

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

*Ken
M
2/25/09*

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

AMENDED

OPERATOR: License # 33583
Name: Admiral Bay (USA) Inc.
Address 1: 7060 B S. Tucson Way
Address 2: _____
City: Centennial State: CO Zip: 80112 + _____
Contact Person: Chris Ryan
Phone: (303) 350-1255
CONTRACTOR: License # 5786
Name: McGown Drilling
Wellsite Geologist: Chris Ryan
Purchaser: Seminole Energy Services
Designate Type of Completion:
____ New Well ____ Re-Entry ____ Workover
____ Oil ____ SWD ____ SIOW
____ Gas ____ ENHR ____ SIGW
____ CM (Coal Bed Methane) ____ Temp. Abd.
____ 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. ____ Conv. to SWD
____ Plug Back: _____ Plug Back Total Depth _____
____ Commingled Docket No.: _____
____ Dual Completion Docket No.: _____
____ Other (SWD or Enhr.?) Docket No.: _____
9/18/2007 9/20/2007 12/11/2008
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

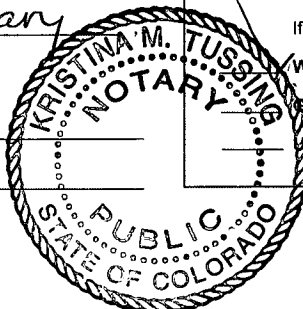
API No. 15 - 011-23211-00-00
Spot Description: _____
____ NW ____ NW ____ NE Sec. 26 Twp. 24 S. R. 23 East West
505' Feet from North / South Line of Section
2065' Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Shepard Well #: 2-26
Field Name: Wildcat
Producing Formation: Riverton
Elevation: Ground: 891' Kelly Bushing: 891'
Total Depth: 650' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 23' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 639'
feet depth to: surface w/ 85 *ALT 2 - Dlg - 3/30/09* ^{sx cmt}

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: Air dry
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: Business Manager Date: 2/24/2009
Subscribed and sworn to before me this 24th day of February
20 09.
Notary Public: Kristina M. Tusing
Date Commission Expires: 5-22-11



KCC Office Use ONLY

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

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FEB 25 2009

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Admiral Bay (USA) Inc. Lease Name: Shepard Well #: 2-26
 Sec. 26 Twp. 24 S. R. 23 East West County: Bourbon

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Density Neutron Gamma Ray Dual Induction	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Excello</td> <td>231'</td> <td>660'</td> </tr> <tr> <td>Upper Bartlesville</td> <td>447'</td> <td>444'</td> </tr> <tr> <td>Mississippian</td> <td>593'</td> <td>298'</td> </tr> </table>	Name	Top	Datum	Excello	231'	660'	Upper Bartlesville	447'	444'	Mississippian	593'	298'
Name	Top	Datum											
Excello	231'	660'											
Upper Bartlesville	447'	444'											
Mississippian	593'	298'											

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	12.25	8.625	24#	23'	quickset	6	
Production	6.75	4.5	10.5#	639'	quickset	85	kolseal/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 <i>(Amount and Kind of Material Used)</i>	Depth
4	565.0' to 568.0'	190bbl H2O, clay stay, 1/2%maxflo, 800# 30/50	
	519.0' to 521.0'		
	221.5' to 224.5' 13 perfs		
	232.0' to 236.0' 17 perfs		

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TUBING RECORD: Size: Set At: Packer At:		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr.		Producing Method: <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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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MC ID #
 Shop # 620 437-2661
 Cellular # 620 437-7582
 Office # 316 685-5908
 Office Fax # 316-685-5926
 Shop Address: 3613A Y Road
 Madison, KS 66860

Hurricane Services, Inc.
 P.O. Box 782228
 Wichita, KS 67278-2228

Cement, Acid or Tools
 Service Ticket

02085

DATE 9-21-07

COUNTY BOUCO CITY _____

CHARGE TO Running Foxes

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Shepard 2-26 CONTRACTOR McGowan Drilling

KIND OF JOB Longstring SEC. _____ TWP. _____ RNG. _____

DIR. TO LOC. 1st Job of 2 OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
85 SKS	Quick Set cement		1174.70
350 lbs.	KOI-SEAL 4" P ² /SK		87.50
100 lb.	Gel Flush		18.00
	BULK CHARGE		
4.9 Ton	BULK TRK. MILES		418.95
90	PUMP TRK. MILES		247.50
1	PLUGS 4 1/2" Top Rubber		35.00
		6.3% SALES TAX	82.85
		TOTAL	2764.50

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T.D. 650'

CSG. SET AT 639' VOLUME 9.90 Bbls

SIZE HOLE 6 3/4"

TBG SET AT _____ VOLUME _____

MAX. PRESS. _____

SIZE PIPE 4 1/2" - 11.5 lb.

PLUG DEPTH _____

PKER DEPTH _____

PLUG USED _____

TIME FINISHED _____

REMARKS: Rig up to 4 1/2" casing, Break circulation with 10 Bbls water, 5 Bbl. Gel Flush, followed with 15 Bbl. water spacer. Mixed 85 SKS Quick Set cement w/ 4" P²/SK of KOI-SEAL at 13.8 1/2 P²/GAL. Shut Down Washout Pump & Lines - Release Plug - Displace Plug with 10 Bbls water. Final Pumping at 450 PSI - Bumped Plug to 1000 PSI - wait 2 minutes - Release Pressure - Float Held close casing in w/ 0 PSI. Good cement returns to surface w/ 4 Bbl. slurry.

EQUIPMENT USED

NAME Dan Kimberlin UNIT NO. 185

NAME Bryan #91 UNIT NO. _____

Brad Butler
 HSI REP.

OWNER'S REP.