WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: L. D. Drilling, Inc.
Address: 7 SW 28 Ave.
City/State/Zip: Great Bend, KS 67530
Operator Contact Person: L. D. Davis
Phone: (620) 793-3051
Contractor: Southwind Drilling, Inc.
License: 33350
Wellsite Geologist: Kim Shoemaker

Designate Type of Completion:

- New Well
- Re-Entry
- Workover
- Oil
- SWD
- SIOW
- 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: ______

Deepering ______
Re-perf. ______
Conv. to Enhr./SWD ______
Plug Back ______
Plug Back Total Depth ______
Commingle ______
Docket No. ______
Dual Completion ______
Docket No. ______
Other (SWD or Enhr.?) ______
Docket No. ______

8/10/04 Spud Date or Recompletion Date
8/15/04 Date Reached TD
8/20/04 Completion Date or Recompletion Date

API No. 15 - 009-24798-00-00
County: Barton

SE NW NE Sec. 12 Twp. 18 S. R. 14
650 feet from S /NE (circle one) Line of Section
910 feet from E W (circle one) Line of Section
Footages Calculated From Nearest Outside Section Corner:

(circle one) NE SW NW SE

Lease Name: Glass
Well #: 2
Field Name: Boyd Crossing
Producing Formation: Arbuckle
Elevation: Ground: 1853' Kelly Bushing: 1863'
Total Depth: 3340 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at 795 Feet
If yes, show depth set ______
If Alternate II completion, cement circulated from ______
height depth to ______
w ______

sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content ______
ppm Fluid volume ______
bbls
Dewatering method used ______
Location of fluid disposal if hauled offsite:
Operator Name: ______
License No. ______
Lease Name: ______
Quarter Sec. Twp. S. R. East West
County: ______

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.

Signature: ______
Title: Secretary/Treasurer Date: 9/23/04
Subscribed and sworn to before me this 23 day of September 2004.

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes No Date: ______

Wireline Log Received

Geologist Report Received

UIC Distribution

Notary Public: ______
Date Commission Expires: 2-2-07

Rashell Patten

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes No Date: ______

Wireline Log Received

Geologist Report Received

UIC Distribution

Notary Public: ______
Date Commission Expires: 2-2-07

Rashell Patten