

AMENDED REPORT
CORRECTING WELL NUMBER

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

RECEIVED
FEB 11 2002 2-11-02
KCC WICHITA
ORIGINAL

Operator: License # 32281

Name: GMX RESOURCES INC.

Address: 9400 N. Broadway, Suite 600

City/State/Zip: Oklahoma City, OK 73114

Purchaser: Oneok Field Services

Operator Contact Person: Jon Stromberg

Phone: (405) 600-0711 ext. 12

Contractor Name: NA - prior to GMX Resources Inc.

License: na

Wellsite Geologist: na

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: Petroleum Production Management, Inc.

Well Name: Stevenson #A# #4

Original Comp. Date: 5-1-80 Original Total Depth: 4803'

Deepening Re-perf. Conv. to Enhr./SWD

Plug Back 2790' Plug Back Total Depth

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Enhr.?) Docket No. _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
<u>5-1-80</u>	<u>5-20-80</u>	<u>8-29-94</u>

API No. 15 - 055-20,404-00-01

County: Finney 6 22 33 East West

1320 feet from (S) N (circle one) Line of Section

1320 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Stevenson Gas Unit Well #: 2

Field Name: Hugoton

Producing Formation: Chase

Elevation: Ground: 2893' Kelly Bushing: 2898'

Total Depth: 4802' Plug Back Total Depth: 2790'

Amount of Surface Pipe Set and Cemented at 601' Feet

Multiple Stage 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 EX 11-21-02

(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: Jon Stromberg Jon Stromberg

Title: VP - Operations Date: 1/14/02

Subscribed and sworn to before me this 14th day of January

19 2002

Notary Public: Mary Alice Falk

Date Commission Expires: December 15, 2004

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KANSAS CORPORATION COMMISSION

If Denied, Yes Date: _____

JAN 16 2002 Wireline Log Received

Geologist Report Received

CONSERVATION DIVISION

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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

CASING RECORD <input 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	# Sacs Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	23#	601'	HLC	450	3% cc, 1/4# flocele
Production		5 1/2"	14#	4765'	HLC	250	10# gil/sx 65/35 poz. 10% salt, 3/4% CFR-2.

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<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	2642-64', 2604-18', 2588-96, 2536-56'	750 gal. 15% HCL	
4	4734-35' CIBP @ 4702' (prior to GMX)		
	sqz. perfs 2800-02', 340 sx Halliburton	lite - tail w/125 sx premium	
	sqz. perfs 2734-36' 4 SPF, 2466-68', pkr @ 2710', 100 sx. premium, circ.		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	5 1/2"	4765'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enh.	Producing Method
8-29-04	<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
	na				

Disposition of Gas _____ METHOD OF COMPLETION _____ Production Interval _____

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