

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: _____
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. _____
4-22-04 4-30-04 5-18-04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-22967 6000
County: graham
N2 sw ne se Sec. 14 Twp. 7 S. R. 21 East West
1800 feet from S / N (circle one) Line of Section
950 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: pozas Well #: 3
Field Name: _____

Producing Formation: Lansing
Elevation: Ground: 2089 Kelly Bushing: 2094
Total Depth: 3650 Plug Back Total Depth: 3650
Amount of Surface Pipe Set and Cemented at 233 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1743 Feet
If Alternate II completion, cement circulated from 1743
feet depth to surface w/ 250 sx cmt.

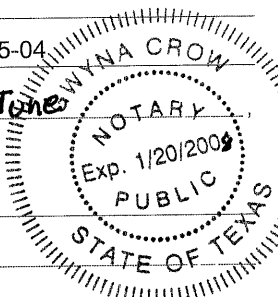
Drilling Fluid Management Plan ALT IWH
(Data must be collected from the Reserve Pit) 2-22-07
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ 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 15th day of June
20 04
Notary Public: Gayna B. Crow
Date Commission Expires: 1-20-09



KCC Office Use ONLY

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

ORIGINAL

Operator Name: Great Eastern Energy & Development Corporation Lease Name: POZAS Well #: 3
 Sec. 14 Twp. 7 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 checked="" type="checkbox"/> Yes <input 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: <p style="text-align: center;">radiation guard</p>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum anhydrite 1698 396 arbuckle 3622 -1528 <p style="text-align: center; opacity: 0.5;">KCC CONFIDENTIAL</p>
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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	12 1/4	8 5/8	19	233	common	160	6% cacl + 2% gel
production	7 7/8	5 1/2	14	3650	asc	175	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 checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	1723	common	250	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	3311-86	a/1500 gals. 15% NE	3300

TUBING RECORD	Size Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 7/8 3413		

Date of First, Resumerd Production, SWD or Enhr. 5-25-04	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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	50	-	-		37

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

KCC
10/11/04
10/11/04

PRODUCTIVITY TEST
BARREL TEST

OPERATOR Great Eastern Energy + Dev. # 9449 LOCATION OF WELL Ap. N/2 - SW - NE - SE/4
LEASE POZAS OF SEC. 14 T 7 R 21W
WELL NO. 43 COUNTY GRAHAM
FIELD _____ PRODUCING FORMATION Toronto - LKC

Date Taken 5-28-04 Date Effective _____
Well Depth 3650' Top Prod. Form. Toronto 3311' Perfs 3311 - 3386
Casing: Size 5 1/2 Wt. 14" Depth 3650' Acid 500 gal
Tubing: Size 2 7/8" Depth of Perfs 3386' Gravity 36'
Pump: Type BHC Bore 2 1/2 x 2 x 1 1/2 x 1 1/2 Purchaser STG
Well Status Pumping
Pumping flowing, etc.

TEST DATA

Permanent _____ Field _____ Special _____
Flowing _____ Swabbing _____ Pumping X

STATUS BEFORE TEST:

PRODUCED 18 HOURS
SHUT IN 6 HOURS

DURATION OF TEST _____ HOURS _____ / MINUTES _____ SECONDS

GAUGES: WATER _____ INCHES _____ PERCENTAGE

OIL _____ INCHES _____ PERCENTAGE 24 hrs. 18 hrs.

GROSS FLUID PRODUCTION RATE (BARRELS PER DAY) 171.25 128.34

WATER PRODUCTION RATE (BARREL PER DAY) 2.56 1.92

OIL PRODUCTION RATE (BARRELS PER DAY) 168.69 126.42 PRODUCTIVITY

STROKES PER MINUTE 14.5 spm

LENTH OF STROKE 54" INCHES

REGULAR PRODUCING SCHEDULE 18 HOURS PER DAY.

COMMENTS Time clock 18 hrs on 6 hrs off.

WITNESSES:

Richard Williams

D. Zahn

FOR STATE

FOR OPERATOR

FOR OFFSET

ALLIED CEMENTING CO., INC.

16869

Federal Tax I.D.# 48-0727860

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

SERVICE POINT: R

DATE <u>4/29/04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>5:30 A.M.</u>	JOB START	JOB FINISH
LEASE <u>Pozas</u>	WELL # <u>3</u>	LOCATION <u>N: Codemus 3N 12W</u>			COUNTY <u>Graham</u>	STATE <u>Ks.</u>	
<input checked="" type="radio"/> OLD OR <input type="radio"/> NEW (Circle one)				<u>N INTO</u>			

CONTRACTOR Murfin #8
 TYPE OF JOB Longstring
 HOLE SIZE 7 7/8" T.D. 3650'
 CASING SIZE 5 1/2" DEPTH 3650'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL Port Collar DEPTH 1,723'
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT 12.15"
 CEMENT LEFT IN CSG.
 PERFS.

DISPLACEMENT 89 1/2 Bbl

EQUIPMENT

PUMP TRUCK CEMENTER Paul
 # 3666 HELPER Shane
 BULK TRUCK
 # 222 DRIVER Craig
 BULK TRUCK
 # DRIVER

REMARKS:

500 Gal Flush, 20 Bbl H₂O.
150 sk. Displaced plug.
Plug Landed. Float Held.

15 sk Rat
10 sk Mouse

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 775 ASC 2% Gel
1090 Salt
500 Gal WFR-2

COMMON	@		
POZMIX	@		
GEL	@	<u>3</u>	<u>11.00</u> <u>33.00</u>
CHLORIDE	@		
ASC	@	<u>175</u>	<u>9.50</u> <u>1662.50</u>
Salt	@	<u>16</u>	<u>15.00</u> <u>240.00</u>
WFR-2	@	<u>500 gals</u>	<u>1.00</u> <u>500.00</u>
HANDLING	@	<u>194</u>	<u>1.25</u> <u>242.50</u>
MILEAGE	@	<u>5 1/2 / MILE</u>	<u>582.00</u>
TOTAL			<u>3260.00</u>

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>1180.00</u>
EXTRA FOOTAGE	@		
MILEAGE	@	<u>60</u>	<u>4.00</u> <u>240.00</u>
TOTAL			<u>1370.00</u>

PLUG & FLOAT EQUIPMENT

5 1/2"

MANIFOLD	@		
Guide shoe	@		<u>150.00</u>
Latch Down	@		<u>350.00</u>
Cent. 12	@	<u>40.00</u>	<u>480.00</u>
Basket 2	@	<u>128.00</u>	<u>256.00</u>
Port collar "W"			<u>1500.00</u>
TOTAL			<u>2736.00</u>

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME Joel Lawhorn

ALLIED CEMENTING CO., INC.

15610

Federal Tax I.D.# 48-0727860

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

SERVICE POINT:

Russell

DATE <u>5-11-04</u>	SEC. <u>14</u>	TWP. <u>7</u>	RANGE <u>21</u>	CALLED OUT	ON LOCATION <u>9:00AM</u>	JOB START <u>9:30AM</u>	JOB FINISH <u>11:00AM</u>
LEASE <u>Pozas</u>	WELL # <u>23</u>	LOCATION <u>Nicodemus Yaw 3N 6W 4N</u>		COUNTY <u>GRAHAM</u>	STATE <u>KANSAS</u>		
OLD OR NEW (Circle one)							

CONTRACTOR <u>POE Well Service</u>	OWNER
TYPE OF JOB <u>OPEN PORT COLLAR (circ. cement)</u>	CEMENT (used <u>260 SK</u>)
HOLE SIZE _____ T.D.	AMOUNT ORDERED <u>350 SK 40 6% gel</u>
CASING SIZE <u>5 1/2</u>	<u>1/4# FO-SEAL</u>
TUBING SIZE <u>2 7/8</u>	<u>PER SK.</u>
DRILL PIPE <u>Boomer</u>	DEPTH X-PORT
TOOL <u>PORT COLLAR</u>	DEPTH <u>1723</u>
PRES. MAX <u>1,000#</u>	MINIMUM <u>500#</u>
MEAS. LINE _____	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT <u>8 BBL</u>	
EQUIPMENT	
PUMP TRUCK CEMENTER <u>G'Kwal</u>	
# <u>366</u> HELPER <u>Paul</u>	
BULK TRUCK	
# <u>362</u> DRIVER <u>CRAY</u>	
BULK TRUCK	
# _____ DRIVER _____	

COMMON	<u>156</u>	@	<u>765</u>	<u>1193 40</u>
POZMIX	<u>104</u>	@	<u>4 00</u>	<u>416 00</u>
GEL	<u>18</u>	@	<u>11 00</u>	<u>198 00</u>
CHLORIDE		@		
<u>Flo Seal</u>	<u>65#</u>	@	<u>140</u>	<u>910</u>
		@		
		@		
		@		
		@		
HANDLING <u>368</u>		@	<u>125</u>	<u>460 00</u>
MILEAGE <u>54/SY/MILE</u>		@		<u>1104 00</u>
TOTAL				<u>3462 40</u>

REMARKS:

Pressured 5 1/2 CSg To 1,000# (Held)
OPENED PORT COLLAR (1723) GOT
Good Circ. Mixed Approx 250 SK Cement
& Cement Circular Around ANNULAS.
Disp. 8 BBL H2O, Closed PORT COLLAR
Recheck To 1,000# (Held) RAN 5 STS.
Tubing & WASHED CSG CLEAN.
Come out OF Hole. THANKS!

SERVICE

DEPTH OF JOB _____	
PUMP TRUCK CHARGE _____	<u>650 00</u>
EXTRA FOOTAGE _____ @ _____	
MILEAGE <u>60</u> @ <u>4 00</u>	<u>240 00</u>
PLUG _____ @ _____	
TOTAL	<u>890 00</u>

CHARGE TO: Great Eastern Oil
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

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 _____ PRINTED NAME _____