

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

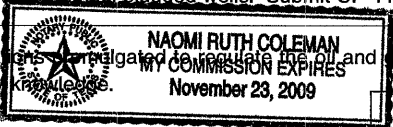
Operator: License # 33517  
 Name: Kansas Production EQR, LLC  
 Address: 15425 North Freeway, Suite 230  
 City/State/Zip: Houston, Texas 77090  
 Purchaser: Southern Star  
 Operator Contact Person: Jeff Stevenson  
 Phone: ( 281 ) 875-6200  
 Contractor: Name: Bart Lorenz  
 License: 33286  
 Wellsite 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. \_\_\_\_\_  
 9/24/2005    9/27/2005    11/17/2005  
 Spud Date or    Date Reached TD    Completion Date or  
 Recompletion Date       Recompletion Date

API No. 15 - 125-30845-00-00  
 County: Montgomery  
 E/2 NE NE Sec. 33 Twp. 33 S. R. 16  East  West  
660 feet from S / (N) (circle one) Line of Section  
330 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 #: 2-33  
 Field Name: Jefferson-Sycamore  
 Producing Formation: Riverton  
 Elevation: Ground: 808 Kelly Bushing: 0  
 Total Depth: 1212 Plug Back Total Depth: 1205  
 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 1205  
 feet depth to Surface w/ 120 sx cm.  
Alt II WAM 7-20-06

**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: \_\_\_\_\_  
 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: Jeff Stevenson  
 Title: Operations Manager Date: 6-20-06  
 Subscribed and sworn to before me this 20th day of June,  
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

Operator Name: Kansas Production EQR, LLC Lease Name: Gaut Well #: 2-33  
 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.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	AW	1080	-272
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	AW	1090.5	-282.5
List All E. Logs Run:		Riverton	1138	-330

**GR-CDL-CNL-DIL  
Cement Bond**

**RECEIVED  
KANSAS CORPORATION COMMISSION  
JUN 21 2006  
CONSERVATION DIVISION  
WICHITA, KS**

CASING RECORD <input checked="" 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	5	Neat
Production	6 3/4"	4 1/2"	10.5#	1205	CI "A"	120	1/4# flocele; 2% gel
							10# gilsonite

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	Riverton (1138-1141)	32046 gal 10# gel + 6.0K #20/40	
4	AW (1090.5-1092 & 1080-1082)	+ 2.5 K # 12/20	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8"	1150			
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	
	0.0	9.0	70.0			

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled  
*(If vented, Submit ACO-18.)*  Other (Specify) \_\_\_\_\_