

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

ORIGINAL

Operator: License # 5786
Name: McGown Drilling, Inc.
Address: P.O. Box 299
City/State/Zip: Mound City, KS 66056
Purchaser: _____
Operator Contact Person: Doug McGown
Phone: (913) 795-2258
Contractor: Name: McGown Drilling, Inc.
License: 5786
Wellsite Geologist: _____

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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. _____

11-03-03 11-03-03 11-03-03

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 011-22957-00-00

County: Bourbon

SW SW NW Sec. 23 Twp. 24 S. R. 25 East West

2310 feet from S (circle one) Line of Section

330 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Gettler Well #: 1-03

Field Name: _____

Producing Formation: Burgess

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: 428' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 360

feet depth to surface w/ 38 sx cmt.

Drilling Fluid Management Plan ALT #2 GR 6/05/07
(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: [Signature]
Title: President Date: _____

Subscribed and sworn to before me this 5th day of March,
2004.

Notary Public: [Signature]
Date Commission Expires: 8-21-05

NOTARY PUBLIC - State of Kansas
DOREEN THOMAS
My Appt. Exp. 8-21-05

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

✓

X

Operator Name: McGown Drilling, Inc.

Lease Name: Gettler

Well #: 1-03

Sec. 23 Twp. 24 S. R. 25 East West

County: Bourbon

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)

List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample

Name Top Datum
See Attached Sheet

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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
Surface	8 3/4	6 1/2	8	20	Portland	5	none
Long String	6 1/8	2 3/8	4.5	360	Portland	38	none

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		Acid, Fracture, Shot, Cement Squeeze Record		Depth
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
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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 _____

ORIGINAL

GETTLER #1-03

DEPTH	FORMATION
0-2'	Topsoil
2-47'	Clay
47-59'	Shale
59-79'	Lime
79-83'	Shale
83-89'	Lime
89-178'	Shale
178-180'	Lime
180-244'	Shale
244-260'	Shale
260-265'	Shale
265-276'	Sand
276-296'	Shale
296-302'	Sand
302-318'	Sand
318-322'	Sand
322-328'	Shale
328-360'	Shale
360-371'	Sand
371-382'	Sand
382-421'	Shale
421-428'	Shale
428'	Top of Mississippi

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Big Sugar Lumber



"Everything To Build Your Home"

∞ ∞ TWO LOCATIONS ∞ ∞

Do-it center
 1005 CLARK STREET
 FORT SCOTT, KANSAS 66701
 (620) 223-5279
 FAX (620) 223-1505

ORIGINAL
 411 MAIN STREET
 MOUND CITY, KANSAS 66056
 (913) 795-2210
 FAX (913) 795-2194

BIG SUGAR LUMBER-MOUND CITY
 WORKING HARD TO SERVE YOU BETTER!

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCES	TERMS	CLERK	DATE	TIME
325550				DUE 5TH OF MONTH	SC	11/20/03	9:40

SOLD TO

SHIP TO

DOLG MCGOWN

P.O. BOX 334
 MOUND CITY

KS 66056

*GETLER
 #1-03*

SLSPR: 94 STEVE COLEMAN
 TAX : 031 KANSAS STATE TAX

DOCN 102374

 * INVOICE *

QUANTITY		U/M	ITEM NUMBER	DESCRIPTION	SUGG	NUMBER OF UNITS	BIG SUGAR PRICE	EXTENSION
SHIPPED	ORDERED							
25		BG	CPFC	PORTLAND CEMENT	6.99	25	6.29 /BG	157.25
25		EA	CPPM	POST SET FLY ASH 75#	3.09	25	2.78 /EA	69.50
2		EA	CPQP	QUIKrete PALLETS		2	12.50 /EA	25.00

CREDIT DISCLOSURE: ACCOUNTS NOT PAID IN FULL IN 30 DAYS AFTER BILLING DATE ABOVE ARE SUBJECT TO SERVICE CHARGE COMPUTED BEFORE DEDUCTING CURRENT PAYMENTS AND/OR CREDITS APPEARING ON MONTHLY STATEMENT. KANSAS LIEN RIGHT LAWS APPLY ON MATERIAL PURCHASED FOR YOUR HOME. SERVICE CHARGE IS 1.5% PER MONTH (ALL RETURNS MUST BE ACCOMPANIED BY TICKET.) 20% RESTOCKING CHARGE ON NON-STOCK RETURN ITEMS.

** AMOUNT CHARGED TO STORE ACCOUNT ** 267.61
 TAXABLE 251.75
 NON-TAXABLE 0.00
 SUBTOTAL 251.75



TAX AMOUNT 15.26
 TOTAL AMOUNT 267.61

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