

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33342
Name: Blue Jay Operating, LLC
Address: 4916 Camp Bowie Blvd., Suite 204
City/State/Zip: Fort Worth, TX 76107
Purchaser: Southeastern Kansas Pipeline
Operator Contact Person: Rhonda Wilson
Phone: (620) 378-3650
Contractor: Name: Well Refined Drilling Co., Inc
License: 33072
Wellsite Geologist: n/a

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. _____
7/20/06 7/21/06 11/2/06
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 205-26860-00-00
County: Wilson
SE4 SE4 SE4 Sec. 7 Twp. 28 S. R. 15 East West
640 feet from S / N (circle one) Line of Section
_____ feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Clairborne Living Trust Well #: A-10
Field Name: Cherokee Basin Coal Gas
Producing Formation: Mississippian
Elevation: Ground: 854.8 Kelly Bushing: n/a
Total Depth: 1247 Plug Back Total Depth: n/a
Amount of Surface Pipe Set and Cemented at 35 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/ 135 sx cmt.

Drilling Fluid Management Plan *Alt II KGR 3/20/08*
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
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: Nancy Miller
Title: ADMINISTRATIVE ASST Date: 12/6/06
Subscribed and sworn to before me this 6th day of DECEMBER,
20 06
Notary Public: RHONDA WILSON
My Appt. Expires 9/8/2010
Date Commission Expires: _____

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

Operator Name: Blue Jay Operating, LLC Lease Name: Clairborne Living Trust Well #: A-10
 Sec. 7 Twp. 28 S. R. 15 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: Log Enclosed	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Log Enclosed
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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	11.25"	8 5/8	26#	35	Portland	35	
Long String	6.75"	4 1/2	9.5#	1247	Thick Set Cement	135	

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

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 CONSERVATION DIVISION
 WICHITA, KS

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 <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 **METHOD OF COMPLETION** Production Interval

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

P.O. BOX 884, CHANUTE, KS 66720

LOCATION **Chanute**

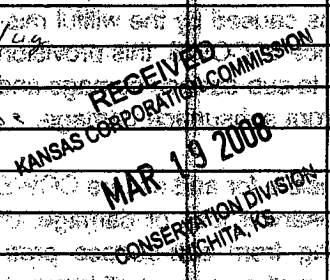
PHONE 431-9210 OR 800-467-8676

FOREMAN **Steve McCord**

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE: 7-21-06	CUSTOMER # 3070	WELL NAME & NUMBER: Claaborn, Loring, Truss A-10	SECTION	TOWNSHIP	RANGE	COUNTY: Wilson	
CUSTOMER: Gateway Titan	BILLING ADDRESS: P.O. Box 9160	STATE: OK	ZIP CODE: 74855	TRUCK # 463	DRIVER: Alan	TRUCK # 4739	DRIVER: Steve
WELL TYPE: Long string	HOLE SIZE: 6 3/4	HOLE DEPTH: 1255	CASING SIZE & WEIGHT: 4 1/2 x 9.5	DRILL PIPE	TUBING	OTHER	
CASING DEPTH: 1257	DRILL PIPE	TUBING	OTHER	CURRY WEIGHT	SECURRY VOL	WATER gal/sk	CEMENT LEFT in CASING: 0
DISPLACEMENT PSI	MIX PSI	RATE	MARKS: Soft water, Break Circulation, Thick set Cement, Wash parts of hole, Replace plug, Final Pumping Pressure 600, Shut casing in, Job Complete				
Remarks: 20' displacement, 135 sk cement, 5" plug, 700# gel, 74.2 tons mileage, 4 1/2 top rubber plug, 4 1/2 centralizer, 4 1/2 AFU float shoe.							
Thank you							

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
		MILEAGE N/C		
1126A	135 SKS	Thick set Cement	14.65	1977.75
1110A	650#	RT Seal 5" P.I/SK	.36	232.50
1118A	700#	Gel/F Wash	4.14	2898.00
5407	74.2 Tons	Mileage Bulk Trucks	276.00	276.00
4404	1	4 1/2 Top Rubber Plug	40.00	40.00
4129	1	4 1/2 Centralizer	36.00	36.00
4161	1	4 1/2 AFU Float Shoe	348.00	348.00
				3638.75
				6.3%
				SALES TAX 759.75
ESTIMATED TOTAL				3798.50



AUTHORIZATION: **Mark Coleman** TITLE: _____ DATE: _____