

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

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: SOUTHWIND DRILLING, INC.

License: 33350

Wellsite Geologist: THOMAS FUNK

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: _____

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>5/13/2006</u>	<u>5/22/2006</u>	<u>6/13/2006</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 135-24493-0000

County: NESS

APP NE NW SE Sec. 19 Twp. 18 S. R. 26 East West

2160 feet from SOUTH Line of Section

1500 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: LOIS Well #: 2-19

Field Name: WILDCAT

Producing Formation: _____

Elevation: Ground: 2636' Kelly Bushing: 2646'

Total Depth: 4674' Plug Back Total Depth: 4626'

Amount of Surface Pipe Set and Cemented at 272 Feet

Multiple State Cementing Collar Used? Yes No

If yes, show depth set 1987 Feet

If Alternate II completion, cement circulated from 1987

feet depth to SURFACE w/ 210 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

*ALT II WITH
7-2407*

Chloride content 14300 ppm Fluid volume 440 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: 8/29/2006

Subscribed and sworn to before me this 29TH day of AUGUST

2006.

Notary Public: Carol S. Larson

Date Commission Expires: JUNE 25, 2009

CAROL S. LARSON
Notary Public - State of Kansas
My Appt. Expires 6/25/09

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

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KANSAS CORPORATION COMMISSION
AUG 30 2006

CONSERVATION DIVISION
WICHITA, KS

ORIGINAL

Side Two

Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC.

Lease Name: LOIS

Well #: 2019

Sec. 19 Twp. 18 S. R. 26 East West

County: NESS

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 Yes No
(Attach Additional Sheets)

Sample Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy)

List All E. Logs Run: DUAL INDUCTION
DUAL COMP POROSITY
BOREHOLE COMP SONIC
MICRORESISTIVITY

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
ANHYDRITE	2018	+628
BASE ANHYDRITE	2045	+601
HEEBNER SH	3953	-1307
LANSING	3990	-1344
STARK SH	4252	-1606
PAWNEE	4461	-1815
FT SCOTT	4510	-1864
CHEROKEE SH	4533	-1887
MISSISSIPPIAN	4608	-1962

CASING RECORD New 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#	272'	CLASS A	180	2% GEL, 3% CC
PRODUCTION	7-7/8"	5-1/2"	15.5#	4674'	SMD	100	
					EA-2	100	5% CALSEAL, 10% SALT, 5#/SK GILSONITE, 1/2% HALAD

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			
	SURF	1987'	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
	4	4614-17', 4526-28', 4435-39'	500 GAL 15% MCA
	CIBP @ 4600'	1000 GAL 15% NEFE	4526-28'
		500 GAL 15% MCA	4435-39'
		250 GAL 15% MCA	4614-17'

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3.8"	4593'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enh.		Producing Method			
6/13/06		<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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	65	0	0	0	41

Disposition of Gas
 Vented Sold Used on Lease
If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled
 Other (Specify)

Production Interval

4435-4617 OA

ALLIED CEMENTING CO., INC.

23578

Federal Tax I.D.#

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

SERVICE POINT:

Ness City

DATE <u>5-13-06</u>	SEC. <u>19</u>	TWP. <u>18</u>	RANGE <u>26</u>	CALLED OUT <u>1:00pm</u>	ON LOCATION <u>4:00pm</u>	JOB START <u>7:00pm</u>	JOB FINISH <u>7:30pm</u>
LEASE <u>Lois</u>	WELL # <u>2-19</u>	LOCATION <u>Ness city 17w 1/4 n</u>	COUNTY <u>Ness</u>		STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)			<u>1/4 n 1/2 n</u>		KCC		

CONTRACTOR Southwind Drilling #1 OWNER _____

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 275

CASING SIZE 8 5/8 DEPTH 275

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 1.5

PERFS. _____

DISPLACEMENT 16

EQUIPMENT

PUMP TRUCK CEMENTER Mike

224 HELPER J. Wyglous

BULK TRUCK

260 DRIVER Terry

BULK TRUCK

_____ DRIVER _____

REMARKS:

Used 28"
circ 8 7/8 casing req pump
mix cement, plug plug w/ 16 BA
cement drill Circ

Thanks

CHARGE TO: Larson Oper

STREET _____

CITY _____ STATE _____ ZIP _____

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.

SIGNATURE Doug Roberts

CEMENT AMOUNT ORDERED 180 Com 3% cc 2% tel.

COMMON	<u>180 cu</u>	@	<u>9.60</u>	<u>1728.00</u>
POZMIX		@		
GEL	<u>3 cu</u>	@	<u>15.00</u>	<u>45.00</u>
CHLORIDE	<u>5 cu</u>	@	<u>42.00</u>	<u>210.00</u>
ASC		@		

HANDLING	<u>180 cu</u>	@	<u>1.70</u>	<u>319.60</u>
MILEAGE	<u>19 07</u>	@	<u>13.84</u>	<u>250.04</u>

TOTAL 2552.64

SERVICE

DEPTH OF JOB	<u>275</u>			
PUMP TRUCK CHARGE				<u>735.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>19</u>	@	<u>5.00</u>	<u>95.00</u>
MANIFOLD		@		

TOTAL 830.00

PLUG & FLOAT EQUIPMENT

<u>8 7/8 Top Wood</u>	@	<u>55.00</u>	<u>55.00</u>
	@		
	@		
	@		

TOTAL 55.00

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

Doug Roberts
PRINTED NAME

CONFIDENTIAL

AUG 29 2006

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KANSAS CORPORATION COMMISSION

AUG 30 2006

CONSERVATION DIVISION
WICHITA, KS



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

TICKET No. **10319**

PAGE 1 OF 1

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 29 2006
 KCC

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. 2-19	LEASE LOTS	COUNTY/PARISH NESS	STATE KS	DATE 5-31-06	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR EXPRESS WELL SERVICE	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE CSMT PORT COLLAR	WELL PERMIT NO.	WELL LOCATION BEELER, KS - 2W, 1W, WEST 270	
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	30	ME			4.00	120.00
577		1			PUMP SERVICE	1	JOB			800.00	800.00
330		1			SWIFT MULTI-DENSITY STANDARDS	210	SKS			12.00	2520.00
276		1			FLOCELL	56	LBS			1.25	70.00
581		1			SERVICE CHARGE CSMT	225	SKS			1.10	247.50
583		1			DRAINAGE	22326	LBS	334.89	m	1.00	334.89

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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 **5-31-06** TIME SIGNED **1400**
 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	409239
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?				NESS TAX 5.3%	137.27
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	4229.66
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

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
[Signature]

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE **5-31-06** PAGE NO. **1**

CUSTOMER **LARSON OPERATING** WELL NO. **# 2-19** LEASE **LODS** JOB TYPE **CEMENT PORT COLLAR** TICKET NO. **10319**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBLS/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1330							OPEN ISOLATION KCC AUG 29 2006 CONFIDENTIAL
								CEM- 5/2 NB- 2 3/8 PORT COLLAR = 1987
	1335				✓		1000	PSI TEST CASING - HELD
	1340	3	2	✓		300		OPEN PORT COLLAR - DJT RATE
	1345	4 1/2	116	✓		450		MAX CEMENT 2 TO SEES SMD 1/4" / FLOODE P/SK
	1415	3 1/2	6 1/2	✓		500		DISPLACE CEMENT
	1420				✓		1000	CLOSE PORT COLLAR - PSI TEST - HELD
								CIRCULATE 10 SKS CEMENT TO PORT
	1435	3 1/2	25	✓			450	RUN 4 SKS CIRCULATE CLEAN
								WASH TRUCK
	1530							JOB COMPLETE

THANK YOU
WAWA, DUSTY, SEAN

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WICHITA, KS



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

TICKET
 No 10310

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PAGE 1 OF 2

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. 2-19	LEASE LOES	COUNTY/PARISH NESS	STATE KS	DATE 5-22-06	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR SOUTHWIND DRIVING	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATED	ORDER NO.
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 5 1/2" LONGSTOCK	WELL PERMIT NO.	WELL LOCATION BEESER K-2W, W	
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	20	MI			4.00	80.00
578		1			PUMP SERVICE	1	JOB	4673	FT	1250.00	1250.00
221		1			LIQUID KCI	2	Gal			26.00	52.00
281		1			MUDFLUSH	500	Gal			.75	375.00
419		1			ROTARY HEAD RENTAL	1	JOB			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 *T.C. Larson*
 DATE SIGNED **5-22-06** TIME SIGNED **0130** 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	2007.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	3853.66
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				Subtotal	5860.66
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	214.53
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			Less 5.3%	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	6075.19

SWIFT OPERATOR *Wayne Watson* APPROVAL _____
 CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

Thank You!



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

TICKET CONTINUATION

TICKET No. 10310

CUSTOMER **ARSON OPERATING** WELL **LOZS 2-19** DATE **5-22-06** PAGE **2** OF **2**

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			TIME	DESCRIPTION					UNIT PRICE	AMOUNT
		LOC	ACCT	DF			QTY	UM	QTY	UM		
325		1				STANDARD CEMENT EA-2	100	SKS			9.60	960.00
330		1				SWIFT MULTE-DESIGN STANDARD	125	SKS			12.00	1500.00
276		1				FLOCELE	31	lbs			1.25	38.75
283		1				SALT	550	lbs			.20	110.00
284		1				CALSEAL	5	SKS	500	lbs	30.00	150.00
277		1				GDSNOTE	700	lbs			.40	280.00
286		1				HAUND-1	50	lbs			6.00	300.00
290		1				D-ADR	1	GAL			32.00	32.00
581		1				SERVICE CHARGE						
583		1				MILEAGE CHARGE						
						TOTAL WEIGHT	23541					
						LOADED MILES	20					
						CUBIC FEET			225		1.10	247.50
						TON MILES			235.41		1.00	235.41

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 WICHITA, KS

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CONTINUATION TOTAL **3853.66**

JOB LOG

SWIFT Services, Inc.

DATE **5-22-06** PAGE NO. **1**

CUSTOMER **LARSON OPERATING** WELL NO. **2-19** LEASE **LOZS** JOB TYPE **5 1/2" LOGGING** TICKET NO. **10310**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0100							ON LOAD
								70-4674 SET = 4673
								70-4675, 80 5 1/2" / F 15.5
								ST-43.42
								PORT course 1987
	0120							DROP BALL - CIRCULATE ROTATE
	0235	6	12		✓		500	PUMP 500 GAL MUD FLUSH "
	0237	6	20		✓		500	PUMP 20 BBLS KCL FLUSH "
	0243		4 1/2					PLUG RH - MH
	0247	5	52		✓		400	MIX CONC - W-125 SMD = 12.2 PPG "
		4 1/2	24		✓		300	TL-100 EA2 = 15.5 PPG "
	0302							WASH OUT PUMP - LOWES
	0304							RELEASE CATCH DOWN PLUG
	0305	6 1/2	0		✓			DESPLAC PLUG "
		6 1/2	100				800	SHOT OFF ROTATING
	0320	6	110.3				1750	PLUG DOWN - PSE W/ CATCH DN PLUG
	0322						OK	RELEASE PSE - HEAD
								WASH UP TOOL
	0400							JOB COMPLETE

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CONSERVATION DIVISION
WICHITA, KS

THANK YOU
 WAXIE, JUSTY, BRETT

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

~~08/29/07~~
8.29.2008

KCC
AUG 29 2006
CONFIDENTIAL

ACO-1 CONFIDENTIALITY REQUEST

August 29, 2006

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

Re: Lois 2-19
Ness County, Kansas
API #15-135-24493-0000

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.

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