

STATE OF KANSAS
STATE CORPORATION COMMISSION
10 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-065-22863-00-00

LEASE NAME McKisson

RECEIVED

TYPE OR PRINT

NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

WELL NUMBER 1-2

MAY 19 2003

1600 Ft. from S Section Line

KCC WICHITA

2520 Ft. from E Section Line

LEASE OPERATOR Great Eastern Energy & Development Corp.

SEC. 4 TWP. 7 RGE. 21 (E) or (W)

ADDRESS 500 W. Texas Suite 955 Midland, TX. 79702

COUNTY Graham

PHONE#(915) 682-1178 OPERATORS LICENSE NO. 9449

Date Well Completed _____

Character of Well Oil

Plugging Commenced 4-11-03

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Plugging Completed 4-28-03

The plugging proposal was approved on _____ (date)

by Patrick Staab (KCC District Agent's Name).

Is ACO-1 filed? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3762

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
				8-5/8"	238'	None
				5-1/2"	3760'	1765'

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from _____ feet to _____ feet each side.
Plugged off bottom with sand to 3350' and 5 sacks cement. Shot pipe @1800' and 1765'.
Pumped 130 sacks w/300# hulls @1765', pulled up to 1000', pumped 40 sacks cement with 200# hulls, pulled up to 150', pumped 30 sacks cement, pulled rest of pipe and topped off with 10 sacks cement, 60/40 pos, 10% gel. Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Great Eastern Energy & Development Corp.

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso (Employee of Operator) or (Operator)

above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters herein contained and the log of the above-described well as filed to the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 15th day of May, 2003

[Signature]
Notary Public

My Commission Expires:

