

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 33550
Name: Relative Energy, Inc.
Address: 213 North Third
City/State/Zip: Lindsborg KS 67456
Purchaser: NCRA
Operator Contact Person: Mark Casebeer
Phone: (620) 242-7766
Contractor: Name: Scott's Well Service, Inc.
License: 6819
Wellsite Geologist: NA

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: Stanolind Oil and Gas Company
Well Name: R.A. Johnson #1

Original Comp. Date: 8/20/1942 Original Total Depth: 3370
 Deepening Re-perf. Conv. to Enh./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enh.?) Docket No. _____

<u>12/21/06</u>	<u>12/22/06</u>	<u>4/14/2007</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 113-02214000 **X03**
County: McPherson
W2 SE NW Sec. 19 Twp. 17 S. R. 3 East West
1980 feet from S (N) (circle one) Line of Section
1650 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: Sidney Johnson Trust Well #: 1
Field Name: Lindborg

Producing Formation: Maquoketa dolomite
Elevation: Ground: 1341 Kelly Bushing: _____
Total Depth: 3381 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 8 5/8ths at 341 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 **NH 7-8-08**
(Data must be collected from the Reserve Pit)
Chloride content 0 ppm Fluid volume 80 bbls. _____ bbls
Dewatering method used hauled

Location of fluid disposal if hauled offsite:
Operator Name: Relative Energy, Inc.
Lease Name: Armstrong A License No.: 33550
Quarter SW Sec. 7 Twp. 17 S. R. 3 East West
County: McPherson Docket No.: D-28,622

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: Mark Casebeer
Title: President Date: 4/26/07
Subscribed and sworn to before me this 26 day of April
20 07
Notary Public: Gaylene Butler
Date Commission Expires: Oct 24, 2008

**NOTARY PUBLIC
STATE OF KANSAS
Gaylene Butler
My Appt Expires 10/24/08**

KCC Office Use ONLY

N Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received **RECEIVED**
 UIC Distribution **KANSAS CORPORATION COMMISSION**

APR 27 2007

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Relative Energy, Inc. Lease Name: Sidney Johnson Trust Well #: 1
 Sec. 19 Twp. 17 S. R. 3 East West County: McPherson

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<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>Maquoketa dolomite</td> <td>3365</td> <td>-2024</td> </tr> </table>	Name	Top	Datum	Maquoketa dolomite	3365	-2024
Name	Top	Datum					
Maquoketa dolomite	3365	-2024					

CASING RECORD <input type="checkbox"/> New <input checked="" 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(original)		8 1/4"		341			
Casing(original)		5 1/2"		3365			
Casing liner		4 1/2"	14 lb	3345	60-40 pos mix	160	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 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

TUBING RECORD	Size 2 3/8"	Set At 3350'	Packer At	Liner Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. not pumping yet	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. oil	Gas Mcf	Water Bbls. 160	Gas-Oil Ratio	Gravity
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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 checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval
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RECEIVED
KANSAS CORPORATION COMMISSION
APR 27 2007
 CONSERVATION DIVISION
 WICHITA, KS