

**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

ORIGINAL

Operator: License # 9684
 Name: M S DRILLING CO.
 Address: P.O. BOX 87
 City/State/Zip: ST. PAUL, KANSAS 66771
 Purchaser: _____
 Operator Contact Person: MARK SMITH
 Phone: (620) 449-2200
 Contractor: Name: M S DRILLING CO.
 License: 9684
 Wellsite Geologist: MARK SMITH
 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: N/A
 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>8-22-05</u>	<u>8-23-05</u>	<u>8-29-05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15-037-21684-00-00
 County: CRAWFORD
SE SE NW Sec. 24 Twp. 29 S. R. 21 East West
2310 feet from S / (circle one) Line of Section
2310 feet from E / (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) - NE - SE NW SW
 Lease Name: HOFER Well #: 24-1
 Field Name: WILDCAT
 Producing Formation: BARTLESVILLE
 Elevation: Ground: 920 Kelly Bushing: _____
 Total Depth: 446 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 20 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 20
 feet depth to 0 w/ 5 sx cmt.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit) N/A At I NK
9-9-08
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: F/A
 Operator Name: _____
 Lease Name: RECEIVED License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: DEC 22 2005 Docket No.: _____

KCC WICHITA

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: Mark A. Smith
 Title: operator Date: _____
 Subscribed and sworn to before me this 21 day of DEC
2005
 Notary Public: Christina Spielbusch
 Date Commission Expires: 10-15-2008

KCC Office Use ONLY

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

Christina I. Spielbusch
 Notary Public - State of Kansas
 My Appt. Expires 10-15-2008

✓

X

Operator Name: M S DRILLING CO. Lease Name: HOOPER Well #: 24-1
 Sec. 24 Twp. 29 S. R. 21 East West County: CRAWFORD

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run: NONE

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
PAUMEE LIME	86'	+834'
OSWEGO LIME	199'	+721'
VERDEGRIS LIME	310'	+610'
WEIR-PITT. COAL	401'	+519'

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	11"	7"	10	20'	PORTLAND	5	NONE
PRODUCTION	5 7/8"	2 3/8"	6 1/2	445'	PORTLAND	46	NONE

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 (Amount and Kind of Material Used)		Depth

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 (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____



CRAWFORD COUNTY LUMBER INC.

308 EAST FOREST
GIRARD, KS 66743
(620) 724-8714



HOME OWNED - HOME OPERATED

INVOICE

DATE	INVOICE #	PAGE
04-20-2005	83083	1

SOLD TO	1
	CASH SALE

SHIP TO	

RECEIVED
 DEC 22 2005
 KCC WICHITA

ITEM NO.	QUANTITY	ITEM DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
PC		PORTLAND CEMENT	100.00	7.50	750.00
					750.00
ACCT BALANCE:					0.00
1 1/2% PER MONTH (18% PER ANNUM) WILL BE ADDED TO PAST DUE INVOICES. SIGNATURE: _____					SUB TOTAL
					OTHER AMT
					SALES TAX
					SHIPPING
					TOTAL AMT
					TENDERED
					0.00
					BALANCE
					0.00

THANK YOU!