

ORIGINAL

2/02/11
Form ACO-1
September 1999
Form Must Be Typed

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

CONFIDENTIAL WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 3882
 Name: SAMUEL GARY JR. & ASSOCIATES, INC.
 Address: 1560 BROADWAY, SUITE 2100
 City/State/Zip: DENVER, CO 80202-4838
 Purchaser: _____
 Operator Contact Person: TOM FERTAL
 Phone: (303) 831-4673
 Contractor: Name: SOUTHWIND DRILLING
 License: 33350
 Wellsite Geologist: JUSTIN CARTER
 Designate Type of Completion:
 New Well Re-Entry Workover Temp Abd.
 Oil SWD SLOW 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. _____
 10/10/2008 10/17/2008 10/18/2008
 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 159-22587-0000
 County: RICE
S/2 S/2 SW Sec. 9 Twp. 21 S. R. 10 East West
330 feet from SOUTH Line of Section
1320 feet from WEST Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW **SW**
 Lease Name: GILCHRIST Well #: 1-9
 Field Name: WILDCAT
 Producing Formation: _____
 Elevation: Ground: 1719' Kelly Bushing: 1728'
 Total Depth: 3502' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 350 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)
 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.: _____

AHT-Dlg-4/10/09

P&A 10/17/08

See CP-23
in SA
10/17/08

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 Fertal
 Title: SR. GEOLOGIST Date: 2/2/2009
 Subscribed and sworn to before me this 2ND day of FEBRUARY, 2009
 Notary Public: Musta paper
 Date Commission Expires: _____

KCC Office Use ONLY

Letter of Confidentiality Attached Permitted, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 Distribution

RECEIVED
 KANSAS CORPORATION COMMISSION
 FEB 03 2009

My Commission Expires 5/05/2009

CONSERVATION DIVISION
WICHITA, KS

Operator Name: SAMUEL GARY JR & ASSOCIATES, INC. Lease Name: GILCHRIST Well #: 1-9

Sec. 9 Twp. 21 S. R. 10 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 (Attach Additional Sheets) 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 (Submit Copy)	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum TOPEKA 2576' -848' HEEBNER 2861' -1133' DOUGLAS 2889' -1161' BRN LIME 2993' -1265' LANSUNG 3021' -1293' ARBUCKLE 3388' -1660' TD 3502'
List All E. Logs Run: DUAL INDUCTION DUAL COMPENSATED POROSITY BHC SONIC MICROLOG	

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	12-1/4"	8-5/8"	23	350'	CLASS A	275	2% GEL & 3% CC

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

TUBING RECORD		Size	Set At	Packer At	Liner Run			
					<input type="checkbox"/> Yes <input type="checkbox"/> No			
Date of First, Resumed 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 <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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SAMUEL GARY JR
AND ASSOCIATES, INC.
an integrated energy company

February 2, 2009

Mr. Dave Williams
Kansas Corporation Commission
130 South Market, Room - 2078
Wichita, KS 67202

Re: Gilchrist 1-9
Rice County, Kansas
API# 15-159-22587-0000

Handwritten note in a circle: "11-17-08" with "of per" written above and "p. 100?" written below.

Dear Dave,

Attached please find the ACO-1, Well History Description of Well and Lease, the CP-4, Well Plugging Record, along with Geologist Report, Electric Logs, and all cementing tickets for the subject Well.

We hereby request that this ACO-1, and all data included, along with the drill cuttings sent to the Kansas Geological Survey, be held **CONFIDENTIAL FOR 2 YEARS**.

If there are any questions, or if you need any additional information, please contact me at Samuel Gary Jr. & Associates, Inc. at the telephone number shown on the letterhead.

Sincerely,

SAMUEL GARY JR. & ASSOCIATES, INC.

Thomas G. Fertal

Thomas G. Fertal
Sr. Geologist

Enclosures

KGC
FEB 02 2009
CONFIDENTIAL

RECEIVED
KANSAS CORPORATION COMMISSION

FEB 03 2009

CONSERVATION DIVISION
WICHITA, KS

Quality Oilwell Cementing Inc.

740 W WICHITA
P.O. Box 32
Russell, KS 67665

V14576

Invoice

Date	Invoice #
10/13/2008	1143

11/6

Bill To
Samuel Gary Jr & Associates Inc P.O. BOX 448 RUSSELL KS 67665

P.O. No.	Terms	Project
	Net 30	

Quantity	Description	Rate	Amount
275	common	13.10	3,602.50T
5	GEL	19.00	95.00T
10	Calcium	50.00	500.00T
290	handling	2.10	609.00
8,120	.09 * 290 SACKS * 28 MILES	0.09	730.80
1	8 5/8 wooden plug	72.00	72.00T
1	surface pipes 0-500ft	910.00	910.00
28	pump truck mileage charge	7.00	196.00
672	discount 10% if paid within 30 days DISCOUNT HAS ALREADY BEEN DEDUCTED	-1.00	-672.00
	LEASE: GILCRIST WELL #1-9		
	Sales Tax Rice	6.30%	268.98

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KANSAS CORPORATION

FEB 03 2009

CONSENTED DIVISION
WICHITA KS

COX
513 37722
COX

DRLG COMP W/O LOE GG

AFE #. 98036

ACCT #. 135-560

APPROVED BY: AR

Thank you for your business. Dave

Total \$6,312.28

24 S. Lincoln Street
P.O. Box 31
Russell, KS 67665-2906

Voice: (785) 483-3887
Fax: (785) 483-5566

V 14665

INVOICE

Invoice Number: 116614
Invoice Date: Oct 17, 2008
Page: 1

RECEIVED

11/13
OCT 20 2008
SAMUEL GARY JR.
& ASSOCIATES, INC.

Bill To:

Samuel Gary, Jr. & Assoc.
c/o Kelly Branum
P O Box 448
Russell, KS 67665

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Gary	Gilcrest #1-9	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1	Great Bend	Oct 17, 2008	11/16/08

Quantity	Item	Description	Unit Price	Amount
114.00	MAT	Class A Common	13.50	1,539.00
76.00	MAT	Pozmix	7.55	573.80
7.00	MAT	Gel	20.25	141.75
48.00	MAT	Flo Seal	2.45	117.60
199.00	SER	Handling	2.25	447.75
28.00	SER	Mileage 199 sx @.10 per sk per mi	19.90	557.20
1.00	SER	Rotary Plug	1,159.00	1,159.00
28.00	SER	Mileage Pump Truck	7.00	196.00

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FEB 03 2009

CONSERVATION DIVISION
WICHITA, KS

KCC

FEB 02 2009

CONFIDENTIAL

DRLG COMP W/O LOE GG

AFE #:

98036

ACCT #:

135-60

APPROVED BY:

[Signature]

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 473.21

ONLY IF PAID ON OR BEFORE

Nov 16, 2008

Subtotal	4,732.10
Sales Tax	298.12
Total Invoice Amount	5,030.22
Payment/Credit Applied	
TOTAL	5,030.22

<473.21>
4,557.01

ALLIED CEMENTING CO., LLC. 33541

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

SERVICE POINT:
Great Bend Us

DATE <u>10-17-08</u>	SEC. <u>9</u>	TWP. <u>21 S</u>	RANGE <u>10 W</u>	CALLED OUT <u>6:00 PM</u>	ON LOCATION <u>7:30 PM</u>	JOB START <u>11:00 AM</u>	JOB FINISH <u>11:30</u>
LEASE <u>Galvest</u>	WELL# <u>1-9</u>		LOCATION <u>Raymond US 3 south 3/4 W</u>		COUNTY <u>Rice</u>	STATE <u>Us</u>	
OLD OR <u>NEW</u> (Circle one)			<u>North into</u>				

CONTRACTOR South wind 2

TYPE OF JOB Rotary Plug

HOLE SIZE 7 7/8 T.D. 3500

CASING SIZE 4 1/2 DEPTH 3410

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 23 3/4 BBLs fresh water

EQUIPMENT 46 BBLs Rig mud

PUMP TRUCK CEMENTER Wayne - D

181 HELPER Galien - D

BULK TRUCK

341 DRIVER Jeff - W

BULK TRUCK

_____ DRIVER _____

OWNER Samuel Gary Associates

CEMENT

AMOUNT ORDERED 190 SK 60/40 4% Gels

1/2 floccal

COMMON	<u>114 M.</u>	@	<u>13.50</u>	<u>1539.00</u>
POZMIX	<u>76 M.</u>	@	<u>7.55</u>	<u>573.80</u>
GEL	<u>7 M.</u>	@	<u>20.25</u>	<u>141.75</u>
CHLORIDE		@		
ASC		@		
<u>FLO SEAL</u>	<u>48 #</u>	@	<u>2.45</u>	<u>117.60</u>
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>199 M.</u>	@	<u>2.25</u>	<u>447.75</u>
MILEAGE	<u>199 M. 10 28</u>	@		<u>557.20</u>
				TOTAL <u>3377.10</u>

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FEB 03 2009
KANSAS CORPORATION COMMISSION
TOBIA, KS

REMARKS:

1st plug 3410 mix 350X 5.50 BBLs
Displace with 5 BBLs water 40 BBLs Mud
2nd plug 1200 ft mix 350X 5.50 BBLs of
water Displace 70 BBLs 5.50 BBLs of
800 ft mix 350X 5.50 BBLs 9 BBLs fresh
water Displacement 4th plug 350X 5.50
Displace with 3.4 BBLs of water 5th plug
60 ft mix 250X 3.98 BBLs Displace 1/2 BBL
of water Rat mix 155X 3 BBLs Displace 1/2
BBL of water Mouse 105X 1.50 BBLs 1.25
Displacement

CHARGE TO: Samuel Gary Associates

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 3410

PUMP TRUCK CHARGE _____ 1159.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 28 @ 7.00 196.00

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 1355.00

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME LEWYNE TRESNER

SIGNATURE Lewyne Tresner

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS