

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

ORIGINAL

Shiloh

15-001-293116-00-00

Operator: License # 32977 / 33583
 Name: Dorado Gas Resources, LLC/Admiral Bay
 Address: 14550 E Easter Ave., Ste. 1000
 City/State/Zip: Centennial, CO 80112
 Purchaser: Seminole Energy
 Operator Contact Person: Janet Johnson
 Phone: (303) 350-1255
 Contractor: Name: McGown
 License: 5786
 Wellsite Geologist: None
 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. _____

1/18/06	1/20/106	1/23/06
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

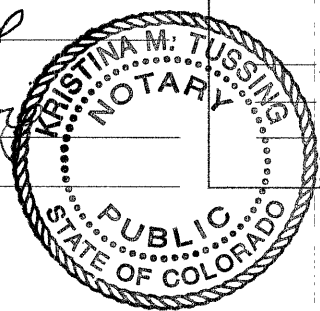
CONFIDENTIAL

API No. 15 - _____
 County: Woodson
NE NW NE Sec. 23 Twp. 26 S. R. 17 East West
174 feet from S (N) (circle one) Line of Section
2004 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW (SW)
 Lease Name: Cress Well #: 2-23-SWD
 Field Name: Humboldt Chanute
 Producing Formation: Riverton
 Elevation: Ground: 90 Kelly Bushing: _____
 Total Depth: 1498 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 20 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 1501
 feet depth to 0 w/ 210 sx cmt.
ALT II WITHIN 5-9-06
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 onsite: **RECEIVED**
KANSAS CORPORATION COMMISSION
 Operator Name: _____ **MAY 04 2006**
 Lease Name: _____ **CONSERVATION DIVISION**
 Quarter _____ Sec. _____ Twp. _____ S. R. **WICHITA, KS** 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: Janet Johnson
 Title: Janet Johnson Date: 4/18/06
 Subscribed and sworn to before me this 18th day of April
2006.
 Notary Public: Kristina M. Tussing
 Date Commission Expires: 5-22-08



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

RECEIVED
APR 21 2006
KCC WICHITA

Operator Name: Dorado Gas Resources, LLC/Admiral Bay Lease Name: Cress Well #: 2-23-SWD
 Sec. 23 Twp. 26 S. R. 17 East West County: Woodson

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Riverton	1106
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mississippian Shale	1112
List All E. Logs Run:		Chattanooga Shale	1414
		Arbuckle	1429

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Borehole Volume
Dual Induction
Gamma Ray

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	# Sacks Used	Type and Percent Additives
Surface	12.25	8-5/8	24	20	Class A	5	None
Production	6.25	4-1/2	10.5	1209'	OWC	176	2% gel

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		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
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Date of First, Resumerd Production, SWD or Enhr. Waiting on pipeline	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 Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
		20			

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled

(If vented, Submit ACO-18.) Other (Specify) _____

L S Well Service, L.L.C.# 33374
543 22000 ROAD
CHERRYVALE, KANSAS 67335-8515
620-328-4433 OFFICE

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 04 2006
CONSERVATION DIVISION
WICHITA, KS

TICKET NUMBER 20060123
LOCATION Allen Co.
FOREMAN JL, G.B, K

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CEMENT TREATMENT REPORT

API # 15-001-29316-00-00

DATE <u>1-23-06</u>		WELL NAME <u>Cross 2-23 SWD</u>	
SECTION <u>23</u>	TOWNSHIP <u>26</u>	RANGE <u>17</u>	COUNTY <u>Allen Co</u>
CUSTOMER <u>Durado / Admiral Bay</u>			
MAILING ADDRESS <u>% Jim Morris 410 N. State Street</u>			
CITY <u>Iola</u>			
STATE <u>Kansas</u>		ZIP CODE <u>66749</u>	
TIME ARRIVED ON LOCATION			

Hole	Pipe	Annual Volume in Linear Ft./Bl.
6 3/4"	4 1/2"	40.5
6 1/2"	4 1/2"	46
6 1/4"	2 1/2"	33.5
5 1/4"	2 1/2"	53.5
5 1/4"	2"	47
5 1/2"	2 1/2"	41
Tubing-Linear Ft./Bl.		
11"	8 5/8"	15
10"	7"	24
4 1/2"	10.5 lb.	63.1
2 1/2"		170
2"		250

WELL DATA	
HOLE SIZE	<u>6 7/8"</u>
TOTAL DEPTH	<u>1501'</u>
CASING SIZE	<u>4 1/2"</u>
CASING DEPTH	<u>1410'</u>
PACKER DEPTH	
WIRE LINE READING BEFORE	
WIRE LINE READING AFTER	

TYPE OF TREATMENT

() SURFACE PIPE
 PRODUCTION CASING
 () SQUEEZE CEMENT
 () PLUG AND ABANDON
 () PLUG BACK
 () MISP. PUMP
 () WASH DOWN
 () OTHER

INSTRUCTIONS PRIOR TO JOB _____

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____

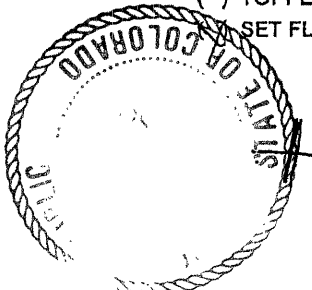
HOOKED ONTO 4 1/2" CASING. ESTABLISHED CIRCULATION WITH 40 BARRELS OF WATER, AHEAD, THEN BLENDED 210 SACKS OF OWC CEMENT, THEN DROPPED RUBBER PLUG, THEN PUMPED 22 BARRELS OF WATER.

- LANDED PLUG ON BOTTOM AT 500 PSI
- () SHUT IN PRESSURE _____
- () LOST CIRCULATION
- GOOD CEMENT RETURNS
- () TOPPED OFF WELL WITH _____ SACKS
- () SET FLOAT SHOE - SHUT IN

[Signature]
(SIGNATURE)

RECEIVED
APR 21 2006

KCC WICHITA



400 TO M.I.T
PUMPED 4 1/2" TO 1300 PSI

\$4,200