

ORIGINAL

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

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 31406
 Name: Prairie Resources, Inc.
 Address: 2530 NW Willow Road
 City/State/Zip: Medicine Lodge, KS 67104
 Purchaser: N/A
 Operator Contact Person: Robert W. Packard
 Phone: (620) 886-3431
 Contractor: Name: Duke Drilling Co., Inc.
 License: 5629
 Wellsite Geologist: Joe M. Baker
 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. _____

<u>February 27, 2006</u>	<u>March 5, 2006</u>	<u>N/A</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007-22984-00-00
 County: Barber
 SW NW SE _____ Sec. 25 Twp. 31 S. R. 13 East West
1650 feet from (S) / N (circle one) Line of Section
2310 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: Kimball Well #: 4
 Field Name: Nurse
 Producing Formation: N/A
 Elevation: Ground: 1516 Kelly Bushing: 1527
 Total Depth: 4188 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 234 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 P+A AIT I NK
 (Data must be collected from the Reserve Pit) 10-27-08
 Chloride content 5000 ppm Fluid volume 240 bbls
 Dewatering method used Hauled to SWD well.
 Location of fluid disposal if hauled offsite: _____
 Operator Name: Woolsey Operating Co.
 Lease Name: Clarke #1 License No.: 33168
 Quarter SW Sec. 8 Twp. 32 S. R. 12 East West
 County: Barber Docket No.: D-28492

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: Robert W. Packard
 Title: President Date: March 21, 2006
 Subscribed and sworn to before me this 21st day of March,
 2006.
 Notary Public: Sandra L. Adams
 Date Commission Expires: 07-28-09

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
MAR 22 2006
KCC WICHITA

 **SANDRA L. ADAMS**
 Notary Public - State of Kansas
 My Appt. Exp. 07-28-09

✓

Operator Name: Prairie Resources, Inc. Lease Name: Kimball Well #: 4
 Sec. 25 Twp. 31 S. R. 13 East West County: Barber

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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: None	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" 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>Heebner</td> <td>3482</td> <td>-1955</td> </tr> <tr> <td>Toronto</td> <td>3448</td> <td>-1471</td> </tr> <tr> <td>Douglas Sh</td> <td>3518</td> <td>-1991</td> </tr> <tr> <td>Douglas Sd</td> <td>3628</td> <td>-2101</td> </tr> <tr> <td>Lansing</td> <td>3660</td> <td>-2133</td> </tr> <tr> <td>Stark Sh</td> <td>3990</td> <td>-2471</td> </tr> <tr> <td>Miss Cht</td> <td>4161</td> <td>-2634</td> </tr> </table>	Name	Top	Datum	Heebner	3482	-1955	Toronto	3448	-1471	Douglas Sh	3518	-1991	Douglas Sd	3628	-2101	Lansing	3660	-2133	Stark Sh	3990	-2471	Miss Cht	4161	-2634
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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"	23	234'	60/40 poz	250	3% CC, 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 <i>(Amount and Kind of Material Used)</i>
		Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd 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 *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled _____

Production Interval Other (Specify) _____

RECEIVED
 MAR 22 2006
 KCC WICHITA

ALLIED CEMENTING CO., INC.

21259

Federal Tax I.D.#

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

SERVICE POINT:

ML

DATE <u>3-5-06</u>	SEC. <u>25</u>	TWP <u>35</u>	RANGE <u>12W</u>	CALLED OUT <u>8:00 AM</u>	ON LOCATION <u>10:00 AM</u>	JOB START <u>10:00 AM</u>	JOB FINISH <u>11:00 PM</u>
LEASE <u>Kimball</u>	WELL # <u>4</u>	LOCATION <u>ML Shop 5 3/4 W, New 1/2 S, 1/2 E N/S</u>			COUNTY <u>Barber</u>	STATE <u>KS.</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Duke #5
 TYPE OF JOB Rotary Plug
 HOLE SIZE _____ T.D. _____
 CASING SIZE 8 7/8 DEPTH 235'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 300 MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT Freshwater

OWNER Prarie Resources
 CEMENT AMOUNT ORDERED 145 SX 60:40:6

EQUIPMENT
 PUMP TRUCK # 414 CEMENTER Carl Bollen
 HELPER Dennis Cushman
 BULK TRUCK # 389 DRIVER Greg Kersten
 BULK TRUCK # _____ DRIVER _____

COMMON	<u>87</u>	<u>A</u>	@	<u>9.60</u>	<u>835.20</u>
POZMIX	<u>58</u>		@	<u>5.20</u>	<u>301.60</u>
GEL	<u>8</u>		@	<u>15.00</u>	<u>120.00</u>
CHLORIDE			@		
ASC			@		
HANDLING	<u>153</u>		@	<u>1.70</u>	<u>260.10</u>
MILEAGE	<u>10</u>	<u>X 153</u>	<u>X .07</u>		<u>200.00</u>
					<u>Minch</u> TOTAL <u>1716.90</u>

REMARKS:

Pump 50 SX - 600'
50 SX - 260'
20 SX - 60'
10 SX - mouse hole
15 SX - 12 1/2" hole

SERVICE

DEPTH OF JOB	<u>600'</u>		
PUMP TRUCK CHARGE			<u>730.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>10</u>	@	<u>5.00</u> <u>50.00</u>
MANIFOLD		@	
TOTAL <u>780.00</u>			

CHARGE TO: Prarie Resources
 STREET _____
 CITY _____ STATE _____ ZIP _____

RECEIVED PLUG & FLOAT EQUIPMENT

MAR 22 2006

KCC WICHITA

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

TOTAL CHARGE [REDACTED]
 DISCOUNT [REDACTED] IF PAID IN 30 DAYS

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 [Signature]

Joe Luvinection
 PRINTED NAME