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JUL 05 2005

KCC WICHITA

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

CONFIDENTIAL

ORIGINAL

Operator: License # 9449
Name: Great Eastern Energy & Development Corp.
Address: P.O. Drawer 2436
City/State/Zip: Midland, TX. 79702
Purchaser: STG
Operator Contact Person: Bill Robinson
Phone: (432) 682-1178
Contractor: Name: Big Three Drilling
License: 9292
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. _____

5-7-05	5-15-05	6-15-05
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23049 - 06 - 00
County: Graham
sw _nw _ne _nw Sec. 25 Twp. 6 S. R. 21 East West
580 feet from S (N) (circle one) Line of Section
1480 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Mid American Well #: 2

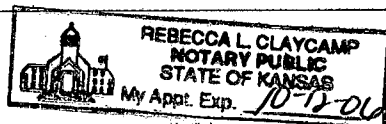
Field Name: _____
Producing Formation: Lansing
Elevation: Ground: 2229 Kelly Bushing: 2238
Total Depth: 3792 Plug Back Total Depth: 3761
Amount of Surface Pipe Set and Cemented at 222 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1825 Feet
If Alternate II completion, cement circulated from 1825
feet depth to 220 w/ 450 sx cmt.

Drilling Fluid Management Plan WMM 6-26-07
(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: Geologist Date: 7-1-05
Subscribed and sworn to before me this 1 day of July,
20 05.
Notary Public: Rebecca R. Claycamp
Date Commission Expires: _____



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

CONFIDENTIAL

Side Two

ORIGINAL

Operator Name: Great Eastern Energy & Development Corp. Lease Name: Mid American Well # _____
Sec. 25 Twp. 6 S. R. 21 [] East [x] 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 [] Yes [x] No (Attach Additional Sheets)
Samples Sent to Geological Survey [] Yes [x] No
Cores Taken [] Yes [x] No
Electric Log Run [x] Yes [] No (Submit Copy)

[] Log Formation (Top), Depth and Datum [x] Sample
Name Top Datum
Anydrite 1855 383
Topeka 3172 -934

List All E. Logs Run:

Radiation Guard, Temperature Survey

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CASING RECORD [x] New [] Used
Report all strings set-conductor, surface, intermediate, production, etc.
Table with columns: 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

ADDITIONAL CEMENTING / SQUEEZE RECORD
Table with columns: Purpose (Perforate, Protect Casing, Plug Back TD, Plug Off Zone), Depth Top Bottom, Type of Cement, #Sacks Used, Type and Percent Additives

PERFORATION RECORD - Bridge Plugs Set/Type
Specify Footage of Each Interval Perforated
Table with columns: Shots Per Foot, Footage, Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used), Depth

TUBING RECORD
Size 2 7/8 Set At 3675 Packer At Liner Run [] Yes [x] No
Date of First, Resumerd Production, SWD or Enhr. 7-1-05
Producing Method [] Flowing [x] Pumping [] Gas Lift [] Other (Explain)
Estimated Production Per 24 Hours: Oil 25 Bbls, Gas 0 Mcf, Water 25 Bbls, Gas-Oil Ratio, Gravity

Disposition of Gas: [] Vented [] Sold [] Used on Lease (If vented, Submit ACO-18.)
METHOD OF COMPLETION: [] Open Hole [x] Perf. [] Dually Comp. [] Commingled [] Other (Specify)
Production Interval:

ALLIED CEMENTING CO., INC.

16168

CONFIDENTIAL

KCC

ORIGINAL

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

SERVICE POINT:

Russell

DATE <i>5/15/01</i>	SEC <i>25</i>	TWP. <i>6</i>	RANGE <i>21</i>	CALLED OUT <i>5:00pm</i>	ON LOCATION <i>7:00am</i>	JOB START	JOB FINISH <i>3:45pm</i>
LEASE <i>MID-AM</i>	WELL # <i>2</i>	LOCATION <i>Nicodemus 10 3/4 miles N</i>			COUNTY <i>Graham</i>	STATE <i>Ks</i>	
OLD OR NEW (Circle one)							

CONTRACTOR *B.93*

TYPE OF JOB *Production Prod. Csg*

HOLE SIZE _____ T.D. _____

CASING SIZE *4 1/2 10.5* DEPTH *3761*

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. *21.50*

PERFS. _____

DISPLACEMENT *59.52*

OWNER _____

CEMENT AMOUNT ORDERED

2 5/8" 10.5" ASC

500 yds. 6" 10.5" KCL

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER *Bill*

366 HELPER *Glen*

BULK TRUCK DRIVER *Keith*

_____ DRIVER _____

RECEIVED @

JUL 05 2001 @

KCC WICHITA @

HANDLING @

MILEAGE @

REMARKS:

Pipe run 3761

Shoe pt. 21.50

Insert 3744.59

Pump 500 yds. 6" 10.5" KCL

Follow w/ 225 lb. Asc

Pump plus w/ 59.52 hrs. at KCL w/ 100 yds

then plug & 12" 10.5" threaded hole

CHARGE TO: *Great Eastern*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

@ _____

@ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

MANIFOLD @ _____

11- Cat Release @ _____

2- Baskets @ _____

1 Guide shoe @ _____

1 Catch Drum Assembly @ _____

2 1/2" PORT COLLAR @ _____

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 *[Signature]*

PRINTED NAME _____

ALLIED CEMENTING CO., INC. 19589

ORIGINAL

KCC

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

SERVICE POINT:
OAKLEY

DATE <u>5-10-05</u>	SEC. <u>25</u>	TWP. <u>6S</u>	RANGE <u>21W</u>	CALLED OUT	ON LOCATION <u>6:00 AM</u>	JOB START <u>7:45 AM</u>	JOB FINISH <u>8:15 AM</u>
MED AMERICAN LEASE	WELL # <u>2</u>	LOCATION <u>NICODEMUS-1W-8N-1 1/2 E-5 TN</u>			COUNTY <u>GRAHAM</u>	STATE <u>KS</u>	
OLD OR (NEW) (Circle one)							

CONTRACTOR BIG "3" DRILL

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4" T.D. 222'

CASING SIZE 8 7/8" DEPTH 222'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 13 1/4 BBL

OWNER SAME

CEMENT AMOUNT ORDERED 160 SKS COM 38 CC 286 CC

COMMON	<u>160 SKS</u>	@	<u>8 7/8</u>	<u>1392 00</u>
POZMIX		@		
GEL	<u>3 SKS</u>	@	<u>14 00</u>	<u>42 00</u>
CHLORIDE	<u>5 SKS</u>	@	<u>38 00</u>	<u>190 00</u>
ASC		@		

EQUIPMENT

PUMP TRUCK CEMENTER TERRY

191 HELPER WAYNE

BULK TRUCK

218 DRIVER JARROD

BULK TRUCK

_____ DRIVER _____

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HANDLING	<u>168 SKS</u>	@	<u>1 60</u>	<u>268 80</u>
MILEAGE	<u>64 PER SK / MILE</u>			<u>856 00</u>
TOTAL				<u>2719 60</u>

REMARKS:

CEMENT DID CIRC.

THANK YOU

CHARGE TO: GREAT EASTERN

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>222'</u>			
PUMP TRUCK CHARGE				<u>670 00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>85.115</u>	@	<u>5 00</u>	<u>425 00</u>
MANIFOLD		@		
TOTAL				<u>1095 00</u>

PLUG & 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 Tony Trough

Henry Hdwghofer
PRINTED NAME

ALLIED CEMENTING CO., INC. 16673

ORIGINAL

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

SERVICE POINT:

Russell

DATE <i>6-8-60</i>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <i>2:30pm</i>	JOB START <i>3:45pm</i>	JOB FINISH <i>4:45pm</i>
LEASE <i>W.A. 1171119</i>	WELL # <i>2</i>	LOCATION <i>Nicodemus 3N 16W 3N</i>				COUNTY	STATE
<input checked="" type="radio"/> OLD OR NEW (Circle one)		<i>1E 5nd</i>					

CONTRACTOR <i>Chas Well Service</i>	OWNER
TYPE OF JOB	
HOLE SIZE _____ T.D. _____	CEMENT
CASING SIZE <i>3</i> _____ DEPTH _____	AMOUNT ORDERED <i>450 lbs 60/40 65/40</i>
TUBING SIZE <i>2 3/8</i> _____ DEPTH _____	<i>4 1/2 ft</i>
DRILL PIPE _____ DEPTH _____	
TOOL <i>Per + 1/2 in</i> _____ DEPTH <i>1825</i>	
PRES. MAX _____ MINIMUM _____	COMMON _____ @ _____
MEAS. LINE _____ SHOE JOINT _____	POZMIX _____ @ _____
CEMENT LEFT IN CSG. _____	GEL _____ @ _____
PERFS. _____	CHLORIDE _____ @ _____
DISPLACEMENT _____	ASC _____ @ _____

EQUIPMENT

PUMP TRUCK	CEMENTER <i>Steve</i>
# <i>345</i>	HELPER <i>Tom</i>
BULK TRUCK	
# <i>340 342</i>	DRIVER <i>Fred</i>
BULK TRUCK	
# _____	DRIVER _____

REMARKS:

Rh Wilson etc on location

Per calling 1800 Pressure up to 800 psi Open test collar & bleed circulation

After 450 lbs @ 600 psi Cement did not circulate Close test collar Pressure up to 800 psi Wash around 500' way

Thank you

HANDLING _____ @ _____
MILEAGE _____ @ _____
TOTAL _____

SERVICE

DEPTH OF JOB _____
PUMP TRUCK CHARGE _____
EXTRA FOOTAGE _____ @ _____
MILEAGE _____ @ _____
_____ @ _____
_____ @ _____
TOTAL _____

CHARGE TO: *Great Eastern*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

MANIFOLD _____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
TOTAL _____

To Allied Cementing Co., Inc.

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TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE *ed [unclear]*

PRINTED NAME