

CONFIDENTIAL

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

RECEIVED
KANSAS CORPORATION COMMISSION
Form ACO-1
September 1999
Must Be Typed

JUN 05 2006

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: _____
Operator Contact Person: TOM LARSON
Phone: (620) 653-7368
Contractor: Name: SOUTHWIND DRILLING, INC.
License: 33350
Wellsite Geologist: ROBERT LEWELLYN

KCC
JUN 03 2006

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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. _____

2/4/2006 2/18/2006
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 135-24452-0000
County: NESS
220' N OF C N/2 Sec. 30 Twp. 18 S. R. 26 East West
1100 feet from NORTH Line of Section
2640 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: DELANEY Well #: 1-30
Field Name: WILDCAT
Producing Formation: _____
Elevation: Ground: 2644' Kelly Bushing: 2654'
Total Depth: 4685' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 260 Feet
Multiple State 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 *ACT II P&J W/H*
(Data must be collected from the Reserve Pit) *6-13-07*
Chloride content _____ ppm Fluid volume _____ 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: Thomas Larson
Title: PRESIDENT Date: 6/2/2006
Subscribed and sworn to before me this 2ND day of JUNE, 2006.

Notary Public: Carol S. Larson

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

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

JUN 05 2006

Side Two

Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC. Lease Name: DELANEY Well #: 1-30
 Sec. 30 Twp. 18 S. R. 26 East West County: NESS
CONSERVATION DIVISION
WICHITA, KS

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 type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	ANHYDRITE	2015	+639
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	B ANHYDRITE	2046	+608
List All E. Logs Run:	DUAL INDUCTION		HEEBNER	3960	-1306
	NEUTRON DENSITY		LANSING	3999	-1345
	SONIC		STARK SH	4261	-1607
	MICRO		MARMATON	4400	-1746
			PAWNEE	4462	-1808
			FT SCOTT	4514	-1860
			CHEROKEE SH	4537	-1883
			MISSISSIPPI	4618	-1964
			TD	4685	

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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	12-1/4'	8-5/8"	24#	260'	CLASS A	180	2% GEL, 3% CC

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			

Shots per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid. Fracture, Shot, Cement, Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed 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 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

METHOD OF COMPLETION _____

Production Interval _____

If vented, submit ACO-18.)

ALLIED CEMENTING CO., INC.

22487

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

SERVICE POINT:

Ness City

DATE <u>2-4-06</u>	SEC. <u>30</u>	TWP. <u>18</u>	RANGE <u>26</u>	CALLED OUT <u>6:00pm</u>	ON LOCATION <u>7:15pm</u>	JOB START <u>10:30pm</u>	JOB FINISH <u>11:00pm</u>
LEASE <u>Delaney</u> WELL# <u>1-30</u>			LOCATION <u>Ness City 18w s.s</u>		COUNTY <u>Ness</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)				KCC			

CONTRACTOR Southwind Drilling #1

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 262

CASING SIZE 8 5/8 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 3/4

OWNER JUN 03 2006

CEMENT **CONFIDENTIAL**

AMOUNT ORDERED 180 Com 3%cc 2%add

EQUIPMENT

PUMP TRUCK CEMENTER MIKE

224 HELPER J. Weighous

BULK TRUCK

260 DRIVER Brandon

BULK TRUCK

_____ DRIVER _____

COMMON	<u>180M</u>	@	<u>8.70</u>	<u>1,566.00</u>
POZMIX		@		
GEL	<u>4M</u>	@	<u>14.00</u>	<u>56.00</u>
CHLORIDE	<u>6M</u>	@	<u>38.00</u>	<u>228.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>190M</u>	@	<u>1.60</u>	<u>304.00</u>
MILEAGE	<u>18.190</u>			<u>205.20</u>
TOTAL				<u>2359.20</u>

REMARKS:

New 24"

circ 8 5/8 cas w/ sup pump

Mix Cemt, disp plug w/ 15 3/4 BBL

Cemt deal Circ

Thanks

CHARGE TO: Larson Oper Co.

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>262</u>			
PUMP TRUCK CHARGE			<u>670.00</u>	
EXTRA FOOTAGE		@		
MILEAGE	<u>18</u>	@	<u>5.00</u>	
MANIFOLD		@		
		@		
		@		
TOTAL				<u>760.00</u>

PLUG & FLOAT EQUIPMENT

<u>8 5/8 Top Wood</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 Day Roberts

Day Roberts
PRINTED NAME

KCC

JUN 03 2009

CONFIDENTIAL

ALLIED CEMENTING CO., INC.

23634

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

SERVICE POINT:

At Bend

DATE <u>2-19-08</u>	SEC. <u>30</u>	TWP. <u>18</u>	RANGE <u>26</u>	CALLED OUT <u>9:00 PM</u>	ON LOCATION <u>1:30 AM</u>	JOB START <u>6:00 AM</u>	JOB FINISH <u>8:30 AM</u>
LEASE <u>Delaney</u>	WELL # <u>1-30</u>	LOCATION <u>Beelen w/ to colw E/ into</u>			COUNTY <u>New</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Southwind #1

TYPE OF JOB Rotary Plug

HOLE SIZE 7 7/8" I.D. 4685'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2" DEPTH 2060'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER Same

CEMENT

AMOUNT ORDERED 255 lb w/40 670 net

1/4 # flow/rd

COMMON	<u>153 net</u>	@	<u>9.60</u>	<u>1468.80</u>
POZMIX	<u>102 net</u>	@	<u>5.20</u>	<u>530.40</u>
GEL	<u>13 net</u>	@	<u>15.00</u>	<u>195.00</u>
CHLORIDE		@		
ASC		@		
<u>FROSEM 64 #</u>		@	<u>1.80</u>	<u>115.20</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>270 net</u>	@	<u>1.70</u>	<u>459.00</u>
MILEAGE	<u>210 net 107 18</u>	@		<u>340.20</u>
TOTAL				<u>3108.60</u>

EQUIPMENT

PUMP TRUCK CEMENTER Tim D

181 HELPER Jim W

BULK TRUCK

357 DRIVER Terry H

BULK TRUCK

_____ DRIVER _____

REMARKS:

Mixed - 50 net @ 2060'

80 net @ 1150'

40 net @ 500'

40 net @ 260'

20 net @ 60'

15 net - Rathole

10 net - Manhole

1 net - _____

SERVICE

DEPTH OF JOB 2060'

PUMP TRUCK CHARGE _____ 825.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 18 @ 5.00 90.00

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 915.00

CHARGE TO: Larson Operating Co.

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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 X Doug Roberts

X Doug Roberts
PRINTED NAME _____

LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC.
562 WEST STATE ROAD 4
OLMITZ, KS 67564-8561

(620) 653-7368
(620) 653-7635 FAX

6/03/07
6-3-08
RECEIVED
KANSAS CORPORATION COMMISSION

JUN 05 2006

CONSERVATION DIVISION
WICHITA, KS

ACO-1 CONFIDENTIALITY REQUEST

VIA UPS NEXT DAY AIR

June 3, 2006

Kansas Corporation Commission
Attn: Dave Williams
130 South Market, Room 2078
Wichita, KS 67202

KCC
JUN 03 2006
CONFIDENTIAL

Re: Delaney 1-30
Ness County, Kansas
API #15-135-24452-0000

Dear Dave,

Enclosed please find the ACO-1 Well Completion Form, with copies of all logs, geo report, DST's, and cementing tickets for the captioned well. We request that all information be held confidential for the period of one year.

If you have questions, please call.

Sincerely,

Larson Operating Company



Carol Larson
Secretary/Treasurer

encl.