

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 33342
Name: Blue Jay Operating LLC
Address: 4916 Camp Bowie Blvd., Suite 204
City/State/Zip: Fort Worth, TX 76107
Purchaser: Cherokee Basin Pipeline LLC
Operator Contact Person: Jens Hansen
Phone: (817) 546-0034
Contractor: Name: Cherokee Wells, LLC
License: 33539
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: _____
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. _____

10/15/05 10/17/05 10/17/05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-205-26195-0000
County: Wilson
S2 SW NW NE Sec. 6 Twp. 29 S. R. 14 East West
1000 feet from S N (circle one) Line of Section
1980 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: B Ward Well #: 6A-1
Field Name: Cherokee Basin Coal Gas

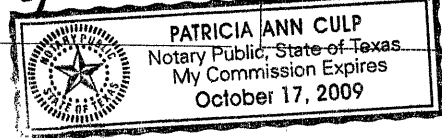
Producing Formation: _____
Elevation: Ground: 855' Kelly Bushing: _____
Total Depth: 1307' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 43' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from bottom casing
feet depth to surface _____ w/ 145 _____ sx cmt.
ACT II WITHIN 9-25-06

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.: _____

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: _____ Date: 3-30-06
Subscribed and sworn to before me this 30 day of March,
20 06.
Notary Public: Patricia Ann Culp
Date Commission Expires: 10-17-09



KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: 4-17-06
 Wireline Log Received
 Geologist Report Received
USG Distribution

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Operator Name: Blue Jay Operating LLC Lease Name: B Ward Well #: A-1
 Sec. 6 Twp. 29 S. R. 14 East West County: Wilson

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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 <i>(Submit Copy)</i> List All E. Logs Run: High Resolution Compensated Density/Neutron Log; Dual Induction Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Driller's Log Enclosed
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------

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	11 1/4"	8 5/8"	26#	43	Class A	55	See Attached
Long String	6 3/4"	4 1/2"	10.5	1292'	Thick Set Cement	145	See Attached

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 <i>(Amount and Kind of Material Used)</i>	Depth

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

Disposition of Gas		METHOD OF COMPLETION		Production Interval	
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	<input type="checkbox"/> Other (Specify) <u>SIGW - waiting on pipeline</u>			

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Cherokee Wells, LLC

4916 Camp Bowie Blvd. Ste. 200 - Fort Worth, TX 76107

Contractor License # 33539

817-546-0034/ TX Office; 817-296-6541/Jens Hansen Cell; 817-624-1374/FAX

620-839-5581/ KS Office; 620-432-6170/Jeff Kephart Cell; 620-839-5582/FAX

Rig #:	CW			S 6 T 29S R 14E				
API #:	15-205-26195-0000			Location: S2,NW,NE				
Operator:	Blue Jay Operating LLC			County: Wilson				
	4916 Camp Bowie Suite 204							
	Fort Worth, TX 76107							
				Gas Tests				
Well #:	A-1	Lease Name:	B Ward	Depth	Pounds	Orifice	flow - MCF	
Location:	1000	ft. from N	Line	930	1#	1/4"	8.95	
	1980	ft. from E	Line	980	Gas Check Same			
Spud Date:	10/15/2005			1005	2 1/2#	1/4"	14.3	
Date Completed:	10/17/2005	TD:	1307	1105	Gas Check Same			
Geologist:				1205	Gas Check Same			
Casing Record	Surface	Production						
Hole Size	11 1/4"	6 3/4"						
Casing Size	8 5/8"							
Weight	26#							
Setting Depth	43'							
Cement Type								
Sacks	Service Company							
Feet of Casing	43'5"							
Rig Time	Work Performed							
Well Log								
Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	11	top soil	398	502	oil	804	818	sand / shale
11	28	clay	502	548	sand / shale	818	821	lime
28	32	gravel	548	567	lime	821	822	coal
32	44	sand	567	569	shale	822	825	shale
44	118	shale	569	575	lime	825	851	Pink lime
118	142	lime	575	583	shale	851	879	shale
142	151	shale	583	633	lime	879	895	Oswego lime
151	183	lime	633	678	shale	895	902	Summit
183	238	shale	678	700	lime	902	909	lime
238	248	lime	700	718	shale	909	913	Mulky
248	269	shale	718	731	lime	913	916	lime
250		water	731	743	sand	916	970	shale
269	315	lime			no show	970	971	coal
280		inject water	743	782	sand / shale	971	989	shale
315	398	shale	782	804	sand	989	991	coal
398	502	lime			no show	991	1049	shale

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Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
1049	1050	coal						
1050	1094	sand / shale						
1094	1096	coal						
1096	1201	shale						
1201	1307	Mississippi lime						
1307		Total Depth						

Notes:

05LJ-101705-CW-056-B Ward A-1-BJO

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CONSOLIDATED OIL WELL SERVICES, INC.

P.O. BOX 884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER 87722

LOCATION EUREKA

FOREMAN KEVIN MCCOY

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
10-15-05	1294	B. WARD A-1				Wilson	
CUSTOMER <u>Blue Jay Operating</u>		Go Cherokee Wells LLC TRUCK # DRIVER TRUCK # DRIVER 445 Rick 441 Troy					
MAILING ADDRESS <u>4916 Camp Bowie Blvd. Ste 204</u>							
CITY <u>Fortworth</u>	STATE <u>Tx</u>						ZIP CODE <u>76107</u>

JOB TYPE <u>SURFACE</u>	HOLE SIZE <u>11"</u>	HOLE DEPTH <u>45'</u>	CASING SIZE & WEIGHT <u>8 5/8 23" new</u>
CASING DEPTH <u>43'</u>	DRILL PIPE _____	TUBING _____	OTHER _____
SLURRY WEIGHT <u>14.8#</u>	SLURRY VOL <u>12 BBL</u>	WATER gal/sk <u>5.2</u>	CEMENT LEFT in CASING <u>10'</u>
DISPLACEMENT <u>2.0 BBL</u>	DISPLACEMENT PSI _____	MIX PSI _____	RATE _____

REMARKS: Safety Meeting: Rig up to 8 5/8 casing. Break circulation w/ fresh water. wash down 15' to total casing depth of 43'. Mixed 55 sks Regular Cement w/ 3% CaCl2, 1/4" floccle per/sk @ 14.8# per/gal yield 1.18. Displace w/ 2.0 BBL fresh water. Shut casing in. Good cement returns to surface. Job complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	590.00	590.00
5406	0	MILEAGE 2 nd well of 2	0	0
1104	55 sks	Regular CLASS "A" Cement	9.75	536.25
1102	155 #	CaCl2 3%	.61 #	94.55
1107	1/2 sk	Floccle 1/4" per/sk	42.75	21.37
5407	2.58 Tons	Ton Mileage BULK TRUCK	MIC	260.00
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			KCC WICHITA	
			Sub total	1502.17
			SALES TAX	41.09
			ESTIMATED TOTAL	1543.26

AUTHORIZATION Bob McNew TITLE _____ DATE _____

Thank You 6.3%

CONSOLIDATED OIL WELL SERVICES, INC.

P.O. BOX 884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER

07702

LOCATION

Furka

FOREMAN

Brad Butler

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-18-05		B. Ward A-1	6	29s	14E	Wilson
CUSTOMER						
Blue Jay Operating						
MAILING ADDRESS						
4916 Camp Bowie Blvd. Ste 204						
CITY		STATE	ZIP CODE			
Fortworth		Tx	76107			
			TRUCK #	DRIVER	TRUCK #	DRIVER
			446	Scott		
			441	Justin		

JOB TYPE Longstring HOLE SIZE 6 3/4" HOLE DEPTH 1307' CASING SIZE & WEIGHT 4 1/2"
 CASING DEPTH 1292' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.4 lb SLURRY VOL 44 Bbl WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 20 1/2 Bbls DISPLACEMENT PSI 1900 ~~PSI~~ 2300 Landed Plug RATE 4 BPM - 2 BPM

REMARKS: Safety Meeting: Rig up to 4 1/2" casing, Break circulation with 30 Bbls. water
Pumped 10 Bbl. Gel Flush, 10 Bbl. Dye water.
Mixed 145 SKs. Thick Set cement w/ 5# P/SK of KOI-SEAL at 13.4 lb. P/GAL (yield 1.69)
shut down - washout pump & lines - Release Plug - Displace Plug with 20 1/2 Bbls. water
Final pumping at 1900 PSI - Bumped Plug to 2300 PSI - wait 2 minutes - Release Pressure
Float Held - close casing in with 2 PSI
Good cement returns to surface with 7 Bbl. Slurry
Job complete - Tear down

"Thank you"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE	765.00	765.00	
5406	45	MILEAGE	3.00	135.00	
1126 A	145 SKs.	Thick Set cement	13.00	1885.00	
1110 A	14 SKs.	KOI-SEAL 5# P/SK	16.90	236.60	
1118 A	4 SKs.	Gel Flush	6.63	26.52	
5407	Ton	Mileage - Bulk Truck	m/c	260.00	
4156	1	4 1/2" Float shoe - Flapper Type	123.00	123.00	
4129	1	4 1/2" Centralizer	28.00	28.00	
4404	1	4 1/2" Top Rubber Plug	38.00	38.00	
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				SALES TAX	147.24
				ESTIMATED TOTAL	3644.36

AUTHORIZATION Bob McNew TITLE _____

DATE _____