

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL
9/13/09

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 3842

Name: LARSON ENGINEERING, INC.

Address: 562 WEST STATE ROAD 4

City/State/Zip: OLMITZ, KS 67564-8561

Purchaser: _____

Operator Contact Person: TOM LARSON

Phone: (620) 653-7368

Contractor: Name: LANDMARK DRILLING, LLC

License: 33549

Wellsite Geologist: RICHARD S. DAVIS JR.

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. _____

5/19/2007 5/31/2007
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 101-22015-00-00

County: LANE

SW SW SE Sec. 31 Twp. 18 S. R. 30 East West

330 feet from SOUTH Line of Section

2310 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: WHITING Well #: 1-31

Field Name: WILDCAT

Producing Formation: _____

Elevation: Ground: 2900' Kelly Bushing: 2905'

Total Depth: 4629' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 261 Feet

Multiple State 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 Form
(Data must be collected from the Reserve Pit)

Chloride content 14000 ppm Fluid volume 800 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: Carol Larson

Title: SECRETARY/TREASURER Date: 9/13/07

Subscribed and sworn to before me this 13TH day of SEPTEMBER

2007.

Notary Public: Debra J. Ludwig

Date Commission Expires: MAY 5, 2008

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION
SEP 14 2007

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

CONSERVATION DIVISION
WICHITA, KS

Operator Name: LARSON ENGINEERING, INC. Lease Name: WHITING Well #: 1-31
 Sec. 31 Twp. 18 S. R. 30 East West County: LANE

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	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Sample Sent to Geological Survey	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	ANHYDRITE	2209	+696
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	BASE ANHYDRITE	2269	+636
List All E. Logs Run:	DUAL INDUCTION		HEEBNER	3915	-1010
	DUAL COMP POROSITY		LANSING	3958	-1053
	BOREHOLE COMP SONIC		PAWNEE	4454	-1549
	MICRORESISTIVITY		FORT SCOTT	4496	-1591
			CHEROKEE SH	4520	-1615
			MISSISSIPPI	4583	-1678

KCC
SEP 13 2007
CONFIDENTIAL

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"	23#	261'	CLASS A	180	2% GEL, 3% CC

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					

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

RECEIVED
KANSAS CORPORATION COMMISSION
SEP 14 2007
CONSERVATION DIVISION
WICHITA, KS

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 Open Hole Perf. Dually Comp. Commingled Other (Specify) D&A

Production Interval: _____

ALLIED CEMENTING CO., INC. 23922

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

SERVICE POINT:

Ht Bond
6-1-07

DATE <i>5-31-07</i>	SEC. <i>31</i>	TWP. <i>18</i>	RANGE <i>30</i>	CALLED OUT <i>4:30pm</i>	ON LOCATION <i>7:15pm</i>	JOB START <i>1:00am</i>	JOB FINISH <i>2:30am</i>
Whiting LEASE		WELL# <i>1-31</i>	LOCATION <i>Amy 2 1/2w 3s 1 1/2w N.S.</i>			COUNTY <i>Lane</i>	STATE <i>KS</i>
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR <i>LandMark Drilling #1</i>	OWNER _____
TYPE OF JOB <i>Rotary Plug</i>	CEMENT AMOUNT ORDERED _____
HOLE SIZE <i>7 7/8</i> T.D. <i>4625'</i>	<i>255 60/40 60/40</i>
CASING SIZE _____ DEPTH _____	<i>1/4" # 720 Seal per sq.</i>
TUBING SIZE _____ DEPTH _____	COMMON <i>153</i> @ <i>12.60</i> <i>1927.80</i>
DRILL PIPE _____ DEPTH _____	POZMIX <i>102</i> @ <i>6.40</i> <i>652.80</i>
TOOL _____ DEPTH _____	GEL <i>15</i> @ <i>16.65</i> <i>249.75</i>
PRES. MAX _____ MINIMUM _____	CHLORIDE _____ @ _____
MEAS. LINE _____ SHOE JOINT _____	ASC _____ @ _____
CEMENT LEFT IN CSG. _____	<i>Flo Seal 64</i> @ <i>2.00</i> <i>128.00</i>
PERFS. _____	_____ @ _____
DISPLACEMENT _____	_____ @ _____

EQUIPMENT

PUMP TRUCK # <i>120</i>	CEMENTER <i>J. Wigham</i>	HELPER <i>De Wayne</i>
BULK TRUCK # <i>399</i>	DRIVER <i>Larry</i>	
BULK TRUCK # _____	DRIVER _____	

REMARKS:

<i>50 x e 2280'</i>	
<i>80</i>	<i>1530</i>
<i>50</i>	<i>780</i>
<i>40</i>	<i>270</i>
<i>20</i>	<i>60</i>
<i>15</i>	<i>RH.</i>

CHARGE TO: *Larson Eng.*

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

HANDLING <i>273</i>	@	<i>1.90</i>	<i>518.70</i>
MILEAGE <i>46' 9.273</i>	@		<i>1130.22</i>
TOTAL			<i>4607.27</i>

SERVICE

DEPTH OF JOB <i>2280.</i>	@		
PUMP TRUCK CHARGE	@		<i>955.00</i>
EXTRA FOOTAGE	@		
MILEAGE <i>46</i>	@	<i>6.00</i>	<i>276.00</i>
RECEIVED SEP 14 2007			
KANSAS CONSERVATION COMMISSION			
TOTAL			<i>1237.00</i>

PLUG & FLOAT EQUIPMENT

_____	@		
_____	@		
_____	@		
_____	@		
_____	@		
TOTAL			<i>0</i>

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

ALLIED CEMENTING CO., INC. 25918

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

SERVICE POINT: OAKLEY KS

DATE <u>5-19-07</u>	SEC <u>31</u>	TWP. <u>18S</u>	RANGE <u>26W</u>	CALLED OUT	ON LOCATION <u>10:30pm</u>	JOB START <u>1:45am</u>	JOB FINISH <u>2:15am</u>
LEASE <u>Whiting</u>		WELL # <u>41-B1</u>		LOCATION <u>Dighton 11w-35</u>		COUNTY <u>Wess</u>	STATE <u>KS</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)				<u>12w win</u>			

CONTRACTOR Landmark #1 OWNER same

TYPE OF JOB Surface

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>HOLE SIZE <u>12"4</u></td> <td>T.D. <u>264'</u></td> </tr> <tr> <td>CASING SIZE <u>8 5/8</u></td> <td>DEPTH <u>264'</u></td> </tr> <tr> <td>TUBING SIZE</td> <td>DEPTH</td> </tr> <tr> <td>DRILL PIPE</td> <td>DEPTH</td> </tr> <tr> <td>TOOL</td> <td>DEPTH</td> </tr> <tr> <td>PRES. MAX</td> <td>MINIMUM</td> </tr> <tr> <td>MEAS. LINE</td> <td>SHOE JOINT</td> </tr> <tr> <td>CEMENT LEFT IN CSG. <u>15'</u></td> <td></td> </tr> <tr> <td>PERFS:</td> <td></td> </tr> <tr> <td>DISPLACEMENT <u>15 3/4 BBL</u></td> <td></td> </tr> </table>	HOLE SIZE <u>12"4</u>	T.D. <u>264'</u>	CASING SIZE <u>8 5/8</u>	DEPTH <u>264'</u>	TUBING SIZE	DEPTH	DRILL PIPE	DEPTH	TOOL	DEPTH	PRES. MAX	MINIMUM	MEAS. LINE	SHOE JOINT	CEMENT LEFT IN CSG. <u>15'</u>		PERFS:		DISPLACEMENT <u>15 3/4 BBL</u>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">CEMENT</td> </tr> <tr> <td>AMOUNT ORDERED <u>180 @ 6m</u></td> <td></td> </tr> <tr> <td><u>30acc 20acc</u></td> <td></td> </tr> <tr> <td>COMMON <u>180 @ 11¹⁰</u></td> <td><u>1998⁰⁰</u></td> </tr> <tr> <td>POZMIX</td> <td>@</td> </tr> <tr> <td>GEL <u>3 @ 16⁰⁵</u></td> <td><u>49⁹⁵</u></td> </tr> <tr> <td>CHLORIDE <u>6 @ 46⁰⁰</u></td> <td><u>279⁰⁰</u></td> </tr> <tr> <td>ASC</td> <td>@</td> </tr> <tr> <td></td> <td>@</td> </tr> <tr> <td style="text-align: center;"><u>KCC</u></td> <td>@</td> </tr> <tr> <td style="text-align: center;"><u>SEP 13 2007</u></td> <td>@</td> </tr> <tr> <td style="text-align: center;"><u>CONFIDENTIAL</u></td> <td>@</td> </tr> <tr> <td></td> <td>@</td> </tr> <tr> <td></td> <td>@</td> </tr> <tr> <td>HANDLING <u>189 @ 1⁹⁰</u></td> <td><u>359¹⁰</u></td> </tr> <tr> <td>MILEAGE <u>.09 x 5K mile</u></td> <td><u>833⁴⁹</u></td> </tr> <tr> <td></td> <td>TOTAL <u>3520¹⁴</u></td> </tr> </table>	CEMENT		AMOUNT ORDERED <u>180 @ 6m</u>		<u>30acc 20acc</u>		COMMON <u>180 @ 11¹⁰</u>	<u>1998⁰⁰</u>	POZMIX	@	GEL <u>3 @ 16⁰⁵</u>	<u>49⁹⁵</u>	CHLORIDE <u>6 @ 46⁰⁰</u>	<u>279⁰⁰</u>	ASC	@		@	<u>KCC</u>	@	<u>SEP 13 2007</u>	@	<u>CONFIDENTIAL</u>	@		@		@	HANDLING <u>189 @ 1⁹⁰</u>	<u>359¹⁰</u>	MILEAGE <u>.09 x 5K mile</u>	<u>833⁴⁹</u>		TOTAL <u>3520¹⁴</u>
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EQUIPMENT

PUMP TRUCK CEMENTER <u>Fuzzy</u>
<u>427</u> HELPER <u>Kelly</u>
BULK TRUCK
<u>342</u> DRIVER <u>Steven</u>
BULK TRUCK
DRIVER

REMARKS:

cement did circulate

Plugdown @ 2:00 AM

Thanks Fuzzy & crew

CHARGE TO: Harson Operating

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB <u>264'</u>	
PUMP TRUCK CHARGE	<u>915⁰⁰</u>
EXTRA FOOTAGE	@
MILEAGE <u>49 @ 6⁰⁰</u>	<u>294⁰⁰</u>
MANIFOLD <u>thead</u>	@ <u>100⁰⁰</u>
	@
	@
	TOTAL <u>1209⁰⁰</u>

PLUG & FLOAT EQUIPMENT

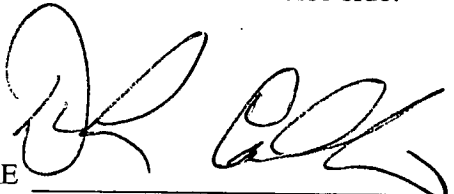
<u>1-8 5/8 Plug</u>	@ <u>60⁰⁰</u>
<u>1- Thead loc</u>	@ <u>30⁰⁰</u>
	@
	@
	@
	TOTAL <u>90⁰⁰</u>

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

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PRINTED NAME