

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed
Mound Valley

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33583
Name: Admiral Bay (USA) Inc.
Address: 7060B S. Tucson Way
City/State/Zip: Centennial, CO 80112
Purchaser: Southern Star
Operator Contact Person: Carol Sears
Phone: (303) 350-1255
Contractor: Name: HAT Drilling LLC
License: 33734
Wellsite Geologist: Greg Bratton
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. _____
06 1/29/06 6/30/06 7/5/06
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

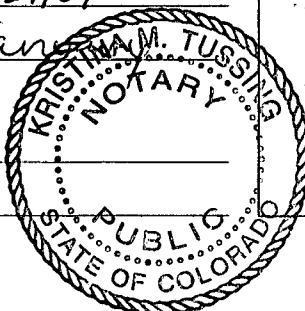
API No. 15 - 099-23867-0000
County: Labette
____ NW ____ NW Sec. 14 Twp. 33 S. R. 18 East West
616 feet from S / (N) (circle one) Line of Section
1733 feet from (E) / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Tucker Well #: 2-14
Field Name: Mound Valley
Producing Formation: Riverton
Elevation: Ground: 806' Kelly Bushing: 806'
Total Depth: 926' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at _____ 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 A1+ II NH 6-18-08
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: **RECEIVED**
KANSAS CORPORATION COMMISSION
Operator Name: _____
Lease Name: _____ License No.: JAN 30 2007
Quarter _____ Sec. _____ Twp. _____ S. R. **CONSERVATION DIVISION**
County: _____ Docket No.: **WICHITA, KS**

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: Carol A. Sears
Title: Land Administrator Date: 1/29/07
Subscribed and sworn to before me this 29th day of Jan
20 07
Notary Public: Kristina M. Tussing
Date Commission Expires: 5-22-09



KCC Office Use ONLY

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

Operator Name: Admiral Bay (USA) Inc. Lease Name: Tucker Well #: 2-14
 Sec. 14 Twp. 33 S. R. 18 East West County: Labette

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 checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: High Resolution Litho-Density Neutron Log Dual Induction SFL/GR Gamma Ray/Neutron/CCL Log Mud Log	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Excello</td> <td>312</td> <td>494</td> </tr> <tr> <td>Riverton</td> <td>798</td> <td>8</td> </tr> <tr> <td>Mississippian</td> <td>814</td> <td>-8</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Excello	312	494	Riverton	798	8	Mississippian	814	-8
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample														
Name	Top	Datum														
Excello	312	494														
Riverton	798	8														
Mississippian	814	-8														

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	9 5/8	8 5/8	20	20	Portland	151	
Production	6 3/4	4 1/2	10 1/2	916	Thickset		Kol & Flo seal; 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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	797.5' - 800.5'	2900# 20/40, 3100# 12/20, 412 bbl water; 200 gal 15% HCL acid	797.5' - 800.5'

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TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr:		Producing Method				
10/20/06		<input checked="" 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 METHOD OF COMPLETION Production Interval

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

B&L CEMENTING
P.O. BOX 517
CHANUTE, KANSAS 66720
620-431-0455 OFFICE

TICKET NUMBER _____
LOCATION Grand Valley
FOREMAN Jim Williams Jr.

CEMENT TREATMENT REPORT

7-05-06

DATE 7-05-06	WELL NAME <u>Tucker 2/14</u>		
SECTION <u>14</u>	TOWNSHIP	RANGE	COUNTY <u>Lb.</u>
CUSTOMER <u>Admiral Bay Res</u>			
MAILING ADDRESS			
CITY			
STATE		ZIP CODE	
TIME ARRIVED ON LOCATION			

151 sacks

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	63.1
2 1/2"		170
2"		250

20.1

14.5

WELL DATA	
HOLE SIZE	<u>6 3/4</u>
TOTAL DEPTH	<u>926</u>
CASING SIZE	<u>4 1/2</u>
CASING DEPTH	<u>916</u>
PACKER DEPTH	
WIRE LINE READING BEFORE	
WIRE LINE READING AFTER	

TYPE OF TREATMENT
<input type="checkbox"/> SURFACE PIPE
<input type="checkbox"/> PRODUCTION CASING
<input type="checkbox"/> SQUEEZE CEMENT
<input type="checkbox"/> PLUG AND ABANDON
<input type="checkbox"/> PLUG BACK
<input type="checkbox"/> MISF. PUMP
<input type="checkbox"/> WASH DOWN
<input type="checkbox"/> OTHER

INSTRUCTIONS PRIOR TO JOB

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____

HOOKED ONTO _____ "CASING. ESTABLISHED CIRCULATION WITH _____ BARRELS OF WATER, _____ AHEAD, THEN BLENDED _____ SACKS OF _____ CEMENT, THEN DROPPED PUBBER PLUG, THEN PUMPED _____ BARRELS OF WATER.

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

Name Jim Williams Jr Hours 1
Name Jeff Ellis Hours 1
Name Don Puckett Hours 1
Name Mark Lewis Hours 1

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B&L Cementing
P.O. BOX 517
CHANUTE, KANSAS 66720
620-431-0455 OFFICE

TICKET NUMBER _____

LOCATION Moand Valley

FIELD TICKET

DATE <u>7-05-06</u>	WELL NAME, # <u>Tadles 2/17</u>	QUARTER	SECTION	TOWNSHIP	RANGE	COUNTY <u>26.</u>	FORM.
CHARGE TO <u>Admiral Bay Res.</u>			OWNER				
MAILING ADDRESS			OPERATION				
CITY AND STATE			CONTRACTOR				

QUANTITY OR UNITS	DESCRIPTION OF SERVICES OR PRODUCT
<u>1</u>	PUMP CHARGE
<u>1</u>	CONDITIONING HOLE
	ADDITIVES
<u>1</u>	COTTONSEED HULLS
<u>1</u>	METASYLCATE
<u>8</u>	PREMIUM GEL
	CITY WATER
<u>1</u>	<u>4 1/2</u> RUBBER PLUG
	LATCH DOWN RUBBER PLUG
	FLOAT SHOE
	4 1/2" DRILLABLE FLOAT SHOE
<u>1</u>	BULK DELIVERY CHARGE
	STAND BY TIME
	WASH DOWN
<u>1</u>	WATER TRANSPORTS
	VACUUM TRUCK
<u>151</u>	CEMENT (OWC)
	DIVERSIFIED LIGHT + KOL-SEAL
	PLUGGING CEMENT
	PORTLAND CEMENT

NOTES 6000 1/2 Cal. Glide
1/2 Flow Seal.

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[Handwritten Signature]
CUSTOMER SIGNATURE

CUSTOMER (PLEASE PRINT)



MIDWEST SURVEYS

LOGGING • PERFORATING • CONSULTING • M.I.T. SERVICES

P.O. Box 68 • Osawatomie, KS 66064

Phone 913-755-2128 • Fax 913-755-6533

Perforation Record

Company: Admiral Bay Resources, Inc.

Lease/Field: Tucker Lease

Well: # 2-14

County, State: Labette County, Kansas

Service Order #: 17283

Purchase Order #: N/A

Date: 7/26/2006

Perforated @: 797.5 to 800.5

Type of Jet, Gun
or Charge: 3 3/8" DP 23 Gram Tungsten Expendable Casing Gun

Number of Jets,
Guns or Charges: Thirteen (13)

Casing Size: 4.5"

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JUL 3 1 2006

Prepared by: Consolidated Oil Well Services

Company Name: Admiral Bay

Well Name: Tucker 2-14

Field: Mound Valley

Formation: Riverton

County: LB

State: KS

Job Date: 07/26/06

Comments: Acid Spot/ABO/Sand Frac

Perfs 798-801, 13 shts

100 gal 15% spot, 100 gal ABO w/ 15 balls

Fluids: 412 bbls, 15# gel, maxflo, biocide

Proppants: 2900# 20/40, 3000# 12/20

Average Rate: 12

Average STP: 1100

Tubing:

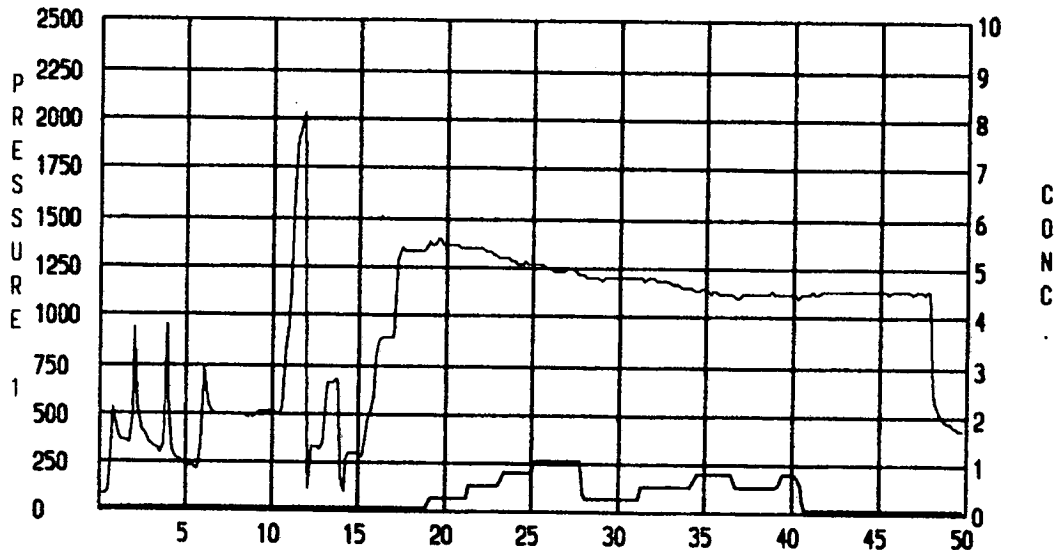
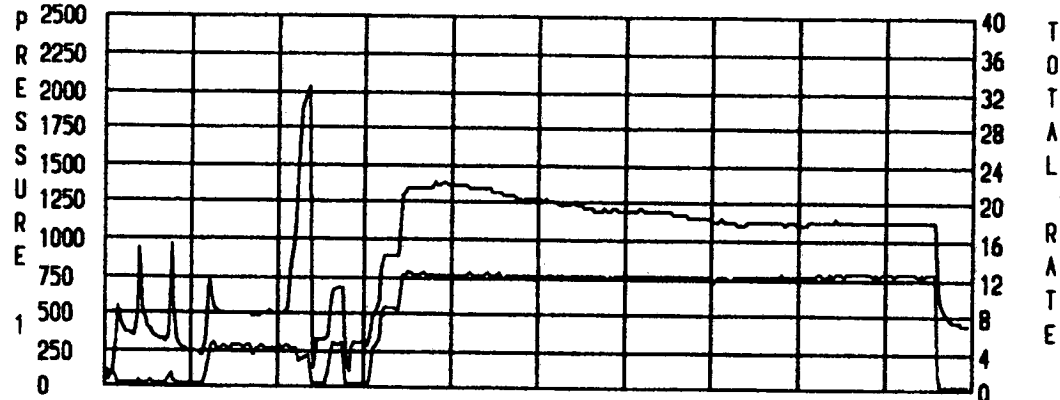
Casing: 4 1/2

Packer:

Filename: 06031706

Closure Pres: 4000

LINEAR PLOT



TOTAL RATE

CONC

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JUL 31 2006



1 OF 4

TICKET NUMBER 29995

LOCATION Trayer

1530 S. SANTA FE, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
7-26-06	1067	Tucker #214					LB	Renton
CHARGE TO				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5102C	1	PUMP CHARGE 1000 HP Combs		2075.00
5102D	1	Acid Balls		N/C
5610	1	Acid Pump Transfer Unit		1600.00
5302	1	Acid SPOT		460.00
5111	1	Frac Van		650.00
3107	200	15% HCL		260.00
4326	200 15	1/8" Ball Sealers 100 x 100 15 x 5		375.00 37.50
5107	1	Chem. Inj. Pump		94.00
5115	1	Ball Sealer		90.00
5604	1	Shoe Valve		68.00
1123	0	City water - customer provided		0
1281	300	Shoe Seal		1365.00
1208	1	Breaker		164.25
1205A	10	Bitcide		253.50
1262	20	Shocks		900.00
5109	46	BLENDING & HANDLING TON-MILES		265.00
5103		STAND BY TIME		275.00
5108	40	MILEAGE X 4 P/E/S/V		504.00
5501F	2	WATER TRANSPORTS VACUUM TRUCKS		N/C
2101	2900#	FRAC SAND		406.00
2102	3100#	FRAC SAND		496.00
		CEMENT		

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SALES TAX 2.22
CONSERVATION DIVISION
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ESTIMATED TOTAL 8321.87

CUSTOMER or AGENTS SIGNATURE Jim Morris CIS FOREMAN Gary Wiebel

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

207329

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 37694
 FIELD TICKET REF # 29995
 LOCATION Shoyer
 FOREMAN Gary Wickel
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TREATMENT REPORT
 FRAC & ACID

DATE <u>1-26-06</u>	CUSTOMER #	WELL NAME & NUMBER <u>Tucker 2-14</u>	SECTION	TOWNSHIP	RANGE 1	COUNTY <u>LB</u>
CUSTOMER <u>Admiral Bay Resources</u>			TRUCK #			
MAILING ADDRESS			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
			DRIVER			
			TRUCK #			
			DRIVER			
			TRUCK #			
			DRIVER			

WELL DATA

CASING SIZE <u>4 1/2</u>	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION <u>Minerston</u>	<u>798-801 3' (13)</u>

TYPE OF TREATMENT
Acid Spot/SPAC/ sand frac.

CHEMICALS

<u>bell breaker</u>	
<u>15% HCL</u>	
<u>THORACO</u>	
<u>Proxide</u>	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
<u>100 gal 15% HCL</u>	<u>30</u>	<u>4.2</u>			<u>70-487</u>	BREAKDOWN <u>1073</u>
<u>4 1/2 15 BALLS.</u>						START PRESSURE <u>1350</u>
<u>Pad.</u>	<u>25</u>	<u>4-8</u>			<u>493-864</u>	END PRESSURE
	<u>10</u>	<u>12</u>			<u>1323-1350</u>	BALL OFF PRESS <u>2003</u>
<u>20/40</u>			<u>.25</u>		<u>1357</u>	ROCK SALT PRESS
"			<u>.5</u>	<u>2900#</u>	<u>1304-1329</u>	ISIP <u>655</u>
"			<u>.75-1</u>		<u>1253-1219</u>	5 MIN <u>347</u>
<u>17/20</u>			<u>.25</u>	<u>3200#</u>	<u>1188</u>	10 MIN
"			<u>.5</u>		<u>1163</u>	15 MIN
"	<u>30</u>		<u>.75</u>		<u>1109</u>	MIN RATE <u>4</u>
"			<u>.5-.75</u>		<u>1102</u>	MAX RATE <u>12</u>
<u>FLUSH</u>	<u>89</u>				<u>1118-1110</u>	DISPLACEMENT <u>12.7</u>
<u>OVERFLUSH</u>	<u>76</u>					
<u>TOTALS</u>	<u>412</u>			<u>6000#</u>		

REMARKS:
Spot 100 gal 15% Breakdown & Soak. Stabilize 493m
250# - 487#
Run 100 gal 15% 4 1/2 15 Balls. Release balls - let settle.
Start frac.

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AUTHORIZATION Jim Morris

TITLE

DATE

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