

**CONFIDENTIAL**

**ORIGINAL**

7/21/11

**WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

KCC

OPERATOR: License # 3842

Name: LARSON ENGINEERING, INC. JUL 21 2009

Address 1: 562 WEST STATE ROAD 4 **CONFIDENTIAL**

Address 2: \_\_\_\_\_

City: OLMITZ State: KS Zip: 67564 + 8561

Contact Person: TOM LARSON

Phone: (620) 653-7368

CONTRACTOR: License # 32592

Name: WILD WEST WELL SERVICE, INC.

Wellsite Geologist: \_\_\_\_\_

Purchaser: NCRA

Designate Type of Completion:

New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  
 Gas  ENHR  SIGW  
 CM (Coal Bed Methane)  Temp. Abd.  
 Dry  Other \_\_\_\_\_  
(Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:

Operator: THUNDERBIRD DRILLING, INC.

Well Name: COWDERY #1

Original Comp. Date: 9/23/1975 Original Total Depth: 4600

Deepening  Re-perf.  Conv. to Enhr./SWD

Plug Back: 4388 Plug Back Total Depth

Commingled  Docket No. \_\_\_\_\_

Dual Completion  Docket No. \_\_\_\_\_

Other (SWD or Enhr.?)  Docket No. \_\_\_\_\_

3/23/2009 4/3/2009 5/21/2009  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date

API No. 15 - 101-20154-00-01

Spot Description: \_\_\_\_\_

SE - NW - NE Sec. 29 Twp. 18 S. R. 30  East  West

990 feet from NORTH Line of Section

1650 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

County: LANE

Lease Name: COWDERY Well #: 1 OWWO

Field Name: COWDERY

Producing Formation: L-KC MARMATON

Elevation: Ground: 2893' Kelly Bushing: 2899'

Total Depth: 4600 Plug Back Total Depth: 4388

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ 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 cmf.

D/O - Dlg - 8/5/09

**Drilling Fluid Management Plan**  
*(Data must be collected from the Reserve Pit)*

Chloride content: 0 ppm Fluid volume: 240 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 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 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: Thomas Larson

Title: PRESIDENT Date: 7/21/2009

Subscribed and sworn to before me this 21ST day of JULY

2009.

Notary Public: Debra J. Ludwig

Date Commission Expires: MAY 5, 2012

**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
KANSAS CORPORATION COMMISSION

**JUL 23 2009  
RECEIVED**

**DEBRA J. LUDWIG**  
Notary Public - State of Kansas  
My Appt. Expires 5/5/2012

Operator Name: LARSON ENGINEERING, INC. Lease Name: COWDERY Well #: 1 OWWO

Sec. 29 Twp. 18 S. R. 30  East  West County: LANE

**INSTRUCTIONS:** Show important tops and base of formations 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum  <div style="text-align: center;"> <b>KCC</b>  <b>JUL 23 2009</b>  <b>CONFIDENTIAL</b> </div>
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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

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
4	4126-30, 4258-64	750 GAL 15% MCA IN FOLLOWING ZONES	
		4363-73, 4302-04, 4266-86, 4258-64, 4226-28,	
		4125-30	

TUBING RECORD: Size: 2-3/8 Set At: 4375' Packer At:   Liner Run:  Yes  No

Date of First, Resumed Production, SWD or Enhr. 5/21/09 Producing Method:  Flowing  Pumping  Gas Lift  Other (Explain)

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
		13.36				130		35.8

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>If vented, submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	PRODUCTION INTERVAL: <u>4125-4373</u>
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KANSAS CORPORATION COMMISSION  
**JUL 23 2009**  
**RECEIVED**

**LARSON ENGINEERING, INC.**  
EXPLORATION AND PRODUCTION  
562 WEST STATE ROAD 4  
OLMITZ, KS 67564-8561

(620) 653-7368  
(620) 653-7635 FAX

**ACO-1 CONFIDENTIALITY REQUEST**

VIA CERTIFIED MAIL

July 21, 2009

Kansas Corporation Commission  
130 South Market, Room 2078  
Wichita, KS 67202

KCC  
JUL 21 2009  
CONFIDENTIAL

Re: COWDERY #1 OWWO  
990' FNL & 1650' FEL Sec. 29-18S-30W  
LANE County, Kansas  
API #15-101-20154-00-01

Ladies and Gentlemen:

Enclosed please find the ACO-1 Well Completion Form, with copies of the following:

We request that all information be held confidential for the maximum time allowable.

If you have questions or require additional information, please call.

Sincerely,

Larson Engineering, Inc.



Carol Larson  
Secretary/Treasurer

encl.

KANSAS CORPORATION COMMISSION

JUL 23 2009  
**RECEIVED**