

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

Handwritten initials and date: 2/17/09

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

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 # 33734
Name: HAT Drilling, LLC
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.: _____
7-1-2008 7-25-2008 10-13-2008
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

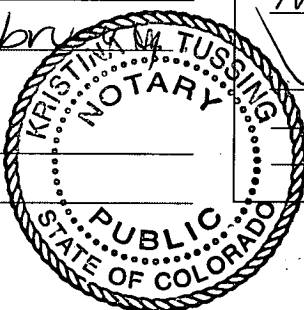
API No. 15 - 099-24460-00-00
Spot Description: _____
_____ -NW -NE Sec. 1 Twp. 33 S. R. 18 East West
660 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Labette
Lease Name: Ybarra Well #: 2-1
Field Name: Mound Valley
Producing Formation: Cherokee Coals
Elevation: Ground: 849' Kelly Bushing: 849'
Total Depth: 908' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 21 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 908
feet depth to: surface w/ 100 sx cmt.

Drilling Fluid Management Plan Alt II NCR 3-13-09
(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: *Chris Ryan*
Title: Business Manager Date: 2/17/2009
Subscribed and sworn to before me this 17th day of February
20 09.
Notary Public: *Kristina M. Tussing*
Date Commission Expires: 5-22-11



KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
FEB 18 2009

Operator Name: Admiral Bay (USA) Inc. Lease Name: Ybarra Well #: 2-1
 Sec. 1 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 type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray Dual Induction	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Cherokee/Excello 323' GL Mississippian 792' GL
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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	12.25	8.625		21	portland	6	
Production	6.75	4.5		908	OWC	100	500# kol seal, 150# premium 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	781.5' to 784.5' 13 perfs		
4	299.0' to 301.0' 9 perfs	30/50 brady, 300 gl 7.5% HCL, 111 gl P-CSA-5, 17 gl kcl substitute	
	324.0 to 326.0 9 perfs		

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 (Specify) _____	
Estimated Production Per 24 Hours	Oil Bbls. _____ Gas Mcf <u>32</u> 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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RECEIVED
KANSAS CORPORATION COMMISSION
FEB 18 2009
CONSERVATION DIVISION
WICHITA, KS



TICKET NUMBER 17754
 LOCATION Bartholomew, OK
 FOREMAN Kirk Sanders

PO Box 884, Chanute, KS 66720
 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-3-08	1067	Y'barca 2-1				LeFlore
CUSTOMER <u>Admiral Bay</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			398	Taha		
CITY			486	Willie		
STATE			402	Tom S.		
ZIP CODE						

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH 910' CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 908' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL 1.75 WATER gal/sk _____ CEMENT LEFT in CASING Ø
 DISPLACEMENT 14.4 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Run gel/100m to establish circ, run 100 sec of OWC/ with 5" Kal Seal/
4 1/2 Gal / 2% Calcium / .25" Plug / Wadded out pump & hrs / dropped plug
& disp. to set shoe / Shut down & washed up.

Circ. Cement to Seal

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE (Long string)		925.00
5406	65	MILEAGE		237.25
5407	Min	Bulk TK	RECEIVED	315.00
5402	908'	Footage	KANSAS CORPORATION COMMISSION	181.60
5501C	3 hrs	Transport	FEB 18 2009	336.00
5621	1ea	4 1/2 Plug Container	CONSERVATION DIVISION	200.00
1126A	100 sq	OWC (Thick Set)	WICHITA, KS	1700.00
1107A	1 1/2 sq / 60"	Plugs Seal		69.00
1110A	10 sq / 300"	Kal Seal		210.00
1118B	3 sq / 150"	Premium Gel		25.50
1123	100 gal / 420 gal	City Water		58.80
4404	1ea	4 1/2 Rubber Plug		45.00
			6.55% SALES TAX	138.10
			ESTIMATED TOTAL	4,441.25

Fravin 3737 AUTHORIZATION [Signature] TITLE 223327 DATE _____