

ORIGINAL

SIDE ONE

15-199-20289-0000

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API No. 15- 199-20289-0000
 County Wallace
- NE - NE - NE Sec. 15 Twp. 14 Rge. 39 X ^E _W
331 Feet from S(M) (circle one) Line of Section
330 Feet from (E/W) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (NE, SE, NW or SW (circle one))
 Lease Name Larson Well # 1
 Field Name _____
 Producing Formation _____
 Elevation: Ground 3527 KB 3537
 Total Depth 5520 PBDT _____
 Amount of Surface Pipe Set and Cemented at 380 Feet
 Multiple Stage Cementing Collar Used? _____ Yes X 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.H. 8-21-02
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used evaporation
 Location of fluid disposal if hauled offsite: _____
 Operator Name _____
 Lease Name _____ License No. _____
 _____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W
 County _____ Docket No. _____

Operator: License # _____
 Name: Deep Rock Exploration
 Address 111 W. 12th
Goodland, Kansas 67735
 City/State/Zip _____
 Purchaser: _____
 Operator Contact Person: Ross McGukin
 Phone (785) 899-7060
 Contractor: Name: BHK
 License: _____
 Wellsite Geologist: Tyler Sanders
 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/Reentry: Old Well Info as follows:
 Operator: _____
 Well Name: _____
 Comp. Date _____ Old Total Depth _____
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
1-23-02 2-04-02 2.5.02
 Spud Date Date Reached TD Completion Date

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 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 [Signature]
 Title Agent Date 6-30-02
 Subscribed and sworn to before me this 30th day of JULY, 2002.
 Notary Public Janice K. Bright
 Date Commission Expires 3-26-05

K.C.C. OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 Geologist Report Received
 Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)
RECEIVED
 KANSAS CORPORATION COMMISSION

JANICE K. BRIGHT
 NOTARY PUBLIC
 STATE OF KANSAS
 My Appt. Exp. _____

JUL 31 2002

Form ACO-1 (7-91)

CONSERVATION DIVISION
WICHITA, KS

SIDE TWO

ORIGINAL

Operator Name Deep Rock Exploration Lease Name Larson Well # 1
 Sec. _____ Twp. _____ Rge. _____ East West
 County Wallace

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets.) 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 (Submit Copy.) List All E.Logs Run: Did not run E-Logs	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input checked="" type="checkbox"/> Sample <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Name</th> <th style="width: 20%;">Top</th> <th style="width: 20%;">Datum</th> </tr> </thead> <tbody> <tr> <td>Topeka</td> <td>3903</td> <td>-366</td> </tr> <tr> <td>Heebner</td> <td>4051</td> <td>-514</td> </tr> <tr> <td>Lansing</td> <td>4111</td> <td>-574</td> </tr> <tr> <td>B/KC</td> <td>4462</td> <td>-925</td> </tr> <tr> <td>Morrow</td> <td>4824</td> <td>-1287</td> </tr> <tr> <td>Mississippian</td> <td>4946</td> <td>-1409</td> </tr> </tbody> </table>	Name	Top	Datum	Topeka	3903	-366	Heebner	4051	-514	Lansing	4111	-574	B/KC	4462	-925	Morrow	4824	-1287	Mississippian	4946	-1409
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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		380	common	275	3% CaCl

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		60/40 poz	215	plugs @ 5504, 2710, 1680, 420' surface

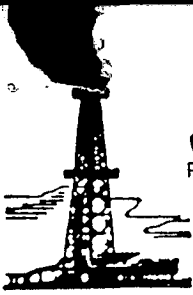
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj.				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 Other (Specify) _____

Production Interval: _____



CEMENTER'S WELL SERVICE, INC.

P.O. BOX 336220 • GREELEY, CO 80633 • (970) 353-7299 • FAX (970) 353-7712

15-199-20289-00-00

RECEIVED FOR INVOICE No 182144
KANSAS CORPORATION COMMISSION

JUL 31 2002

CONSERVATION DIVISION
WICHITA, KS

Deep Rock

Date <i>2-04-02</i>	Well Owner <i>Exploration</i>	Well No. <i>#1</i>	Lease <i>Larson</i>
County <i>Wallace</i>	State <i>Kansas</i>	Field	
Charge to <i>Deep Rock Exploration</i>	Address <i>111 West 12th Street</i>		Charge Code
City, State <i>Goodland Kansas 67735</i>			For Office Use Only
Pump Truck No. <i>1204</i>	Code	Bulk Truck No. <i>1211</i>	Code
Type of Job	Depth	Ft.	To
Surface	Bottom of Surface	Ft.	To
Plug <i>4 1/2" D.P.</i>	Plug Landed @	Ft.	Time On <i>12:00 pm</i>
Production	Pipe Landed @	Ft.	Time Off <i>01:45 AM</i>

Reference No.	Description	Qty.	Meas.	Unit Price	Amount
	Pump Truck Charge				
	Cement Neat				
	Poz. Mix ✓ <i>60/40</i>	<i>215</i>	<i>SKS</i>		<i>6200.00</i>
	Calcium Chloride				
	Gel <i>6 %</i> Flo-Cele #Per Sack				
	Handling Charge				
	Hauling Charge				
	Additional Cement				
	<i>1st Plug @ 5504' w/ 25 SKS</i>				
	<i>2nd Plug @ 2710' w/ 25 SKS</i>				
	<i>3rd Plug @ 1680' w/ 100 SKS</i>				
	<i>4th Plug @ 420' w/ 40 SKS 1/2 in 1/4 out of Surface Casing ✓</i>				
	<i>5th Plug @ Top of Surface Casing w/ 10 SKS</i>				
	<i>plug Rathole w/ 15 SKS</i>				
	<i>Mixing Rate 4 BPM - Displacement Rate 6 BPM</i>				

PAID Check #
Date

Remarks:	Tax Reference Code	Sub Total	<i>6200.00</i>
	<i>Kan 4.9 %</i>	Tax	<i>8303.80</i>
	Disc.	Total	<i>6503.80</i>

Truck No.	Code	State Mileage	Nebraska	Colorado	Other	Total Mileage
<i>1204</i>	Pump Truck			<i>90</i>	<i>130</i>	
<i>1211</i>	Bulk Truck			<i>90</i>	<i>130</i>	

We do not assume any responsibility for any damage or conditions resulting from our services. All pricing is subject to review and revision.

Delivered By *Leon-Kenny-Shane*

Received By *[Signature]*
Customer or His Agent



CEMENTER'S WELL SERVICE, INC.
 P.O. BOX 336220 • GREELEY, CO 80633 • (970) 353-7299 • FAX (970) 353-7712

RECEIVED 15-199-20289 00-00
 KANSAS CORPORATION COMMISSION
 OUR INVOICE No. 182131

JUL 31 2002

CONSERVATION DIVISION
 WICHITA, KS

Deep Rock

Date	1-23-02	Well Owner	Exploration Inc	Well No.	# 1	Lease	Lacson
County	Wallace	State	Kansas	Field			
Charge to	Deep Rock Exploration Inc.					Charge Code	
Address	111 West 12 th Street					For Office Use Only	
City, State	Goodland Kansas						
Pump Truck No.	1204	Code		Bulk Truck No.	1211	Code	
Type of Job			Depth	Ft.	395'	To	
Surface	8 5/8"	Bottom of Surface		Ft.	380'	To	
Plug			Plug Landed @	365' Ft.	Time On 22:30 PM		
Production			Pipe Landed @	380' Ft.	Time Off plug Down @ 00:30 AM		

Reference No.	Description	Qty.	Meas.	Unit Price	Amount
	Pump Truck Charge				
	Cement Neat ✓	275	SKS		\$4860.00
	Poz. Mix				
	Calcium Chloride ✓	3%			
	Gel % Flo-Cele 1/4 #Per Sack				
	Handling Charge				
	Hauling Charge				
	Additional Cement				
<p>Mixing Rate 4 BPM - Displacement Rat 6 BPM Slurry Vol. 1.18 CU. FT/SK - Slurry WT 15.2 PPG 6SK Cement Slurry per BRL</p>					

Remarks: Pcc flush w/ 18 BBLs H ² O	Tax Reference Code	Sub Total	\$4860.00
Displace w/ 23 BBLs H ² O	State Tax 4.9 %	Tax	238.14
Circulate 3 BBLs cement	Disc.	Total	\$5098.14

Truck No.	Code	State Mileage	Nebraska	Colorado	Other	Total Mileage
1204	Pump Truck			130		130
1211	Bulk Truck			90		90

We do not assume any responsibility for any damage or conditions resulting from our services. All pricing is subject to review and revision.

Delivered By Leon - Kenny - Shae Received By [Signature]
 Custom of this Agent