

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM ORIGINAL
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: Southeastern Kansas Pipeline Co., LLC
 Operator Contact Person: Rhonda Wilson
 Phone: (620) 378-3650
 Contractor: Name: Well Refined Drilling Co., LLC
 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. _____

<u>6/7/06</u>	<u>6/15/06</u>	<u>9/28/06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-26464-00-00
 County: Wilson
W2 NE SE Sec. 31 Twp. 27 S. R. 15 East West
1980 feet from (S) N (circle one) Line of Section
1320 990 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: O Black Well #: A-2
 Field Name: Cherokee Basin Coal Gas
 Producing Formation: See Perforating Record
 Elevation: Ground: unknown Kelly Bushing: _____
 Total Depth: 1330 Plug Back Total Depth: N/A
 Amount of Surface Pipe Set and Cemented at 51 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/ 140 sx cmt.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit) Att 2 KGR 7/2/08
 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 Assistant Date: 11/9/06
 Subscribed and sworn to before me this 9th day of NOVEMBER,
2006
 Notary Public: Rhonda Wilson
 Date Commission Expires: _____

RHONDA WILSON
 Notary Public - State of Kansas
 My Appt. Expires 9/1/2010

KCC Office Use ONLY

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

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 KANSAS CORPORATION COMMISSION
 NOV 14 2006

Operator Name: Blue Jay Operating, LLC Lease Name: O Black Well #: A-2
 Sec. 31 Twp. 27 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: Electric Log Enclosed	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Driller 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	51	Portland	6	
Long String	6.75"	4 1/2"	13.4	1317	Thick Set Cement	140	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 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 Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingle Other (Specify) _____

Production Interval _____

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 CONSERVATION DIVISION
 WICHITA, KS

CONSOLIDATED OIL WELL SERVICE, INC.

TICKET NUMBER 10148

P.O. BOX 884, CHANUTE, KS 66720

LOCATION Fuiska

620-431-9210 OR 800-467-8676

FOREMAN Brad Butler

TREATMENT REPORT & FIELD TICKET

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-17-06	3070	O Black A-2				Wilson
CUSTOMER <u>Gate way Titan</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>PO Box 960</u>			463	Alan		
CITY <u>Meeker</u>			479	Calin		
STATE <u>OK</u>			436	J.P.		
ZIP CODE <u>74855</u>						

JOB TYPE Longstring HOLE SIZE 6 3/4" HOLE DEPTH 1330' CASING SIZE & WEIGHT 4 1/2" - 10.5
 CASING DEPTH 1317' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.4 lb SLURRY VOL 42 Bbl WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 21 Bbl DISPLACEMENT PSI 700 PSI 1200 Bump Plug RATE _____

REMARKS: Safety Meeting - Run into 4 1/2" casing, Break circulation with 25 Bbls water.
Pumped 10 Bbl Gal Flush 10 Bbl water spacer.
Mixed 140 sks Thick Set cement w/ 5th P/SK of KOL-SEAL w/ 13.4 lb P/GAL
Shut down washout pump lines - Release Plug - Displace Plug with 21 Bbls water.
Final pumpup at 700 PSI - Pumped Plug Test 1200 PSI - wait 2 minutes - Release Pressure.
Floater Held - close casing w/ 0 PSI
Good cement returns to surface with 8 Bbl slurry

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
	1	PUMP CHARGE	800.00	800.00
5406	40	MILEAGE	3.15	126.00
1126A	140 SKS	Thick Set cement	14.65	2051.00
1110 A	700 lbs	KOL-SEAL 5 th P/SK	.36 #/lb	252.00
1118 A	200 lbs	Gal Flush	.14 #	28.00
5407	7.7 Ton	Milage - Bulks Truck	M/L	275.00
5502C	3 Hrs	80 Bbl VACTIK	90.00	270.00
1123	3000 GAL	City water	12.80	38.40
4156	1	4 1/2" Floater Shoe - Flapper type	129.00	129.00
4129	1	4 1/2" Centralizer	29.00	29.00
4404	1	4 1/2" Top Rubber Plug	40.00	40.00
		Sub Total		4038.40
		SALES TAX 6.2%		161.75
		ESTIMATED TOTAL		4200.15

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 MAR 19 2008
 CONSERVATION DIVISION
 WICHITA, KS

AUTHORIZATION [Signature]

TITLE _____

DATE _____