

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL
9-29-08

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: MURFIN DRILLING COMPANY
 License: 30606
 Wellsite Geologist: ROBERT LEWELLYN
 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>6/3/2006</u>	<u>6/11/2006</u>	<u>7/10/2006</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

SEP 29 2006
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API No. 15 - 101-21933-0000
 County: LANE
APP E2 W2 NW Sec. 27 Twp. 18 S. R. 29 East West
1240 feet from NORTH Line of Section
1020 feet from WEST Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: WILSON Well #: 1-27
 Field Name: WILDCAT
 Producing Formation: _____
 Elevation: Ground: 2806 Kelly Bushing: 2811
 Total Depth: 4633 Plug Back Total Depth: 4588
 Amount of Surface Pipe Set and Cemented at 261 Feet
 Multiple State Cementing Collar Used? Yes No
 If yes, show depth set 2125 Feet
 If Alternate II completion, cement circulated from 2125
 feet depth to SURFACE w/ 200 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
 Chloride content 16400 ppm Fluid volume 440 bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

WJM 10-2-08

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 Larson
 Title: SECRETARY/TREASURER Date: 9/29/06
 Subscribed and sworn to before me this 29TH day of SEPTEMBER,
 2006.
 Notary Public: Debra J Ludwig
 Date Commission Expires: 5/5/2008

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

RECEIVED
OCT - 2 2006
KCC WICHITA

DEBRA J. LUDWIG
Notary Public - State of Kansas
My Appt. Expires 5/5/2008

ORIGINAL

Side Two

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

Lease Name: WILSON

Well No. 1-27

Sec. 27 Twp. 18 S. R. 29 East West

County: LANE

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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 3000' Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Sample Sent to Geological Survey	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Name: ANHYDRITE	Top: 2135
Cores Taken	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	BAS ANHYDRITE	2149
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	HEEBNER SH	3915
List All E. Logs Run:	DUAL INDUCTION		LANSING	3958
	DUAL COMP POROSITY		STARK SH	4232
	BOREHOLE COMP SONIC		PAWNEE	4430
	MICRORESISTIVITY		FORT SCOTT	4484
			CHEROKEE	4508
			MISSISSIPPIAN	4566
				-1104
				-1147
				-1421
				-1619
				-1673
				-1697
				-1755

CASING RECORD <input 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	24	261	CLASS A	180	2% GEL, 3% CC
PROD	7-7/8	5-1/2	15.5	4631	SMD	75	1/4#/SK FLOCELE
					SMD	100	5#/SK GILSONITE

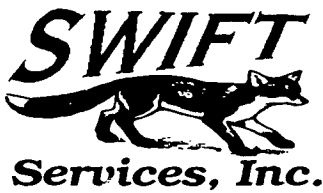
ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<input type="checkbox"/> Perforate					
<input type="checkbox"/> Protect Casing					
<input type="checkbox"/> Plug Back TD					
<input type="checkbox"/> Plug Off Zone					
	SURF	2125	SMD	200	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
		Amount	Kind	
4	4551-54, 4389-92, 4350-53, 4325-34, 4294-4300	250 GAL	15% MCA	4551-54, 4389-92, 4350-53
		500 GAL	15% MCA	4350-53, 4325-34
		250 GAL	15% MCA	4294-4300

TUBING RECORD		Size: 2-3/8	Set At: 4580	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 7/10/06			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. 90	Gas Mcf 0	Water Bbls. 60	Gas-Oil Ratio 0	Gravity 34

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

Production Interval: 4294-4554 OA



CHARGE TO: *Larson Operating*
 ADDRESS: **KCC**
 CITY, STATE, ZIP CODE: **SEP 29 2006**

TICKET No. **10603**

PAGE 1 OF 1

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SERVICE LOCATIONS 1. <i>Hays, Ks.</i> 2. <i>Ness City, Ks.</i> 3. 4.	WELL/PROJECT NO. <i>#1-27</i>	LEASE <i>Wilson</i>	COUNTY/PARISH <i>Lane</i>	STATE <i>Ks</i>	DATE <i>6-12-06</i>	OWNER <i>Same</i>
	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>Murfin Drlg</i>	RIG NAME/NO.	SHIPPED VIA <i>2/T</i>	DELIVERED TO <i>Location</i>	ORDER NO.
	WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Cement Longstring</i>	WELL PERMIT NO.	WELL LOCATION	
REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>575</i>		<i>1</i>			MILEAGE <i>#103</i>	<i>40</i>	<i>mi</i>			<i>4.00</i>	<i>160.00</i>
<i>578</i>		<i>1</i>			<i>Pump Charge Longstring</i>	<i>1</i>	<i>ea</i>			<i>1250.00</i>	<i>1250.00</i>
<i>280</i>		<i>1</i>			<i>Flocheck 21</i>	<i>1000</i>	<i>gal</i>			<i>2.00</i>	<i>2000.00</i>
<i>419</i>		<i>1</i>			<i>Rotating Head</i>	<i>1</i>	<i>ea</i>	<i>5 1/2"</i>		<i>250.00</i>	<i>250.00</i>
<i>330</i>	RECEIVED	<i>2</i>			<i>SMD Cement</i>	<i>175</i>	<i>skt</i>			<i>12.00</i>	<i>2100.00</i>
<i>276</i>	OCT - 2 2006	<i>2</i>			<i>Flocele</i>	<i>19</i>	<i>#</i>			<i>1.25</i>	<i>23.75</i>
<i>277</i>	KCC WICHITA	<i>2</i>			<i>Gilsonite</i>	<i>500</i>	<i>#</i>			<i>.40</i>	<i>200.00</i>
<i>581</i>		<i>2</i>			<i>Cement Service Charge</i>	<i>175</i>	<i>skt</i>			<i>1.10</i>	<i>192.50</i>
<i>583</i>		<i>2</i>			<i>Drayage</i>	<i>352.59</i>	<i>TM</i>			<i>1.00</i>	<i>352.54</i>

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 *J.C. Larson*
 DATE SIGNED *6-12-06* TIME SIGNED *0630* 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	<i>6528 79</i>
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?				<i>Lane TAX 5.3%</i>	<i>242 41</i>
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	<i>6771 20</i>
<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 *Nick Korbe* APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 6-12-06 PAGE NO. 7

CUSTOMER Larson Operating WELL NO. #1-27 LEASE Wilson JOB TYPE Cement bonding TICKET NO. 10603

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0200							on loc setup Trks
								KCC
	0200							5 1/2" x 15.5" x 4630' x 42.5' SS.
	0430							Start FE Brk Circulation
	0525	2	3/2					Plug RH & MH
	0530	4	0			200		5 ⁶⁶¹ st. Prep flush 1000 gal Flock ch
	0538	5.5	34/0			250		start L. Cement 75 sks SMD @ 12.2 #
	0544	5	30/0			250		T. Cement 100 sks SMD @ 14 #
	0550		28					End Cement wash Pth Drop Plug
	0553	6.5	0			200		start Displacement
	0604	5.5	78			300		Catch Cement
	0610	5	109			650 1100		Land Plug Release Pressure Float Held

RECEIVED
OCT - 2 2006
KCC WICHITA

Thank you
Nick, Josh & Brett



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

TICKET No. **10343**

KCC
SEP 29 2006
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PAGE 1 OF 1

SERVICE LOCATIONS
 1. **NESS CITY KS**
 WELL/PROJECT NO. **1-27** LEASE **WILSON** COUNTY/PARISH **LAPE** STATE **KS** CITY **LOCATION** DATE **6-21-06** OWNER **SAME**
 2. TICKET TYPE SERVICE SALES CONTRACTOR **EXPRESS WELL SERVICE** RIG NAME/NO. SHIPPED VIA **CT** DELIVERED TO ORDER NO.
 3. WELL TYPE **OIL** WELL CATEGORY **DEVELOPMNT** JOB PURPOSE **CEMENT PORT COLLAR** WELL PERMIT NO. WELL LOCATION **NEIGHTON, KS - 3W, 1S, 1/4 E, SS**
 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		MT		4.00	160.00
577		1			PUMP SERVICE	1		JOB		800.00	800.00
330		1			SWIFT MULTI-DENSITY STANDARD	200		SKS		12.00	2400.00
296		1			FLOCCE	59		WBS		1.25	73.75
290	RECEIVED OCT - 2 2006 KCC WICHITA	1			D-ADR	1		GAL		32.00	32.00
581		1			SERVICE CHARGE CEMENT	235		SKS		1.10	258.50
583		1			DRAYAGE	23319		WBS	466.38	1.00	466.38

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 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS
 X
 DATE SIGNED **6-21-06** TIME SIGNED **0800** 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?				4190.63
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				Lane TAX 5.3%
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				4323.143

JOB LOG

SWIFT Services, Inc.

DATE **6-21-06** PAGE NO. **7**

CUSTOMER **LARSON OPERATING** WELL NO. **1-27** LEASE **WILSON** JOB TYPE **CEMENT PORT COLLAR** TICKET NO. **10343**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0800							ON LOCATION
								2 3/8 x 5 1/2 PORT COLLAR = 2125
	0825				✓		1000	PSCTEST CASING - HELD
	0830	3	2	✓		450		OPEN PORT COLLAR - INJ. RATE
	0835	4 1/2	111	✓		450		MIX CEMENT 200 SLS SMD - 1/4 #/SQ FLOCC
	0905	3	7	✓		600		DISPARE CEMENT
	0915				✓		1000	CLOSE PORT COLLAR - PSCTEST - HELD
								CIRCULATED 10 SLS CEMENT TO PET
	0930	3	25		✓		400	RUN 4 SLS CIRCULATE CLEAN
								WASH UP TRUCK
	1030							JOB COMPLETE

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THANK YOU
 WAYNE, BRETT, SEAN

RECEIVED
 OCT - 2 2006
 KCC WICHITA