

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5056
Name: F.G. Holl Company, L.L.C.
Address: 9431 East Central, Suite #100
City/State/Zip: Wichita, Kansas 67206-2543
Purchaser: _____
Operator Contact Person: Franklin R. Greenbaum
Phone: (316) 684-8481
Contractor: Name: Sterling Drilling Company, Rig #4
License: 5142
Wellsite Geologist: Bill Ree

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: F.G. Holl Company, L.L.C.

Well Name: SHRIVER J.M. 1-4
Original Comp. Date: 03/17/2003 Original Total Depth: 4760'
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

RU: 10/27/2005 02/05/2003 RD: 11/10/2005
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 007-22,728-000002
County: Barber. 120' East of
C - S2 - N2 - SE Sec. 4 Twp. 30 S. R. 14 East West
1650 feet from S / N (circle one) Line of Section
1200 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: SHRIVER J.M. "OWWO" Well #: 1-4
Field Name: Eads

Producing Formation: Simpson Sand
Elevation: Ground: 1971' Kelly Bushing: 1980'
Total Depth: 4760' Plug Back Total Depth: None
Amount of Surface Pipe Set and Cemented at 221.02 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.

ALT I WITHM 4-27-06
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 38,000 ppm Fluid volume 1,800 bbls
Dewatering method used Hauled fluids to SWD

Location of fluid disposal if hauled offsite:
Operator Name: F.G. Holl Company, L.L.C.
Lease Name: KENNEDY-30 SWD License No.: 5056
Quarter SW Sec. 30 Twp. 29 S. R. 12 East West
County: Pratt Docket No.: D-22,132

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: Franklin R. Greenbaum
Title: Exploration Manager Date: 04/10/2006

Subscribed and sworn to before me this 10th day of April, 2006

19 Betty H. Spotswood
Notary Public: Betty H. Spotswood

Date Commission Expires: 04/30/2006

Notary Public - State of Kansas
BETTY H. SPOTSWOOD
My Appointment Expires 4/30/2006

KCC Office Use ONLY
NO Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
APR 11 2006

KCC WICHITA

Operator Name: F.G. Holl Company, L.L.C. Lease Name: SHRIVER J.M. Well #: 1-4
 Sec. 4 Twp. 30 S. R. 14 East West County: Barber. 120' East of

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: DIL/MEL/BHCS CNL/CDL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See original
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CASING RECORD <input checked="" type="checkbox"/> New <input checked="" 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
Sorfaetor	17-1/4"	13-3/8"	48#	221.02'KB	60/40 Poz	250sx	3%cc, 1/4# celf
Production		4-1/2"	10.5#	4759'KB	50/50.Poz	150 sx	2%cc,5#/sx cals
Production					50/50 Poz	150sx	

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 checked="" type="checkbox"/> Plug Off Zone	4522'-36	Common	100sx	
	4552-56.5			

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 SPF	4552'-4556'	Treat w/ 250 gal 15% MIRA acid	
4 SPF	4556.5'-4558.5'		
	Packer set at 4430' to shut off LKC "H" & "M" zones		

TUBING RECORD	Size 2-3/8"	Set At 4430'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 01/04/2006	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. 5.01	Gas Mcf	Water Bbls. 6.68	Gas-Oil Ratio	Gravity
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Disposition of Gas: Vented Sold Used on Lease *(If vented, Sumit ACO-18.)*

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: 4552' - 4558.5' Simpson Ss.
 Producing through packer