

CONFIDENTIAL

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 # 3842
Name: LARSON OPERATING COMPANY
A DIVISION OF 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: MURFIN DRILLING COMPANY, INC.
License: 30606
Wellsite Geologist: TOM FUNK

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. _____

9/13/2005 9/22/2005 10/31/2005
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 101-21890-00-00
County: LANE
APP NW NW SW Sec. 28 Twp. 18 S. R. 29 East West
2745 feet from NORTH Line of Section
330 feet from WEST Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE **NW** SW
Lease Name: STANLEY Well #: 2-28
Field Name: WILDCAT
Producing Formation: MARMATON, PLEASANTON, L-K "L"
Elevation: Ground: 2819' Kelly Bushing: 2824'
Total Depth: 4616' Plug Back Total Depth: 4569'
Amount of Surface Pipe Set and Cemented at 262 Feet
Multiple State Cementing Collar Used? Yes No
If yes, show depth set 2129 Feet
If Alternate II completion, cement circulated from 2129
feet depth to SURFACE w/ 210 sx cmt.

Drilling Fluid Management Plan AH II WITH M 3-907
(Data must be collected from the Reserve Pit)
Chloride content 22000 ppm Fluid volume 690 bbls
Dewatering method used ALLOWED TO DRY, THEN BACKFILLED
Location of fluid disposal if hauled offsite:
Operator Name: RECEIVED
KANSAS CORPORATION COMMISSION
Lease Name: _____ License No.: _____
Quarter _____ Sec. DEC 30 2005 Twp. _____ R. _____ East West
County: CONSERVATION DIVISION
WICHITA, KS

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: Thomas S. Larson
Title: PRESIDENT Date: 12/29/05
Subscribed and sworn to before me this 29TH day of DECEMBER,
2005.
Notary Public: Carol S. Larson
Date Commission Expires: JUNE 25, 2009

CAROL S. LARSON
Notary Public - State of Kansas
My Appt. Expires 6-25-2009

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

Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC. Lease Name: STANLEY Well #: 2-28
 Sec. 28 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>						<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum		<input type="checkbox"/> Sample
Sample Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						Name	Top	Datum	
Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						ANHYDRITE	2156	+668	
Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>						HEEBNER SH	3911	-1087	
List All E. Logs Run:	DUAL INDUCTION		DUAL COMP POROSITY		MICRORESISTIVITY		BOREHOLE COMP SONIC		
						LANSING	3955	-1131	
						STARK SH	4234	-1410	
						BASE KC	4346	-1522	
						MARMATON	4365	-1541	
						PAWNEE	4425	-1601	
						FORT SCOTT	4474	-1650	
						CHEROKEE SH	4498	-1674	
						MISSISSIPPIAN	4573	-1749	

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"	28#	262'	CLASS A	180	2% GEL, 3% CC
PRODUCTION	7-7/8"	5-1/2"	15.5#	4613'	SMD	125	1/4#/SK FLOCELE
					EA-2	100	5% CALSEAL, 10% SALT, 5#/SK GILSONITE, 1/2% HALAD

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<input type="checkbox"/> Perforate					
<input checked="" type="checkbox"/> Protect Casing	SURF	2129'	SMD	210	1/4#/SK FLOCELE
<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
		Amount	Kind	
4	4512-14, 4515-16, 4458-60, 4383-86	SEE ATTACHED PAGE		
4	4348-50, 4341-43, 4280-83			
4	4280-83			
4	4274-80			

TUBING RECORD		Size 2-3/8"	Set At 4541'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 11/9/05			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. 95	Gas Mcf 0	Water Bbls. 6	Gas-Oil Ratio 0	Gravity 36

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval <u>4274-4516</u>
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Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC.

Lease Name: STANLEY

Well #: 2-28

Sec. 28 Twp. 18 S. R. 29 East West

County: LANE

CONFIDENTIAL
CONSERVATION DIVISION

Acid, Fracture, Shot, Cement, Squeeze Record (Amount and Kind of Material Used)	Depth
250 GAL 15% MCA	4512-14, 4515-16
250 GAL 15% MCA	4458-60
500 GAL 15% MCA	4383-86
500 GAL 15% MCA	4341-43, 4348-50
500 GAL 15% MCA	4280-83
SQZ: 50 SX COMMON	4280-83
250 GAL 15% MCA	4280-83
500 GAL 15% MCA 4280-83	4280-83

RECEIVED
KANSAS CORPORATION COMMISSION

DEC 30 2005

CONSERVATION DIVISION
WICHITA, KS



CHARGE TO: WALSON OPERATIONS
 ADDRESS _____
 CITY, STATE, ZIP CODE _____

TICKET No 9073

PAGE 1 OF 1

SERVICE LOCATIONS 1. <u>NESS CITY, KS</u>	WELL/PROJECT NO. <u>2-28</u>	LEASE <u>STANLEY</u>	COUNTY/PARISH <u>LANE</u>	STATE <u>KS</u>	CITY	DATE <u>9-26-05</u>	OWNER <u>SAME</u>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>FRETZEL TRUCKING</u>	RIG NAME/NO.	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.	
3.	WELL TYPE <u>OD</u>	WELL CATEGORY <u>DEVELOPMENT</u>	JOB PURPOSE <u>CEMENT PORT CEMENT</u>	WELL PERMIT NO.	WELL LOCATION <u>NESS CITY, KS 3W, 2S, 1/2 W, 1/2 N</u>		
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			4.00	160.00
577		1			PUMP SERVICE	1	HRS			800.00	800.00
330		1			SWIFT MULTI-DAILY SERVICE	210	SKS			11.00	2310.00
276		1			FLOOLE	58	LLBS			1.10	63.80
581		1			SERVICE CHARGE CEMENT	230	34			1.10	253.00
583		1			DRAINAGE	22848	WS	456.96	TM	1.00	456.96

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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 9-26-05 TIME SIGNED 1030 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
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
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			

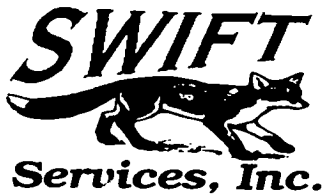
PAGE TOTAL	4043.76
Lane TAX 5.3%	125.81
TOTAL	4169.57

RECEIVED
 KANSAS CORPORATION COMMISSION
 MICHAEL K.S.
 DEC 30 2005

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

SWIFT OPERATOR WAKE WALSON APPROVAL _____

Thank You!



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

TICKET
 No 9069

PAGE 1 OF 2

1. SERVICE LOCATIONS NESS CITY, KS	WELL/PROJECT NO. 2-28	LEASE STANLEY	COUNTY/PARISH LANE	STATE KS	CITY	DATE 9-22-05	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR MURPHY DALL #24	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE Oil	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 5 1/2" LOGSHEAD	WELL PERMIT NO.	WELL LOCATION LOCATION, KS - 3W, 1 1/2 S, WS		
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	MC			4.00	160.00
578		1			PUMP CHARGE	1	JOB	4617	FT	1250.00	1250.00
281		1			MUDFLUSH	500	Gal			.75	375.00
221		1			LIQUID MCL	2	Gal			25.00	50.00
419		1			ROTARY HEAD	1	JOB			200.00	200.00

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

X T.C. Larson

DATE SIGNED **9-22-05** TIME SIGNED **1830** 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
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	WICHTA KS	DEC 10 2005	RECEIVED
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			

PAGE TOTAL #1	1835.00
#2 subtotal	4075.36
TAX WIC 5.3%	196.46
TOTAL	6106.82

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

SWIFT OPERATOR Wayne Larson APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE **9-22-05** PAGE NO. **1**

CUSTOMER **CARSON OPERATING** WELL NO. **2-28** LEASE **STANLEY** JOB TYPE **5 1/2" LONGSTRENG** TICKET NO. **9069**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBLS/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1800							OJ LOCATION
								TD - 4613
								TP - 4617
								ST - 42.60
								SET c 4612
								5 1/2" / F 15.5
								PORT COLLAR = 2130
								RECEIVED KANSAS CORPORATION COMMISSION DEC 30 2005 CONSERVATION DIVISION WICHITA, KS
	2020							DROP BALL - CIRCULATE ROD
	2122	6	12		✓		500	PUMP 500 GAL MUD FLUSH "
	2124	6	20		✓		500	PUMP 20 BBLS KCL FLUSH "
	2130		4/2					PWG RH = MH
	2135	6	62		✓		450	MAX CMWT 150 SLS SMD "
		5	24		✓		350	100 SLS EA-2 "
	2154							WASH OUT PUMP - LINES
	2156							RELEASE PLUG
	2158	6 1/2	0		✓			RELEASE PLUG "
		6 1/2						
			99				750	SHUT OFF ROATING (DO NOT ROTATE - TIGHT)
	2214	6	108.9				2000	PLUG DOWN - PSE UP WATCH PLUG
	2216						OK	RELEASE PSE - HELD
								WASH UP
	2300							JOB COMPLETE
								THANK YOU WANG, DUSTY, BRETT

ALLIED CEMENTING CO., INC.

17269

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

CONFIDENTIAL

SERVICE POINT:

Neosho

DATE <u>9-13-05</u>	SEC. <u>28</u>	TWP. <u>18</u>	RANGE <u>29</u>	CALLED OUT <u>1:00pm</u>	ON LOCATION <u>4:30pm</u>	JOB START <u>5:15pm</u>	JOB FINISH <u>5:45 PM</u>
LEASE <u>Stanley</u>		WELL # <u>2-28</u>	LOCATION <u>Dighton 3w 25 1w 1/2 n</u>		COUNTY <u>Lane</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)				RECEIVED KANSAS CORPORATION COMMISSION DEC 30 2005			

CONTRACTOR Murphy Drilling #24

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 262

CASING SIZE 8 7/8 DEPTH 262

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15

PERFS. _____

DISPLACEMENT 15 1/4

OWNER _____

CEMENT AMOUNT ORDERED 180 Com 3 1/2 cc 2 1/2 H₂O

CONSERVATION DIVISION
WICHITA, KS

EQUIPMENT

PUMP TRUCK CEMENTER Mike

224 HELPER J. Whigams

BULK TRUCK DRIVER Steve

341 DRIVER _____

BULK TRUCK DRIVER _____

COMMON	<u>180 H₂O</u>	@	<u>8.70</u>	<u>1566.00</u>
POZMIX		@		
GEL	<u>3 H₂O</u>	@	<u>14.00</u>	<u>42.00</u>
CHLORIDE	<u>5 H₂O</u>	@	<u>38.00</u>	<u>190.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>180 H₂O</u>	@	<u>1.60</u>	<u>300.00</u>
MILEAGE	<u>37.06 188</u>			<u>417.36</u>
TOTAL				<u>2516.16</u>

REMARKS:

used 28"
circ 8 7/8 wing pump, mix
cemt, dry plug w/ 15 1/4 BBL
cemt dual circ

Thanks

CHARGE TO: Larson Oper.

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>262</u>			
PUMP TRUCK CHARGE				<u>670.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>37</u>	@	<u>5.00</u>	<u>183.00</u>
		@		
		@		
TOTAL				<u>856.00</u>

PLUG & FLOAT EQUIPMENT

MANIFOLD		@		
<u>8 7/8 Epubal</u>		@	<u>55.00</u>	<u>55.00</u>
		@		
		@		
TOTAL				<u>55.00</u>

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 [Signature]

Great Job

Anthony Martin

PRINTED NAME