

ORIGINAL
KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
 September 1999
 Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33517
 Name: Kansas Production EQR, LLC
 Address: 15425 North Freeway, Suite 230
 City/State/Zip: Houston, Texas 77090
 Purchaser: Southern Star
 Operator Contact Person: Jeff Stevenson
 Phone: (281) 875-6200
 Contractor: Name: Bart Lorenz
 License: 33286

Wellsite Geologist: None

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW 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: _____
 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. _____

<u>9/22/2005</u>	<u>9/23/2005</u>	<u>N/A</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-30846 - 00-00
 County: Montgomery
SE NW SE SW Sec. 33 Twp. 33 S. R. 16 East West
1505 feet from (S) / N (circle one) Line of Section
1650 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: Gaut Well #: 3-33
 Field Name: Jefferson-Sycamore
 Producing Formation: Riverton
 Elevation: Ground: 816 Kelly Bushing: 0
 Total Depth: 1237 Plug Back Total Depth: 1232
 Amount of Surface Pipe Set and Cemented at 22 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 1232
 feet depth to Surface w/ 120 sx crnt.

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: _____ License No.: _____
 Lease Name: _____
JUL 20 2006
 County: _____ Docket No.: _____
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CONSERVATION DIVISION
WICHITA, KS

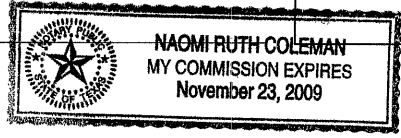
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Jeff Stevenson
 Title: Operations Manager Date: 7-19-06
 Subscribed and sworn to before me this 19 day of July,
2006.
 Notary Public: Naomi Ruth Coleman
 Date Commission Expires: 11/23/09

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



ORIGINAL

Side Two

Operator Name: Kansas Production EQR, LLC Lease Name: Gaut Well #: 3-33
 Sec. 33 Twp. 33 S. R. 16 East West County: Montgomery

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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i></p> <p>List All E. Logs Run:</p> <p>GR-CDL-CNL-DIL</p>	<p><input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample</p> <p>Name Top Datum</p>
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CASING RECORD <input type="checkbox"/> New <input 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
Surface	11"	8 5/8"	20#	22	Portland		Neat
Production	6 3/4"	4 1/2"	10.5#	1232	CI "A"		1/4# flocele; 2% gel
							10# gilsonite

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 type="checkbox"/> 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

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

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

ORIGINAL

TICKET NUMBER **4799**

LOCATION BY
 FOREMAN Jeff Graham

**TREATMENT REPORT & FIELD TICKET
 CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-23-05	2620	Gaut # 3-33	33			MG
CUSTOMER ENERGY QUEST						
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY			419	Michael		
STATE			117	Mark		
ZIP CODE			454/791	Richard		
			407	Donnie		

JOB TYPE L5 HOLE SIZE 6 3/4 HOLE DEPTH u.k. CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 1209 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.9 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING - 0 -
 DISPLACEMENT 18.8 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Ran gel/hulls ahead + est. circ - pumped 140sx cement -
shut down - washed out lines + pump - dropped plug -
displaced to bottom + set - shut in -

- CIRC. CMT. to surface -

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCTS	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE LONGSTRING		765.00	
5406	45 m	MILEAGE		135.00	
5407	min	BULK TRK		260.00	
5501c	4 Hr	TRANSPORT		372.00	
5502c	4 Hr	80 VAC		348.00	
1104	140 sx	Cement	*	1365.00	
1110	28 sx	GILSONITE	*	611.80	
1111	300 #	SALT	*	84.00	
1118B	9 sx	GEL - 50 #	*	59.67	
1107	3 sx	FLO seal	*	128.25	
1105	3 sx	HULLS	*	43.50	
1123	5400 gm	City 420	*	65.88	
4404	1 ea	4 1/2 Rubber plug	*	38.00	
5402	1209	FOOTAGE		193.44	
				* SALES TAX	126.99
				ESTIMATED TOTAL	4596.53

AUTHORIZATION _____ TITLE _____ DATE _____