

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

KCC
AUG 31 2005

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONFIDENTIAL

CONFIDENTIAL

ORIGINAL

Operator: License # 3882
Name: SAMUEL GARY JR. & ASSOCIATES, INC.
Address: 1670 BROADWAY, SUITE 3300
City/State/Zip: DENVER, CO 80202-4838
Purchaser: GARY-WILLIAMS ENERGY CORPORATION

Operator Contact Person: TOM LARSON
Phone: (620) 653-7368
Contractor: Name: Summit Drilling Company
License: 30141

Wellsite Geologist: JUSTIN CARTER
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. _____

5/5/2005 05/13/2005 07/22/2005
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-159-22454-0000
County: RICE
NE Sec. 21 Twp. 18 S. R. 9 East West
330 feet from NORTH Line of Section
1200 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: BEHNKE Well #: 1-21
Field Name: WILDCAT

Producing Formation: BASAL PENN CONGLOMERATE
Elevation: Ground: 1712' Kelly Bushing: 1722'
Total Depth: 3352' Plug Back Total Depth: 3298'
Amount of Surface Pipe Set and Cemented at 303' 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
(Data must be collected from the Reserve Pit)
ACT I WITH
4-23-02
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 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.

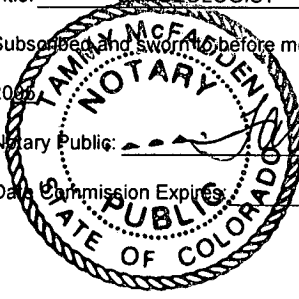
Signature: Thomas J Ferial

Title: SR GEOLOGIST Date: 08/31/2005

Subscribed and sworn to before me this 31st day of AUGUST, 2005

Notary Public: Sammy McTadder

Date Commission Expires: _____ My Commission Expires 9/22/05



KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

CONFIDENTIAL

Side Two

ORIGINAL

Operator Name: SAMUEL GARY JR. & ASSOCIATES, INC. Lease Name: BEHNKE Well #: 1-21
 Sec. 21 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 (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Sample Sent to Geological Survey	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	TOPEKA	2470'	-748'
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	HEEBNER	2744'	-1022'
List All E. Logs Run:	DUAL INDUCTION DENSITY - NEUTRON SONIC LOG MICROLOG		DOUGLAS	2774'	-1052'
			BRN LIME	2869'	-1147'
			LANSING	2893'	-1171'
			ARBUCKLE	3322'	-1600'
			TD	3352'	

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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"	28	303'	CLASS A	175	2% GEL & 3% CC
PRODUCTION	7-7/8"	5-1/2"	14	3343'	ALW ASC	125 100	1/2# / SK FLOCELE 5#/SK GILSONITE & 3/4% CD-31

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 Specify Footage of Each Interval Perforated	Acid. Fracture, Shot, Cement, Squeeze Record (Amount and Kind of Material Used)		Depth
4 JSPF	3256-3258'			

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SEP 01 2005
CONSERVATION DIVISION
WICHITA, KS

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8	3269'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
07/22/2005			<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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	20	0	0		40°

Disposition of Gas: Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: 3256-3258

If vented, submit ACO-18.)

PORTLAND CEMENTING CO., INC.

P.O. BOX 31
RUSSELL, KS 67665
PH (785) 483-3887
FAX (785) 483-5566

CONFIDENTIAL

V47418

ORIGINAL

* - I N V O I C E *

Invoice Number: 096806

Invoice Date: 05/11/05

Sold To: Samuel Gary, Jr. & Assoc.
& Larson Engineering, Inc.
562 W. Highway #4
Olmitz, KS
67561-8561

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RECEIVED
KANSAS CORPORATION COMMISSION
SEP 01 2005
CONSERVATION DIVISION
WICHITA, KS

Cust. I.D.: Gary
P.O. Number: Behnke 1-21
P.O. Date: 05/11/05

Due Date.: 06/10/05
Terms: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	175.00	SKS	8.7000	1522.50	T
Gel	3.00	SKS	14.0000	42.00	T
Chloride	5.00	SKS	38.0000	190.00	T
Sugar	100.00	LBS	1.0000	100.00	T
Handling	183.00	SKS	1.6000	292.80	E
Mileage	30.00	MILE	10.9800	329.40	E
183 sks @ .06 per sk per mi					
Surface	1.00	JOB	670.0000	670.00	E
Extra Footage	10.00	PER	0.5500	5.50	E
Mileage pmp trk	30.00	MILE	5.0000	150.00	E
Wood Plug	1.00	EACH	55.0000	55.00	T

All Prices Are Net, Payable 30 Days Following
Date of Invoice. 1 1/2% Charged Thereafter.
If Account CURRENT take Discount of \$ 335.72
ONLY if paid within 30 days from Invoice Date

Subtotal: 3357.20
Tax: 120.30
Payments: 0.00
Total: 3477.50

335.72
3141.78

DRLG COMP W/O LOE
AFE # 1021
ACCT # 135/60
APPROVED BY J.C. Larson

ALLIED CEMENTING CO., INC.

16482

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KCC

ORIGINAL ✓

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

AUG 31 2005

SERVICE POINT:

Great Bend

CONFIDENTIAL

DATE <u>5-6-05</u>	SEC. <u>21</u>	TWP. <u>18</u>	RANGE <u>9w</u>	CALLED OUT <u>1:00 AM</u>	ON LOCATION <u>3:00 AM</u>	JOB START <u>4:00 AM</u>	JOB FINISH <u>4:35 AM</u>
LEASE <u>Behake</u>	WELL# <u>1-21</u>	LOCATION <u>Chase 9 north - 1 3/4 East</u>			COUNTY <u>Price</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)				<u>South into</u>			

CONTRACTOR Summit Drilling
 TYPE OF JOB Surface Pipe
 HOLE SIZE 12 1/2 T.D. 310'
 CASING SIZE 8 5/8 DEPTH 310'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. approx 10'
 PERFS. _____
 DISPLACEMENT 19 BBLs

EQUIPMENT

PUMP TRUCK CEMENTER Jack
 # 120 HELPER J.D.
 BULK TRUCK _____
 # 341 DRIVER Don
 BULK TRUCK _____
 # _____ DRIVER _____

REMARKS:

Run 7 1/2' of used 28 lb line pipe
cement with 175 sy of cement
Displace plug with 19 BBLs of fresh
water.
Cement did Circ.

- Thanks -

CHARGE TO: Samuel Gray Jr. & Ass.
 STREET 1670 Broadway, Suite 3300
 CITY Denver STATE Colo. ZIP 80202

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 Don Rex

OWNER Samuel Gray Jr. & Ass.

CEMENT
 AMOUNT ORDERED 175 sy Common
3 1/2" c/c + 2 1/2" gel

COMMON	<u>175 sy</u>	@	<u>8.10</u>	<u>1522.50</u>
POZMIX		@		
GEL	<u>3 1/4</u>	@	<u>14.00</u>	<u>42.00</u>
CHLORIDE	<u>5 1/4</u>	@	<u>38.00</u>	<u>190.00</u>
ASC		@		
SUGAR	<u>100#</u>	@	<u>1.00</u>	<u>100.00</u>
HANDLING	<u>183 sy</u>	@	<u>1.60</u>	<u>292.80</u>
MILEAGE	<u>183 1/4 ob 30</u>	@	<u>3.00</u>	<u>549.40</u>
TOTAL				<u>2476.70</u>

SERVICE

DEPTH OF JOB	<u>310'</u>			
PUMP TRUCK CHARGE				<u>670.00</u>
EXTRA FOOTAGE	<u>10</u>	@	<u>.55</u>	<u>5.50</u>
MILEAGE	<u>30</u>	@	<u>5.00</u>	<u>150.00</u>
TOTAL				<u>825.50</u>

PLUG & FLOAT EQUIPMENT

MANIFOLD		@		
<u>1-8 5/8 Wood</u>		@	<u>55.00</u>	<u>55.00</u>
TOTAL				<u>55.00</u>

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

PRINTED NAME

ALLIED CEMENTING CO., INC.

PO. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566

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 AUG 3 1 2005
CONFIDENTIAL

147582

ORIGINAL
 * I N V O I C E *

Invoice Number: 096917

Invoice Date: 05/18/05

RECEIVED
 KANSAS CORPORATION COMMISSION

SEP 01 2005

CONSERVATION DIVISION
 WICHITA, KS

Sold Samuel Gary, Jr. & Assoc.
 To: % Larson Engineering, Inc.
 562 W. Highway #4
 Olmitz, KS
 67561-8561

Cust I.D.....: Gary
 P.O. Number...: Behnke #1-21
 P.O. Date.....: 05/18/05

Due Date.: 06/17/05

Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
ALW	125.00	SKS	8.1500	1018.75	T
ASC	100.00	SKS	10.7500	1075.00	T
AS Flush	500.00	GAL	1.0000	500.00	T
AC-D31	50.00	LBS	6.2500	312.50	T
FloSeal	31.00	LBS	1.7000	52.70	T
Salt	6.00	SKS	15.7500	94.50	T
KolSeal	500.00	LBS	0.6000	300.00	T
D-Foam	16.00	LBS	5.7500	92.00	T
Handling	265.00	SKS	1.6000	424.00	E
Mileage	30.00	MILE	15.9000	477.00	E
265 sks@.06 per sk per mi					
Production	1.00	JOB	1320.0000	1320.00	E
Mileage pmp trk	30.00	MILE	5.0000	150.00	E
Head	1.00	PER	75.0000	75.00	E

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 589.14
 ONLY if paid within 30 days from Invoice Date

Subtotal: 5891.45
 Tax.....: 217.06
 Payments: 0.00
 Total....: 6108.51

(589.14)
5519.37

DRLG COMP W/O LOE

AFE # 1021

ACCT # 137/60

APPROVED BY T.C. Larson

ALLIED CEMENTING CO., INC.

18320

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ORIGINAL ✓

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

AUG 31 2005

SERVICE POINT:

St. Bernard

CONFIDENTIAL

DATE <u>5-13-05</u>	SEC <u>21</u>	TWP. <u>18</u>	RANGE <u>9</u>	CALLED OUT <u>5:00 PM</u>	ON LOCATION <u>6:30 PM</u>	JOB START <u>3:15 PM</u>	JOB FINISH <u>10:30 PM</u>
LEASE <u>Behnke</u>	WELL # <u>121</u>	LOCATION <u>Burton Gas Plant - 2 1/2 S, 3 E</u>			COUNTY <u>Rice</u>	STATE <u>K</u>	
OLD OR <u>(NEW)</u> (Circle one)				<u>5/5</u>			

CONTRACTOR Summitt Bldg

TYPE OF JOB Production

HOLE SIZE 7 7/8" T.D. 3350

CASING SIZE 5 1/2" DEPTH 3343'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 1500# MINIMUM _____

MEAS. LINE _____ SHOE JOINT 42.88'

CEMENT LEFT IN CSG. 42.88'

PERFS. _____

DISPLACEMENT 82 bbls

OWNER Same

CEMENT

AMOUNT ORDERED 125 lbs 6 5/35 6 7/8 sel 1/4 # flared / sh

100 lbs ASC 5 # Kaled / sh

500 gal ASF,

COMMON <u>AKW 125 lb</u>	@ <u>8.75</u>	<u>1018.75</u>
POZMIX _____	@ _____	_____
GEL _____	@ _____	_____
CHLORIDE _____	@ _____	_____
ASC <u>100 gal</u>	@ <u>10.75</u>	<u>1075.00</u>
ASFUSH <u>500</u>	@ <u>1.00</u>	<u>500.00</u>
AC-D-31 <u>50 #</u>	@ <u>6.25</u>	<u>312.50</u>
FLO SEAL <u>31 #</u>	@ <u>1.70</u>	<u>52.70</u>
SALT <u>600 #</u>	@ <u>15.75</u>	<u>94.50</u>
KOC SEAL <u>500 #</u>	@ <u>.60</u>	<u>300.00</u>
D-TEAM <u>16 #</u>	@ <u>5.75</u>	<u>92.00</u>
HANDLING <u>265 lb</u>	@ <u>1.00</u>	<u>424.00</u>
MILEAGE <u>265 lb 06 30</u>	@ <u>30</u>	<u>477.00</u>
TOTAL		<u>4346.45</u>

EQUIPMENT

PUMP TRUCK CEMENTER Tom D.

181 HELPER Don Dimitt

BULK TRUCK DRIVER Marlyn S

259

BULK TRUCK DRIVER _____

REMARKS:

Ran 3343' of 5 1/2" cas. Broke circulation. Circulated 1 hr. Pumped 5 bbls H₂O, 10 bbls ASF, 15 lbs H₂O. Mixed 125 lbs 6 5/35, 6 7/8 sel, 1/4 # flared / sh followed by 100 lbs ASC 5 # Kaled / sh. Worked up. Released plug. Displaced with fresh H₂O. Landed plug at 1500 #. Released & Held.

SERVICE

DEPTH OF JOB <u>3343'</u>		
PUMP TRUCK CHARGE _____		<u>1320.00</u>
EXTRA FOOTAGE _____	@ _____	_____
MILEAGE <u>30</u>	@ <u>5.00</u>	<u>150.00</u>
TOTAL		<u>1470.00</u>

CHARGE TO: Samuel Gray Jr & Associates

STREET 90 Larson Engineering

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

MANIFOLD _____	@ _____	_____
<u>Rotating Head</u>	@ <u>75.00</u>	<u>75.00</u>
TOTAL		<u>75.00</u>

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 X T.C. Larson

SIGNATURE X T.C. LARSON

PRINTED NAME _____