</u>
CHLORIDE	<u>5 sx</u>	@	<u>57.15</u>	<u>285.75</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>183 sx</u>	@	<u>2.25</u>	<u>411.75</u>
MILEAGE	<u>183 x 37 x .10</u>			<u>677.10</u>
TOTAL				<u>3,824.55</u>

EQUIPMENT

PUMP TRUCK CEMENTER Rick H.

447 HELPER Alvin R.

BULK TRUCK DRIVER Chris H. / Kevin W.

456-198

BULK TRUCK DRIVER _____

REMARKS:

pipe on bottom break Circulation, mixed 175 sx Common 3% CC, 2% Gel and displace with 15 3/4 BBLs of water and shalbr.

Cement did Circulate.

used 8 3/8" Swedge

CHARGE TO: Larson Operating

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>263'</u>			
PUMP TRUCK CHARGE			<u>999.00</u>	
EXTRA FOOTAGE		@		
MILEAGE	<u>37</u>	@	<u>7.50</u> <u>277.50</u>	
MANIFOLD		@		
		@		
		@		
TOTAL				<u>1,276.50</u>

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 Doug Roberts

SIGNATURE Doug Roberts

PLUG & FLOAT EQUIPMENT

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



CHARGE TO: **LARSON OPERATING**
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET
 No 15019

PAGE 1 OF 2

SERVICE LOCATIONS
 1. **NESS CITY, KS**
 WELL/PROJECT NO. **1-29** LEASE **MELISSA** COUNTY/PARISH **LAWE** STATE **KS** CITY DATE **10-14-08** OWNER **SAME**
 2. TICKET TYPE SERVICE CONTRACTOR **H-D DRILLING** RIG NAME/NO. SHIPPED VIA **CT** DELIVERED TO **LOCATION** ORDER NO.
 3. WELL TYPE **OIL** WELL CATEGORY **DEVELOPMENT** JOB PURPOSE **5 1/2" LONGSTREB** WELL PERMIT NO. WELL LOCATION **DEIGHTON, KS - SW, 1/2 S, E 2ND**
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 104	40		ME		7.00	280.00
578		1			PUMP SERVICE	1	4654	FOB	FT	1400.00	1400.00
221		1			LIQUID KCL	2		GAL		26.00	52.00
281		1			MUD FLUSH	500		GAL		1.00	500.00
419		1			ROTATING HEAD RENTAL	1		FOB		250.00	250.00

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 CONSERVATION DIVISION
 WICHITA, KS

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.
 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS
 X
 DATE SIGNED **10-14-08** TIME SIGNED **1100** A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#1	2482.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	5461.31
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				subtotal	7943.31
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	205.58
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			None 5.3%	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	8208.89

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.
 SWIFT OPERATOR **WAVE WILSON** APPROVAL
 Thank You!



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 15019

CUSTOMER LARSON OPERATING
WELL MELISSA 1-29
DATE 10-14-08 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		UM		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF			QTY	UM	QTY	UM			
325		1				STANDARD COMBT	100		SKS		13.00	1300.00	
330		1				SWEPT MULTIE-DENSITY STANDARD	125		SKS		16.00	2000.00	
276		1				FLOCELE	56		UBS		1.50	84.00	
277		1				GILSONOTE	700		UBS		.40	280.00	
283		1				SALT	500		UBS		.20	100.00	
284		1				CALSEAL	5		SKS	500 UBS	30.00	150.00	
285		1				CFR-1	50		UBS		4.50	225.00	
290		1				D-ADR	2		CAL		35.00	70.00	
581		1				SERVICE CHARGE				CUBIC FEET	225	1.90	427.50
583		1				MILEAGE CHARGE				TON MILES	471.32	1.75	824.81
						TOTAL WEIGHT	23566			LOADED MILES	40		

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WICHITA, KS

CONTINUATION TOTAL 5461.31

JOB LOG

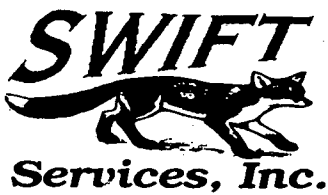
SWIFT Services, Inc.

DATE 10-14-08 PAGE NO. 7

CUSTOMER LARSON OPERATING WELL NO. 1-29 LEASE MELLISSA JOB TYPE 5 1/2" LONGSTRENG TICKET NO. 15019

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1100							ON LOCATION
								TD-4654 SET-4651
								TP-4653.34 5 1/2" 15.5
								SJ-42.49
								PORT COLLAR-2121
	1415							DROP BALL - CORQUATE ROTATE
	1518	6	12		✓		450	PUMP 500 GAL MUD FLUSH "
	1520	6	20		✓		450	PUMP 20 BBL KCL - FLUSH "
	1525		4					PLUG RH
	1530	2 1/2	48		✓		200	MAX CMWT LD-125 SMA @ 12.5 PP6 "
		4	24		✓		200	TL-100 EA2 @ 15.3 PP6 "
	1642							WASH OUT PUMP - LUGS
	1643							RELEASE LATCH DOWN PLUG
	1645	7	0		✓			DISPLACE PLUG "
		6 1/2	99				900	SHUT OFF ROTATING
	1700	6 1/2	109.7				1500	PLUG DOWN - PSE UP LATCH IN PLUG
	1702						OK	RELEASE PSE - HELD
								WASH TRUCK
	1800							JOB COMPLETE
								THANK YOU
								WAYNE, BRETT, ROB

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CHARGE TO: LARSON OPERATING
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET
 No 15077

PAGE 1 OF 1

SERVICE LOCATIONS
 1. Ness City, Ks
 2. 1-29 MELISSA LASE Ks
 3. WDD WEST WELL SERVICE #1 LOCATION
 4. OIL DEVELOPMENT CSMGT PORT COLLAR
 REFERRAL LOCATION: DEBAR, Ks - SW 1/2S, E 2ND

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE #104	40		ME		7.00	280.00
578		1			PUMP SERVICE	1	2121	JOB	AF	1400.00	1400.00
330		1			SWIFT MULTZ- DEPOSIT STANDARD	210		SYS		16.00	3360.00
276		1			FLOCELE	56		WBS		1.50	84.00
290		1			D-ADR	2		GA		35.00	70.00
581		1			SERVICE CHARGE CSMGT	225		SYS		1.90	427.50
583		1			DRYAGE	22326	446.52	WBS	TM	1.75	781.41

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 WICHITA, KS

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X [Signature]
 DATE SIGNED: 10-21-08 TIME SIGNED: 0830 A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				6402.91
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				
Lane TAX 5.3%				186.24
TOTAL				6589.15

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR: WAVE WILSON APPROVAL: _____

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 10-21-08 PAGE NO. 1

CUSTOMER **LARSON OPERATING** WELL NO. **1-29** LEASE **MELISSA** JOB TYPE **CEMENT PORT COLLAR** TICKET NO. **15077**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0830							ON LOCATION
								2 3/8 x 5 1/2 PORT COLLAR = 2121'
	0905				✓		1000	PSI TEST CASING - HELD
	0910	3	2	✓		450		OPEN PORT COLLAR - LOG RATE
	0915	4	117	✓		500		MIX CEMENT 210 SKS SMS 1/4" FIBRE P/SX = 11.2 PAG
	0945	3 1/2	7 1/2	✓		625		DISPLACE CEMENT
	0955				✓		1000	CLOSE PORT COLLAR - PSI TEST - HELD
								CALCULATED 15 SKS CEMENT TO PRT
	1010	4	25		✓		600	RUN 4 JTS - CALCULATE CLEAN
								WASH TRUCK
								PULL TOOL
	1100							JOB COMPLETE
								THANK YOU WAYNE, BRETT, DAVE
								RECEIVED KANSAS CORPORATION COMMISSION FEB 02 2009 CONSERVATION DIVISION WICHITA, KS