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NOV 02 2005

KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 6039
Name: L. D. DRILLING, INC.
Address: 7 SW 26 AVE.
City/State/Zip: GREAT BEND, KANSAS 67530
Purchaser: NCRA
Operator Contact Person: L. D. DAVIS
Phone: (620) 793-3051
Contractor: Name: DUKE DRILLING COMPANY, INC
License: 5929
Wellsite Geologist: KEVIN KESSLER

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. _____

8/05/05 8/22/05 9/14/05
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 135-24371-00-00
County: NESS
C SE SE Sec. 5 Twp. 16 S. R. 26 East West
665 feet from (S) N (circle one) Line of Section
725 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: DODRILL Well #: 1-5
Field Name: WILDCAT
Producing Formation: MISSISSIPPI
Elevation: Ground: 2636' Kelly Bushing: 2645'
Total Depth: 4630' Plug Back Total Depth: 4500'
Amount of Surface Pipe Set and Cemented at 237 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 Alt II NUR
(Data must be collected from the Reserve Pit) 9-3-08
Chloride content _____ ppm Fluid volume _____ 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.: _____

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: [Signature]
Title: CLERK Date: 10/31/05
Subscribed and sworn to before me this 31 day of October,
20 05.
Notary Public: [Signature] Bessie DeWerff
Date Commission Expires: 5-20-09

KCC Office Use ONLY
NO Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

NOTARY PUBLIC - State of Kansas
BESSIE M. DeWERFF
My Appl. Exp. 5-20-09

Operator Name: L. D. DRILLING, INC. Lease Name: DODRILL Well #: 1-5
 Sec. 5 Twp. 16 S. R. 26 East West County: NESS

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: DUAL INDUCTION LOG, MICRO LOG, SONIC LOG, & COMPENSATED DENSITY/NEUTRON PE LOG	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>ANHYDRITE</td> <td>2060</td> <td>+585</td> </tr> <tr> <td>BASE/ANHYDRITE</td> <td>2090</td> <td>+555</td> </tr> <tr> <td>HEEBNER</td> <td>3886</td> <td>-1241</td> </tr> <tr> <td>LANSING</td> <td>3928</td> <td>-1283</td> </tr> <tr> <td>STARK</td> <td>4166</td> <td>-1521</td> </tr> <tr> <td>CHEROKEE</td> <td>4448</td> <td>-1803</td> </tr> <tr> <td>MISSISSIPPI</td> <td>4512</td> <td>-1867</td> </tr> </tbody> </table>	Name	Top	Datum	ANHYDRITE	2060	+585	BASE/ANHYDRITE	2090	+555	HEEBNER	3886	-1241	LANSING	3928	-1283	STARK	4166	-1521	CHEROKEE	4448	-1803	MISSISSIPPI	4512	-1867
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CASING RECORD <input checked="" 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"	20#	237'	STANDARD	150	2%CC,3%Gel
Production	7 7/8"	4 1/2"	10.5 #	4629'	AA-2	175	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone		A CON	250	3%cc,2%Calset,1/4#CF

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
2	- 1300'	1500 GAL 15% NE	
2	4544 - 4546		
4	4536 - 4540; 4146 - 4152; 4006 - 4010		
	4.5" BOLT BRIDGE PLUG @ 4500'		
TUBING RECORD Size <u>2 3/8"</u> Set At <u>4497'</u> Packer At <u>4124'</u>		Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	RECEIVED NOV 02 2005 KCC WICHITA
Date of First, Resumerd Production, SWD or Enhr. <u>9/19/05</u>		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. <u>33</u>	Gas Mcf <u>60</u>	Water Bbls. <u>60</u> Gas-Oil Ratio <u> </u> Gravity <u> </u>

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify)

METHOD OF COMPLETION Production Interval

As consideration, the Customer agrees:

a) To pay ACID SERVICES, LLC in accord with the rates and terms stated in ACID SERVICES, LLC's current price list. Invoices are payable NET 30 after date of invoice. Upon Customers' default payment of Customer's account by the last day of the month following the month in which the invoice is dated, Customer agrees to pay interest thereon after default at the highest lawful contract rate applicable but never to exceed 18% per annum. In the event it becomes necessary to employ attorneys to enforce collection of said account, Customer agrees to pay all collection cost and attorney fees in the amount of the unpaid account.

b) To defend, indemnify, release and hold harmless ACID SERVICES, LLC, its divisions, subsidiaries, parent and affiliated companies and the officers, directors, employees, agents and servants of all of them from and against any claims, liability, expenses, attorney's fees, and costs of defense to the extent permitted by law for:

1. Damage to property owned by, in the possession of, or leased by Customer, and/or the well owner (if different from Customer), including, but not limited to, surface and subsurface damage. The term "well owner" shall include working and royalty interest owners.
2. Reservoir, formation, or well loss or damage, subsurface trespass or any action in the nature thereof.
3. Personal injury of death or property damage (including, but not limited to, damage to the reservoir, formation or well), or any damages whatsoever, growing out of or in any way connected with or resulting from pollution, subsurface pressure, losing control of the well and/or a well blowout or the use of radioactive material. The amount of this invoice is due and payable at ACID SERVICES, LLC, Dept. No. 1131, Tulsa, Oklahoma 74182. All terms of the Service Order with customer are incorporated herein and made a part hereof by reference.

The defense, indemnity, release and hold harmless obligations of Customer provided for in this Section b) and Section c) below shall apply to claims or liability even if caused or contributed to by ACID SERVICES, LLC's negligence, strict liability, or operated, or furnished by ACID SERVICES, LLC or any defect in the data, products, supplies, materials, or equipment of ACID SERVICES, LLC whether the preparation, design, manufacture, distribution, or marketing thereof, or from a failure to warn any person of such defect. Such defense, indemnity, release and hold harmless obligations of Customer shall not apply where the claims or liability are caused by the gross negligence or willful misconduct of ACID SERVICES, LLC. The term "ACID SERVICES, LLC" as used in said Sections b) and c) shall mean ACID SERVICES, LLC, its divisions, subsidiaries, parent and affiliated companies, and the officers, directors, employees, agents and servants of all of them.

c) That because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others, ACID SERVICES, LLC is unable to guarantee the effectiveness of the products, supplies, or materials, nor the results of any treatment or service, nor the accuracy of any chart interpretation, research analysis, job recommendation or other data furnished by ACID SERVICES, LLC. ACID SERVICES, LLC personnel will use their best efforts in gathering such information and their best judgment in interpreting it, but Customer agrees that ACID SERVICES, LLC shall not be liable for and Customer shall indemnify ACID SERVICES, LLC against any damages from the use of such information.

d) That ACID SERVICES, LLC warrants only title to the products, supplies, and materials and that the same are free from defects in workmanship and materials. THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED OF MERCHANTABILITY, FITNESS OR OTHERWISE WHICH EXTEND BEYOND THOSE STATED IN THE IMMEDIATELY PRECEDING SENTENCE. Acid Services LLC's liability and Customer's exclusive remedy in and cause of action (whether in contract, tort, breach of warranty or otherwise) arising out of the sale or use of any products, supplies or materials is expressly limited to the replacement of such products, supplies or materials on their return to ACID SERVICES, LLC or, at ACID SERVICES, LLC's option, to the allowance to the Customer of credit for the cost of such items. In no event shall ACID SERVICES, LLC be liable for special, incidental, indirect, punitive or consequential damages.

e) To waive the provisions of the Deceptive Trade Practices - Consumer Protection Act, to the extent permitted by law. We certify that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of goods and/or with respect to service furnished under this contract.

f) That this contract shall be governed by the law of the state where services are performed or materials are furnished.

g) That ACID SERVICES, LLC shall not be bound by any changes or modifications in this contract, except where such change or modification is made in writing by a duly authorized manager of ACID SERVICES, LLC.



TREATMENT REPORT

Customer ID	Date	
Customer	9-23-05	
Lease	Lease No.	Well #
Dudwell		1-5

Field Order #	Station	Casing	Depth	County	State
109790	Pratt KS	4 1/2	4627	Wass	KS
Type Job			Formation	Legal Description	
Longstanding New Well				S-165-26w	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
4 1/2		1.36	15.3	173 sk. AA-2			2000	
Depth	Depth	From	To	Pre Pad		Max		5 Min.
4612	7370							
Volume	Volume	From	To	Pad		Min		10 Min.
13.3								
Max Press	Max Press	From	To	Frac		Avg		15 Min.
2000								
Well Connection	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush		Gas Volume		Total Load
				12 Bbl. m.f.				

Customer Representative	Station Manager	Treater
L.D. Davis	D. Scott	Scotty

Service Units	124	226	303	595					
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
0600					On loc w/Trk. Safety mtg
					G.S. Bottom - TSFV Top S.J.
					Cont 2-4-6-8-10-12-14-16
					Cont Bskt on J461 st P.C. @ 2087.56
					Open Bottom Deep Bull's Ave w/Rig
1112	300		10	5	H ₂ O Spacer
1114	300		12	5	St mud Flush
1117	300		5	5	H ₂ O Spacer
1119	100		42	5	1119 Cont @ 13.3 ppg 173 ski
1130	0		10	5	Close In + Wash Pumpative
1132	100			6	Release Plug + St Disp w/H ₂ O
1140	300		45	5	45 Bbl. Out lift Cont.
1145	1100		73.3	0	Plug Down + psi Test Psg
1147	0				Release psi. float Held
					Plug R.H. w/13 sk. ppg no m.f.
					Good Proc - thru Job

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Thank you
Scotty



CHARGE TO: Mull Dr. Co.
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

TICKET No 8597

PAGE 1 OF 1

SERVICE LOCATIONS: 1. Hays Co.
 2. _____
 3. _____
 4. _____

WELL/PROJECT NO. *1-S LEASE Dodrill COUNTY/PARISH Ness STATE Ks. CITY _____ DATE 8-5-05 OWNER Same

TICKET TYPE SERVICE SALES CONTRACTOR Duke #4 RIG NAME/NO. _____ SHIPPED VIA CIT DELIVERED TO Loc. ORDER NO. _____

WELL TYPE Oil WELL CATEGORY Development JOB PURPOSE Cont. Surface WELL PERMIT NO. _____ WELL LOCATION _____

REFERRAL LOCATION _____ INVOICE INSTRUCTIONS _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			UM		UM	
575		1			MILEAGE #105	40	mi	4	00	160 00
376		1			Pump Service	1	ea	650	00	650 00
410		1			Top Plug	1	ea	80	00	80 00
581		1			Service Charge	150	hrs	1	10	165 00
583		1			Drayage	294.4	TON miles	1	00	274 40
325		1			Standard Cement	150	sk	8	00	1320 00
279		1			Bentonite	3	sk	12	00	36 00
278		1			Calcium Chloride	4	sk	32	00	128 00

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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 [Signature]
 DATE SIGNED _____ TIME SIGNED _____
 A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	IN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				2833 40
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		
TOTAL				2916 20

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this ticket.
 SWIFT OPERATOR [Signature] APPROVAL _____

Thank You!

08/17/2005 09:13 FAX 1 719 767 8994 MDC-CHEY WELLS CO + MDC-WICHITA-LOG 001

JOB LOG

SWIFT Services, Inc.

CUSTOMER <i>Mull</i>	WELL NO. <i>1-5</i>	LEASE <i>Dodril</i>	JOB TYPE <i>Surface</i>	DATE <i>8/5/05</i>	PAGE NO. <i>7</i>
				TICKET NO. <i>85917</i>	

CHART NO.	TIME	RATE (BPM)	VOLUME (BBQ) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	<i>1630</i>							<i>On loc. Set up trucks</i>
	<i>1730</i>							<i>Rig Drilling</i>
								<i>start in hole with 8 5/8" 20" casing</i>
								<i>Cig. on Bottom</i>
	<i>1830</i>							<i>Circulate with rig pump</i>
								<i>Start mixing 150 sacks</i>
		<i>4</i>	<i>36</i>					<i>Standard Cont. 2% Gel, 3% CC</i>
								<i>Finished mixing</i>
			<i>14</i>					<i>Release Top Plug</i>
	<i>1850</i>							<i>Displ. 14501</i>
								<i>Plug down</i>
								<i>Shut in @ well head</i>
								<i>Circulated 7^{50'} cont. to pit</i>
								<i>work and pack up trucks</i>
								<i>Job Complete</i>

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TREATMENT REPORT

Customer ID		Date	
Customer <i>L.O. Drilling Inc</i>		<i>8-31-05</i>	
Lease <i>Ordil</i>		Lease No.	Well # <i>1-5</i>

Field Order #	Station <i>Pratt</i>	Casing <i>4 1/2</i>	Depth <i>2077</i>	County <i>Ness</i>	State <i>Ks</i>
Type Job <i>4 1/2 Port Collar</i>			Formation <i>Newwell</i>	Legal Description <i>5-16s-26w</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>4 1/2</i>	Tubing Size <i>2 3/8</i>	Shots/Ft <i>25 shots</i>		Acid <i>A-con 30% cc</i>	RATE <i>11.6 #/gal</i>	PRESS	ISIP	
Depth <i>2077 P.C.</i>	Depth	From	To	Pre Pad <i>2% cal set, 1/4 cell Fluid</i>	Max		5 Min.	
Volume <i>19 BBLs</i>	Volume	From	To	Pad	Min		10 Min.	
Max Press	Max Press	From	To	Frac <i>—</i>	Avg		15 Min.	
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush <i>Fresh water</i>	Gas Volume		Total Load	

Customer Representative <i>L.O. Davis</i>	Station Manager <i>DAVE Scott</i>	Treater <i>Allen F. Werth</i>
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Service Units	<i>135</i>	128	<i>347</i>	<i>571</i>				
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>1600</i>					<i>called out 8-30-05</i>
<i>0810</i>					<i>on loc. Xtreme well service "Rig up"</i>
<i>0840</i>					<i>start Tool in Hole</i>
<i>1000</i>					<i>open P.C @ 2077 pump water</i>
<i>1015</i>					<i>have good Blow Stmickmt</i>
		<i>800#</i>	<i>13</i>	<i>2</i>	<i>Pump total of 13 BBLs</i>
		<i>1500#</i>			<i>Loose cir PSI up to 1500 PSI</i>
		<i>1500#</i>			<i>Re check P.C. P.C IS open</i>
<i>1130</i>					<i>PSI again to 1500# (Close P.C. PSI 1000)</i>
					<i>Reverse out 15 BBLs Pumped clear</i>
					<i>@ 225' - Pull Tbg out of Hole</i>
<i>1215</i>	<i>1500#</i>		<i>4</i>		<i>out of hole w/ Tbg - PSI on csg 1500# ok</i>
<i>1300</i>					<i>log on loc to perf @ 1300</i>
<i>1335</i>	<i>300#</i>		<i>2</i>	<i>2</i>	<i>out of Hole w/ gun - Hook up to well pump</i>
	<i>300#</i>			<i>2</i>	<i>Stmickmt - Good cir.</i>
					<i>Fin mix - well on vac - cmt to Pit</i>
	<i>200#</i>	<i>200#</i>	<i>9</i>	<i>2</i>	<i>St Disp. (9 BBLs) 9 BBLs out</i>
	<i>500#</i>	<i>500#</i>			<i>FIN D.SP.</i>
	<i>300#</i>	<i>300#</i>			<i>Shut IN</i>
<i>1530</i>					<i>washup + Backup Job complete</i>
					<i>thanks Allen + crew</i>

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