

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

Form ACO-
September 199
Form Must Be Typed

Operator: License # 32281
Name: GMX RESOURCES INC.
Address: 9400 N. Broadway, Suite 600
City/State/Zip: Oklahoma City, OK 73114
Purchaser: _____
Operator Contact Person: Jon Stromberg
Phone: (405) 600-0711 ext. 12
Contractor: Name: Cheyenne Well Service
License: 06454
Wellsite Geologist: _____

Designate Type of Completion:

____ New Well ____ Re-Entry X Workover
____ Oil X SWD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: Petroleum Production Management Inc.

Well Name: Etheredge No. 1

Original Comp. Date: 1983 Original Total Depth: 5104'

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

XXX Plug Back 4950' Plug Back Total Depth

____ Commingled Docket No. _____

____ Dual Completion Docket No. _____

X Other (SWD or Enhr.?) Docket No. E-24,176

7-13-00

7-18-00

7-13-00 Date of START Date Reached TD Completion Date of

OF WORKOVER

WORKOVER

API No. 15 - 097-20,931

County: Kiowa

____ NW ____ SE Sec. 26 Twp. 30 S. R. 18 ☐ East ☒ West

____ 1980 feet from S N (circle one) Line of Section

____ 2310 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: Yost (FORMERLY ETHEREDGE #1) Well #: 3

Field Name: Alford

Producing Formation: Marmaton

Elevation: Ground: 2177' Kelly Bushing: _____

Total Depth: 5104 Plug Back Total Depth: 5033'

Amount of Surface Pipe Set and Cemented at 521' Feet

Multiple Stage 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 Plan Updated on 8-30-02
(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: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

County: _____ Docket No.: _____

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.

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: Jon Stromberg Jon Stromberg

Title: P. E. Date: 7/25/00

Subscribed and sworn to before me this 25th day of July **RECEIVED**

19 2000

Notary Public: Mary Ellen Gleason **JUL 27 2000**

Date Commission Expires: December 15, 2000

KCC Office Use ONLY

100 Letter of Confidentiality Attached

If Denied, Yes ☐ Date: _____

100 Wireline Log Received

100 Geologist Report Received

____ UIC Distribution

CONSERVATION DIVISION
Wichita, Kansas

Operator Name: GMX RESOURCES INC. Lease Name: Yost Well #: 3
 Sec. 26 Twp. 30 S. R. 18 ☐ East ☒ West County: Kiowa

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 geological well site report.

Drill Stem Tests Taken ☐ Yes ☒ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☐ Yes ☒ No
 (Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum

CASING RECORD ☐ New ☐ 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	# Sacs Used	Type and Percent Additives
Surface		8 5/8"		521'		400	
Production		5 1/2"		5149'		250	

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
____ Perforate				
____ Protect Casing				
____ Plug Back TD				
____ 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	4881-4887' BP @ 4950'	1000 gal 15% HCL (Jan. 2000)	4887'
		1000 gal 15% HCL (July 2000)	
	5033-5042' (original perfs) CIBP @ 4950'		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8"	4843'	4843'	
Date of First, Resumed Production, SWD or Enhr. na	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours na	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas

METHOD OF COMPLETION

INJECTION Production Interval

4881' - 4887'

☐ Vented ☐ Solid ☐ Used on Lease
 (If vented, Sumit ACO-18.)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify)