

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

AMENDED

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 # 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.: _____

8/27/2007 8/30/2007 12/11/2008

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 011-23216-00-00

Spot Description: _____

NE SW SE Sec. 30 Twp. 24 S. R. 24 East West

675' Feet from North / South Line of Section

1940 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Bourbon

Lease Name: Thurston Well #: 15-30

Field Name: Wildcat

Producing Formation: Riverton

Elevation: Ground: 883' Kelly Bushing: 883'

Total Depth: 600' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 43' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 591

feet depth to: surface w/ 80 sx cmt.

Drilling Fluid Management Plan Air II NUR 3-11-09
(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: _____

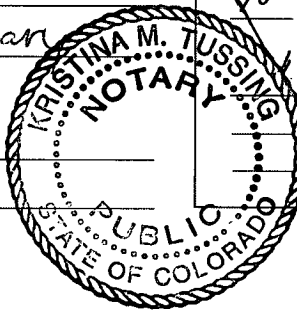
Title: Business Manager Date: 2/24/2009

Subscribed and sworn to before me this 24th 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 _____

WIC Distribution _____

RECEIVED
KANSAS CORPORATION COMMISSION
FEB 25 2009

CONSERVATION DIVISION
WICHITA KS

Operator Name: Admiral Bay (USA) Inc. Lease Name: Thurston Well #: 15-30
 Sec. 30 Twp. 24 S. R. 24 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: Gamma Ray Density Neutron	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Excello</td> <td>206'</td> <td>677'</td> </tr> <tr> <td>Upper Bartlesville</td> <td>430'</td> <td>453'</td> </tr> <tr> <td>Mississippian</td> <td>552'</td> <td>331'</td> </tr> </table>	Name	Top	Datum	Excello	206'	677'	Upper Bartlesville	430'	453'	Mississippian	552'	331'
Name	Top	Datum											
Excello	206'	677'											
Upper Bartlesville	430'	453'											
Mississippian	552'	331'											

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#	43	quickset	30	
Production	6.75	4.5	10.5#	591	quickset	80	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 (Amount and Kind of Material Used)	Depth
4	540.0' to 543.0'	23bbl H2O, 175gl 7.5%HCL, 1800# 30/50 sand	
	508.0' to 510.0'		
	196.0' to 200.0' 17 perms		
	206.0' to 210.0' 17 perms		

RECEIVED
 KANSAS CORPORATION COMMISSION
 FEB 25 2009
 CONSERVATION DIVISION
 WICHITA, KS

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: _____ _____
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------

FED. ID #
 MC ID # 165290
 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
 02028

DATE 8-30-07

COUNTY BOUCCO CITY _____

CHARGE TO Running Foxes
 ADDRESS _____ CITY _____ ST _____ ZIP _____
 LEASE & WELL NO. Thurston 15-30 CONTRACTOR McGowan Drig.
 KIND OF JOB Longstring SEC. _____ TWP. _____ RNG. _____
 DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge
		700.00
80 sks	Quick Set cement	1105.60
325 lbs	KOI-SEAL 4" 1 1/2" SK	81.25
100 lbs	Gel Flush	18.00
	BULK CHARGE	
4.55 Trk	BULK TRK. MILES	389.03
90	PUMP TRK. MILES	247.50
1	PLUGS 4 1/2" Top Rubber	35.00
	6.3% SALES TAX	78.11
	TOTAL	2654.49

RECEIVED
 KANSAS CORPORATION COMMISSION
 FEB 25 2009
 CONSERVATION DIVISION
 WICHITA KS

T.D. 600'
 SIZE HOLE 6 3/4"
 MAX. PRESS. _____
 PLUG DEPTH _____
 PLUG USED _____

CSG. SET AT 591' VOLUME 9.16 Bbls
 TBG SET AT _____ VOLUME _____
 SIZE PIPE 4 1/2" - 11.5 lb
 PKER DEPTH _____
 TIME FINISHED _____

REMARKS: Rig up to 4 1/2" casing, Break circulation w/ 10 Bbls water, 5 Bbl. Gel Flush followed with 15 Bbl. water spacer, Mixed 80 sks Quick Set cement w/ 4" 1 1/2" SK of KOI-SEAL @ 13 8/16 PPM/GAL. Shut down - wash out pump & lines - Release Plug - Displace Plug with 9 1/4 Bbls water, Final Pumping @ 400 PSI - Bumped Plug to 1000 PSI - wait 2 minutes - Release Pressure Float Held - close casing @ 100 PSI - Good cement returns to surface w/ 4 Bbl. slurry

EQUIPMENT USED

NAME Dan Kimberlin UNIT NO. #185
Brad Butler
 HSI REP.

NAME Bryan UNIT NO. #91
called by Earl
 OWNER'S REP.