

KCC
JAN 11 2005
CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 9449
Name: Great Eastern Energy & Development Corp.
Address: P.O. Drawer 2436
City/State/Zip: Midland, TX. 79702
Purchaser: _____
Operator Contact Person: Bill Robinson
Phone: (432) 682-1178
Contractor: Name: Murfin Drilling
License: 30606
Wellsite Geologist: Bill Robinson

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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. _____

<u>11-16-04</u>	<u>11-19-04</u>	<u>none</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 163-23427 0000
County: Rooks
NE ne nw ne Sec. 15 Twp. 8 S. R. 20 East West
165' feet from S / N (circle one) Line of Section
1580' feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Roy Unit Well #: 1

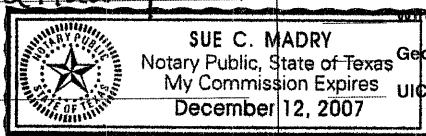
Field Name: na
Producing Formation: na
Elevation: Ground: 1975 Kelly Bushing: 1980
Total Depth: 3580 Plug Back Total Depth: na
Amount of Surface Pipe Set and Cemented at 232 w/165 sks. Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cnt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) *ALT II WITH PIT 3-1-07*
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.: _____

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: [Signature]
Title: geologist Date: 1-11-05
Subscribed and sworn to before me this 11th day of January,
20 05.
Notary Public: Sue C. Madry
Date Commission Expires: 12/12/07



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 Corp. Lease Name: Roy Unit Well #: 1
 Sec. 15 Twp. 8 S. R. 20 East West County: Rooks

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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 anhydrite 1551 429
 B/KC 3445 -1465

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List All E. Logs Run:
 radiation guard

CASING RECORD <input 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
surf.	12 1/4	8 5/8	19	232	common	160	2% gel + 3% CC

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 (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 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 Vented Sold Used on Lease (If vented, Submit ACO-18.)

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

Production Interval _____

ALLIED CEMENTING CO., INC. 18976

Federal Tax I.D.# 48-0727860

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

SERVICE POINT: R

DATE <u>11-19-04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>9:30am</u>	JOB START <u>10:00am</u>	JOB FINISH <u>12:30pm</u>
LEASE <u>ROY UNIT</u>	WELL # <u>1</u>		LOCATION <u>DANOR 3E 31 4 1/2</u>	COUNTY <u>ROOKS</u>	STATE <u>KS</u>		

OLD OR NEW (Circle one)
 CONTRACTOR MURPHY 8
 TYPE OF JOB DTA
 HOLE SIZE 7 7/8 T.D. 3560
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER _____
 CEMENT AMOUNT ORDERED 225 6 1/4 690 CBL
1/2 LB 110-SEAL

EQUIPMENT

PUMP TRUCK CEMENTER MARK
 # 366 HELPER CLEN
 BULK TRUCK # 213 DRIVER CRAIG
 BULK TRUCK # _____ DRIVER _____

COMMON @ KCC
 POZMIX @ _____
 GEL @ JAN 11 2005
 CHLORIDE @ _____
 ASC @ _____
 @ _____
 @ _____
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 HANDLING @ _____
 MILEAGE @ _____
 TOTAL _____

REMARKS:

25 SK @ 3500
25 SK @ 1560
100 SK @ 800
40 SK @ 285
10 SK @ 40
15 SK @ R.H.
10 SK @ M.H.

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE @ _____
 MILEAGE @ _____
 MANIFOLD @ _____
8 1/2 @ W.HOLE
 @ _____

CHARGE TO: CREDIT EASTERN
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

@ _____
 @ _____
 @ _____
 @ _____
 @ _____
 TOTAL _____

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 Larry Pickner

LARRY PICKNER
PRINTED NAME

ALLIED CEMENTING CO., INC. 18961

Federal Tax I.D.# 48-0727860

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

SERVICE POINT:

Russell

DATE <u>11-15-04</u>	SEC. <u>15</u>	TWP. <u>8</u>	RANGE <u>20</u>	CALLED OUT <u>4:00 PM</u>	ON LOCATION <u>5:15 PM</u>	JOB START <u>7:00 PM</u>	JOB FINISH <u>7:30 PM</u>
LEASE <u>ROY UNIT</u>	WELL # <u>1</u>	LOCATION <u>Damar 3E 3N 14W SS</u>		COUNTY <u>Rooks</u>	STATE <u>KANSAS</u>		

CONTRACTOR MAUREN DRIG #8

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4 T.D. 232'

CASING SIZE 8 5/8 DEPTH 232'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 13 3/4 BBL

EQUIPMENT

PUMP TRUCK CEMENTER GLENN

366 HELPER Shane

BULK TRUCK

222 DRIVER DARY

BULK TRUCK DRIVER

REMARKS:

Cement

CIRCULATED

THANK'S

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 Larry Pickner

OWNER _____

CEMENT AMOUNT ORDERED 160 sk Com 23 gal

32 cc

COMMON @ _____

POZMIX @ _____

GEL @ _____

CHLORIDE @ _____

ASC @ _____

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HANDLING @ _____

MILEAGE @ _____

TOTAL _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

MANIFOLD @ _____

856 WOODEN

8" Plug

TOTAL _____

PLUG & FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME LARRY PICKNER