

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
 WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
 September 1999
 Form Must Be Typed

CONFIDENTIAL

ORIGINAL

Operator: License # 3842
LARSON OPERATING COMPANY
 Name: A DIVISION OF LARSON ENGINEERING, INC.
 Address: 562 WEST HIGHWAY 4
 City/State/Zip: OLMITZ, KS 67564-8561
 Purchaser: GARY-WILLIAMS ENERGY CORPORATION
 Operator Contact Person: TOM LARSON
 Phone: (620) 653-7368
 Contractor: Name: PETROMARK DRILLING, LLC
 License: 33323
 Wellsite Geologist: STEVE DAVIS
 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>10/13/2004</u>	<u>10/19/2004</u>	<u>1/3/2005</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

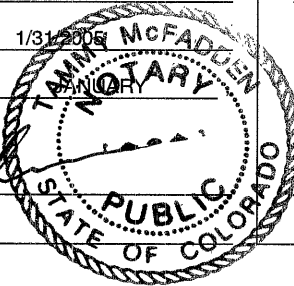
API No. 15 - 159-22433-0000
 County: RICE
SW NW NW Sec. 16 Twp. 18 S. R. 9 East West
900 feet from NORTH Line of Section
330 feet from WEST Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE **(NW)** SW
 Lease Name: SCHROEDER-HARTS 2-16 Well #: 2-16
 Field Name: GULDNER
 Producing Formation: ARBUCKLE
 Elevation: Ground: 1738' Kelly Bushing: 1744'
 Total Depth: 3322' Plug Back Total Depth: 3264'
 Amount of Surface Pipe Set and Cemented at 326 Feet
 Multiple State Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan *ALTI W/WH*
 (Data must be collected from the Reserve Pit) *5-2-07*
 Chloride content _____ ppm Fluid volume RECEIVED
 Dewatering method used _____ **KANSAS CORPORATION COMMISSION**
 Location of fluid disposal if hauled offsite: **FEB 01 2005**
 Operator Name: _____
 Lease Name: _____ License No. **CONSERVATION DIVISION**
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this information shall be filed with the Kansas Corporation Commission, 130 South 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 on 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: Thomas J Ferial
 Title: SR. GEOLOGIST Date: 1/31/2005
 Subscribed and sworn to before me this 31TH day of _____
2005.
 Notary Public: Tommy McFadden
 Date Commission Expires: _____



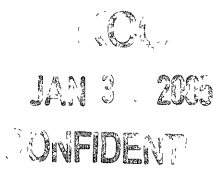
KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

My Commission Expires 9/22/05



Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC. Lease Name: SCHROEDER-HARTS Well #: 2-16
 Sec. 16 Twp. 18 S. R. 9 East West County: RICE

INSTRUCTIONS: Show important tops and base of formation penetrated. Detail all cores. Report all final copes of drill stem 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 geologist well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Sample Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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: DUAL INDUCTION DUAL COMPENSATED POROSITY MICRORESISTIVITY BHC SONIC	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum TOPEKA 2477 -733 HEEBNER 2748 -1004 DOUGLAS 2782 -1038 BROWN LIME 2871 -1127 LANSING 2893 -1149 ARBUCKLE 3232 -1488 TD 3322 <div style="text-align: center;">  </div>
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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	23	326'	CLASS A	175	2% GEL & 3% CC
PRODUCTION	7-7/8"	5-1/2	14	3306'	ASC ALC	100 100	5#/SK GILSONITE, 3/4% CD-31 1/4#/SK FLOCELE

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<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		Acid. Fracture, Shot, Cement, Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
4 JSPF	3240 - 3242		NONE	

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FEB 01 2005
 CONSERVATION DIVISION
 WICHITA, KS

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8"	3262'	NONE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method			
1/3/05		<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 Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
	20	0	0		42

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 3240 - 42
If vented, submit ACO-18.) Other (Specify) _____

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860



RECEIVED OCT 2 2 2004

 * INVOICE *

Invoice Number: 094806

Invoice Date: 10/20/04

Sold Larson Operating Co.
 To: 562 W. HiWay #4
 Olmitz, KS
 67564

JAN 3 2005

CONFIDENTIAL

Cust I.D.....: Larson
 P.O. Number...: Schnaler Harts #2-16
 P.O. Date.....: 10/20/04

Due Date.: 11/19/04
 Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	175.00	SKS	7.8500	1373.75	T
Gel	3.00	SKS	11.0000	33.00	T
Chloride	5.00	SKS	33.0000	165.00	T
Handling	183.00	SKS	1.3500	247.05	E
Mileage (30)	30.00	MILE	9.1500	274.50	E
183 sks @\$.05 per sk per mi					
Surface	1.00	JOB	570.0000	570.00	E
Extra Footage	27.00	PER	0.5000	13.50	E
Mileage pmp trk	30.00	MILE	4.0000	120.00	E
WTP	1.00	EACH	55.0000	55.00	T

All Prices Are Net, Payable 30 Days Following Subtotal: 2851.80
 Date of Invoice. 1 1/2% Charged Thereafter. Tax.....: 102.49
 If Account CURRENT take Discount of \$ 285.18 Payments: 0.00
 ONLY if paid within 30 days from Invoice Date Total...: 2954.29

285.18
2669.11

DRLG COMP W/O LOE

AFE # _____

ACCT # 135/60

APPROVED BY J.C. Larson

RECEIVED
 KANSAS CORPORATION COMMISSION

FEB 0 1 2005

CONSERVATION DIVISION
 WICHITA, KS

ALLIED CEMENTING CO., INC.

PO. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

RECEIVED OCT 28 2004

 * INVOICE *

Invoice Number: 094919

Invoice Date: 10/27/04

Sold Larson Operating Co.
 To: 562 W. HiWay #4
 Olmitz, KS
 67564

JAN 01 2005

CONFIDENTIAL

Cust I.D.: Larson
 P.O. Number...: Schrader Harts #2-16
 P.O. Date.....: 10/27/04

Due Date.: 11/26/04

Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
ALW	100.00	SKS	7.3000	730.00	T
ASC	100.00	SKS	9.8000	980.00	T
AS Flush	500.00	GAL	1.0000	500.00	T
KolSeal	700.00	LBS	0.5000	350.00	T
ACD-31	50.00	LBS	5.5000	275.00	T
D-Foam	16.00	LBS	5.2500	84.00	T
FloSeal	25.00	LBS	1.4000	35.00	T
Handling	239.00	SKS	1.3500	322.65	E
Mileage (30)	30.00	MILE	11.9500	358.50	E
239 sks @\$.05 per sk per mi					
Production	1.00	JOB	1180.0000	1180.00	E
Mileage pmp trk	30.00	MILE	4.0000	120.00	E
Rubber Plug	1.00	EACH	60.0000	60.00	T
Rotating Head	1.00	EACH	75.0000	75.00	T

All Prices Are Net; Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$507.01
 ONLY if paid within 30 days from Invoice Date

Subtotal: 5070.15
 Tax.....: 194.61
 Payments: 0.00
 Total....: 5264.76
507.01
 4757.75

DRLG COMP W/O LOE

AFE # _____

ACCT # 137/60

APPROVED BY T.C. Larson

RECEIVED
 KANSAS CORPORATION COMMISSION

FEB 01 2005

CONSERVATION DIVISION
 WICHITA, KS