SIDE ONE AFFIDAVIT OF COMPLETION FORM (REV) ACO-1 This form shall be filed in duplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ten days after the completion of the well, regardless of how the well was completed.

Attach separate letter of request if the information is to be held confidential. If confidential, only file one copy. Information on side one will be of public record and side two will then be held confidential. Circle one: Oil, Gas, Dry, SWD, OWWO, Injection. Type and complete ALL sections. Applications must be filed for dual completion, commingling, SWD and injection, T.A. Attach wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.). (Rules 82-2-105 & 82-2-125) KCC # (316) 263-3238. API NO. 15-185-21,503-60-00 Dakota Resources, Inc. ADDRESS 2900 Security Life Bldg. COUNTY Stafford Denver, Colorado 20202 FIELD **CONTACT PERSON Don M. Erickson PROD. FORMATION PHONE 303-825-2900 LEASE SPENCER PURCHASER WELL NO. 1 ADDRESS WELL LOCATION ~ C SW SE NE __ Ft. from _____ Line and Allen Drilling Company DRILLING CONTRACTOR _____ Fr. from _____ Line of ADDRESS P.O. Box 1389 the SEC. 26 TWP. 22 RGE. 14 W Great Bend, KS 67530 WELL PLAT PLUGGING Allen Drilling Company CONTRACTOR KCC KGS ADDRESS P.O. Box 1389 (Office Great Bend, KS 67530 Use) TOTAL DEPTH 3870' PBTD 26 SPUD DATE 4/12/82" DATE COMPLETED 4/19/82 ELEV: GR 1924' DF 1926' KB 1929' DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS Amount of surface pipe set and cemented ____ @ 343' ____ DV Tool Used? AFFIDAVIT STATE OF Colorado , COUNTY OF Denver SS, I, Don M. Erickson OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH, - DEPOSES THAT HE IS Manager of Operations (FOR)(OF) DAKOTA RESOURCES, INC. LEASE, AND IS DULY AUTHORIZED TO MAKE OPERATOR OF THE SPENCER THIS AFFIDAVIT FOR AND ON THE BEHALF OF SAID OPERATOR; THAT WELL NO ____ ON SAID LEASE MAS AREN COMPLETED AS OF THE 19 DAY OF April , 1982 , AND THAT ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT. .. ----

**The person who can be reached by phone regarding any questions concerning this information. Within 45 days of completion, a witnessed initial test by the Commission is required if the well produces more than 25 BOPD or is located in a Basic Order Pool.

MY COMMISSION EXPIRES:

TWO WELL LOG

Show oll important zones of porosity and contents thereot; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

FORMATION DESCRIPTION; CONTENTS, ETC. TOP BOTTOM

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Report of all string:	set — surface,		production, et	c. CASING		RD (New	or (Used	- -	e and percent	
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Purpose of string Surface	LINER RECOR	Size casing set (in O.D.) 8-5/811 RD Sucks ce Packer s CID, FRACTI	Weight lbs/ft. 18.26 ment ure, SHOT, (Setting depth 343 1 Shote	per ft. UEEZE	PERFOR	Socks 2 250 RATION RECOR	D De th intervo	pth interval	
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