

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 9449
 Name: Great Eastern Energy & Development Corporation
 Address: 550 W. Wall ste 660
 City/State/Zip: Midland, Texas 79702
 Purchaser: STG
 Operator Contact Person: Bill Robinson
 Phone: (432) 682-1178
 Contractor: Name: Murfin Drilling
 License: 30606
 Wellsite Geologist: Bill Robinson
 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: Great Eastern Energy & Development Corp.
 Well Name: L. Johnson #1
 Original Comp. Date: 7-8-03 Original Total Depth: 3745
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back 3705 Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
 4-1-04 4-4-04 4-13-04
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 065-22919-00-01
 County: graham
 sw ne nw Sec. 26 Twp. 6 S. R. 21 East West
1090 feet from S / N (circle one) Line of Section
1740 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: L. Johnson Well #: 1
 Field Name: _____
 Producing Formation: Lansing
 Elevation: Ground: 2239 Kelly Bushing: 2244
 Total Depth: 3705 Plug Back Total Depth: 3705
 Amount of Surface Pipe Set and Cemented at 219 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set 1861 Feet
 If Alternate II completion, cement circulated from _____ 1861
 feet depth to surface w/ 340 sx cmt.

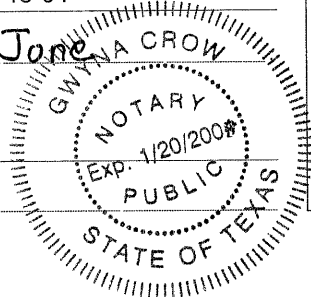
Drilling Fluid Management Plan ALTA W/HW
 (Data must be collected from the Reserve Pit) 2-22-07
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

RECEIVED
JUN 18 2004
KCC WICHITA

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: Bill Robinson
 Title: geologist Date: 6-15-04
 Subscribed and sworn to before me this 15 day of June
04
 Notary Public: Gwynna B. Crow
 Date Commission Expires: 1-20-08



KCC Office Use ONLY

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

Operator Name: Great Eastern Energy & Development Corporation Lease Name: L. Johnson Well #: 1
 Sec. 26 Twp. 6 S. R. 21 East West County: graham

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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: logs previously submitted 7-03, radiation guard	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>anhydrite</td> <td>1860</td> <td>387</td> </tr> <tr> <td>topeka</td> <td>3242</td> <td>-995</td> </tr> <tr> <td>granite</td> <td>3722</td> <td>-1475</td> </tr> </table>	Name	Top	Datum	anhydrite	1860	387	topeka	3242	-995	granite	3722	-1475
Name	Top	Datum											
anhydrite	1860	387											
topeka	3242	-995											
granite	3722	-1475											

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 7/8	8 5/8	20	219	common	160	6% cacl + 2% gel
production	7 7/8	5 1/2	14	3705	asc	125	2% gel+ 10% salt

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	1861	common	340	60/40 + 6 % gel

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
2 spf	3514-18	a/500 gals. 15% NE	3500

TUBING RECORD	Size <u>2 7/8</u> Set At <u>3627</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. <u>5-1-04</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" 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
	<u>39</u>	<u>-</u>	<u>250</u>	<u>37</u>

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

STATE CORPORATION COMMISSION OF KANSAS, CONSERVATION DIVISION

PRODUCTIVITY TEST

BARREL TEST

1090' FWL + 1740' FWL

OPERATOR GREAT Eastern Energy +DEV. # 9449 LOCATION OF WELL SW-NE-NW/4
LEASE L. Johnson OF SEC. 26 T 6 R 21W
WELL NO. 1 COUNTY GRAHAM
FIELD _____ PRODUCING FORMATION LKC

Date Taken 5-17-04 Date Effective 5-17-2004
Well Depth 3705' Top Prod. Form. 3514 Perfs 3514'-18'
Casing: Size 5 1/2 Wt. 14# Depth 3705' Acid _____
Tubing: Size 2 7/8 Depth of Perfs _____ Gravity 37°
Pump: Type Insect Bore 2 1/2" x 2" x 12' Purchaser STG
Well Status Ramping

Pumping, flowing, etc.

TEST DATA

Permanent _____ Field _____ Special _____
Flowing _____ Swabbing _____ Pumping ✓

STATUS BEFORE TEST:

PRODUCED 24 HOURS
SHUT IN 0 HOURS

DURATION OF TEST _____ HOURS _____ MINUTES _____ SECONDS

GAUGES: WATER _____ INCHES _____ PERCENTAGE

OIL _____ INCHES _____ PERCENTAGE

GROSS FLUID PRODUCTION RATE (BARRELS PER DAY) 200.0

WATER PRODUCTION RATE (BARREL PER DAY) 249.10

OIL PRODUCTION RATE (BARRELS PER DAY) 39.00

PRODUCTIVITY

STROKES PER MINUTE 13

LENTH OF STROKE 54 INCHES

REGULAR PRODUCING SCHEDULE 24-7 HOURS PER DAY.

COMMENTS _____

WITNESSES:

Richard Williams

Joel Lawrence

FOR STATE

FOR OPERATOR

RECEIVED FOR OFFSET
MAY 26 2004
BY: _____

ALLIED CEMENTING CO., INC. 16948

Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: R

DATE <u>4/2/04</u>	SEC.	TWP.	RANGE	CALLED OUT <u>6:00 A.M.</u>	ON LOCATION <u>8:45 A.M.</u>	JOB START	JOB FINISH <u>11:00 A.M.</u>
LEASEL. <u>Johnson</u>	WELL# <u>1</u>	LOCATION <u>Boone # 24 9 N</u>			COUNTY <u>Graham</u>	STATE <u>Ks</u>	
<input checked="" type="checkbox"/> OLD <input type="checkbox"/> NEW (Circle one)							

CONTRACTOR Poc well service

TYPE OF JOB Long string

HOLE SIZE 2 7/8" T.D.

CASING SIZE 5 1/2" DEPTH 3705'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 1,000 psi. MINIMUM 300 psi.

MEAS. LINE SHOE JOINT 12.30

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 90.3 Bbl.

OWNER

CEMENT AMOUNT ORDERED 125 ASC 2% Gel
10% Salt
500 Gal WFR-2

EQUIPMENT

PUMP TRUCK CEMENTER Paul

345 HELPER Dave

BULK TRUCK

213 DRIVER Craig

BULK TRUCK

DRIVER

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COMMON	@		
POZMIX	@		
GEL	@	<u>2</u>	<u>11.00</u> <u>22.00</u>
CHLORIDE	@		
ASC	@	<u>125</u>	<u>9.50</u> <u>1187.50</u>
SALT	@	<u>12</u>	<u>15.00</u> <u>180.00</u>
WFR-2	@	<u>500 gals</u>	<u>1.00</u> <u>500.00</u>
HANDLING	@	<u>39</u>	<u>1.35</u> <u>173.75</u>
MILEAGE	@	<u>54/sk/mile</u>	<u>4.17</u> <u>225.18</u>
TOTAL			<u>2480.25</u>

REMARKS:
Pumped 500 gal. WFR-2. Followed
by 25 Bbl H₂O. mixed 125x @
15ppg. Displaced w/ 90 Bbl.
Plug Landed. Float Held.

SERVICE

DEPTH OF JOB		
PUMP TRUCK CHARGE		<u>1130.00</u>
EXTRA FOOTAGE	@	
MILEAGE	@	<u>4.00</u> <u>240.00</u>
Plug 5/8 TRP	@	<u>50.00</u>
TOTAL		<u>1420.00</u>

CHARGE TO: Great Eastern

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

MANIFOLD	@	
Guide Shoe	@	<u>150.00</u>
Insert	@	<u>235.00</u>
Centralizer	@	<u>40.00</u> <u>440.00</u>
Basket	@	<u>128.00</u>
Port collar	@	<u>1600.00</u>
TOTAL		<u>2453.00</u>

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Jay Lawhorn

Joel Lawhorn
PRINTED NAME

ALLIED CEMENTING CO., INC. 16847

Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: 2

DATE <u>4-10-04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>9:00AM</u>	JOB START <u>9:45AM</u>	JOB FINISH <u>12:00PM</u>
LEASE <u>L. JOHNSON</u>	WELL # <u>1</u>	LOCATION <u>BOGUE 9N 2E 5N</u>			COUNTY <u>GRAHAM</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD OR <input type="radio"/> NEW (Circle one)							

CONTRACTOR POE

TYPE OF JOB PORT COLLAR

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL X-PERT DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

EQUIPMENT

PUMP TRUCK CEMENTER MARK

346 HELPER SHANE

BULK TRUCK

378 DRIVER CARY

BULK TRUCK

_____ DRIVER _____

REMARKS:

PLUG C. 3103 TEST CSG TO 1000'
SPOT 2 SAND C. 2180 P. COLLAR C. 1861
OPEN MW 340 SK CTRL. CEMENT SHUT
PRES TO 1000' - RUN 5 JTS WASH CLEAN
RUN DOWN TO PLUG WASH SAND

CHARGE TO: GREAT EASTERN

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Joel Lawhorn

OWNER _____

CEMENT

AMOUNT ORDERED 350 60/10 6% GEL

1/4 LB FLO SEAL 2 SAND

USED 340 SK

COMMON	<u>204</u>	@	<u>765</u>	<u>15660</u>
POZMIX	<u>136</u>	@	<u>400</u>	<u>54400</u>
GEL	<u>18</u>	@	<u>1100</u>	<u>19800</u>
CHLORIDE		@		
ASC		@		
SAND	<u>2</u>	@	<u>750</u>	<u>1500</u>
FLOSEAL	<u>87#</u>	@	<u>140</u>	<u>12180</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>370</u>	@	<u>125</u>	<u>46250</u>
MILEAGE	<u>5 1/2 SK</u>	@	<u>110</u>	<u>11000</u>
			TOTAL	<u>401190</u>

SERVICE

DEPTH OF JOB				
PUMP TRUCK CHARGE				<u>65000</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>60</u>	@	<u>400</u>	<u>24000</u>
		@		
		@		
		@		
		@		
			TOTAL	<u>89000</u>

PLUG & FLOAT EQUIPMENT

MANIFOLD		@		
		@		
		@		
		@		
		@		
		@		
			TOTAL	

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME Joel Lawhorn

ALLIED CEMENTING CO., INC. 11186

Federal Tax ID# 66-0727060

REMIT TO: RUSSELL KANSAS CITY

SERVICE POINT: OKMAY

DATE: 7-1-03 TIME: 2:00 PM LOCATION: 5301M JOB START: 11:45 AM JOB FINISH: 5:45 PM
 WELL: L Johnson REGISTRATION: L Johnson COUNTY: Wichita STATE: KS

OLD OR NEW (circle one): NEW

CONTRACTOR: Major Drill Co. S OWNER: JAME

TYPE OF JOB: Sub Well CEMENT: _____

HOLE SIZE: 10 7/8 DEPTH: 227 CEMENT ORDERED: 1105500030000000

CASING SIZE: 7 7/8 DEPTH: _____ CEMENT ORDERED: _____

TUBING SIZE: _____ DEPTH: _____ CEMENT ORDERED: _____

DRILL PIPE: _____ DEPTH: _____ CEMENT ORDERED: _____

TOOL: _____ DEPTH: _____ CEMENT ORDERED: _____

PREP. MAX: _____ MINIMUM: _____ CEMENT ORDERED: _____

MEAS. LINE: _____ SHOE JOINT: _____ CEMENT ORDERED: _____

CEMENT LBS PER CSG: 15 GEL: 3.5% @ 10.8 38.8

PERFS: _____ CHLORIDE: 5.0% @ 30.0 150.0

DISPLACEMENT: 136 gal @ _____

EQUIPMENT: _____ @ _____

PUMP TRUCK CEMENTER: GERRY @ _____

300 HELPER: WALTON @ _____

BULK TRUCK # 315 DRIVER: FUGER @ _____

BULK TRUCK # _____ DRIVER: _____ @ _____

_____ @ _____

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REMARKS: Cement All SCS

DEPTH OF JOB: 227

PUMP TRUCK CHARGE: 510.0

EXTRA FOOTAGE: _____

MILEAGE: 60 mi @ 7.50 450.0

FLUE: _____ @ _____

_____ @ _____

_____ @ _____

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RECEIVED
JUN 18 2004
KCC WICHITA

CHARGE TO: Great Energy Services & Prod Corp

STREET: _____

CITY: _____ STATE: _____ ZIP: _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish a mixer and helper to assist owner or contractor in its work as is listed. The above work was done in satisfaction and supervision of owner agent or contractor. I have read to understand the TERMS AND CONDITIONS listed on the reverse side.

SIGNATURE: Louis McRanna

PRINTED NAME: Louis McRanna
