

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed
Shiloh

ORIGINAL

Operator: License # 33583
 Name: Admiral Bay (USA) Inc.
 Address: 7060B S. Tucson Way
 City/State/Zip: Centennial, CO 80112
 Purchaser: Southern Star
 Operator Contact Person: Carol Sears
 Phone: (303) 350-1255
 Contractor: Name: McGown
 License: 5786
 Wellsite Geologist: Greg Bratton
 Designate Type of Completion:
 ___ New Well ___ Re-Entry ___ Workover
 ___ Oil ___ SWD ___ SIOW ___ 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>10/3/06</u>	<u>10/5/06</u>	<u>10/9/06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 133-26667-00-00
 County: Neosho
 ___ SE ___ NW Sec. 2 Twp. 27 S. R. 17 East West
370 feet from S / (N) (circle one) Line of Section
745 feet from (E) / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Quinn Well #: 1-2
 Field Name: Humboldt-Chanute
 Producing Formation: NA
 Elevation: Ground: 981' Kelly Bushing: _____
 Total Depth: 1190' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 20 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cmt.

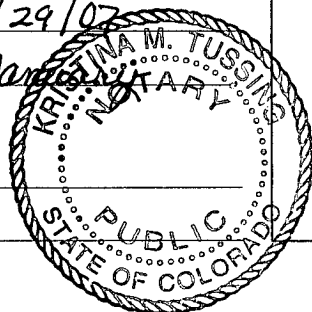
Drilling Fluid Management Plan Art II NH 6-23-08
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____
 Quarter _____ Sec. _____ S. R. _____ East West
 County: _____

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CONSERVATION DIVISION
WICHITA, KS

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: Carol A. Sears
 Title: Land Administrator Date: 1/29/07
 Subscribed and sworn to before me this 29th day of January
2007
 Notary Public: Kristina M. Tussing
 Date Commission Expires: 5-22-08



KCC Office Use ONLY

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

Operator Name: Admiral Bay (USA) Inc. Lease Name: Quinn Well #: 1-2
 Sec. 2 Twp. 27 S. R. 17 East West County: Neosho

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: Compensated Density Neutron Log Dual Induction LL3/GR Log Mud Log	<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>700'</td> <td>281'</td> </tr> <tr> <td>Rowe</td> <td>1066'</td> <td>-85'</td> </tr> <tr> <td>Mississippian</td> <td>1093'</td> <td>-112'</td> </tr> </table>	Name	Top	Datum	Excello	700'	281'	Rowe	1066'	-85'	Mississippian	1093'	-112'
Name	Top	Datum											
Excello	700'	281'											
Rowe	1066'	-85'											
Mississippian	1093'	-112'											

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	9 5/8	8 5/8	20	20	Portland	147	
Production	6 3/4	4 1/2	9.5	1180	Thickset	↓	Kol & Flo seal; 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
	not perfed	not fraced	
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TUBING RECORD	Size 2 3/8	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. N/A		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. Commingled Other (Specify) _____

Production Interval _____

CONSOLIDATED OIL WELL SERVICES, INC.
P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 08932
LOCATION Ottawa KS
FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-9-06	1067	Quinn # 1-2	2	27	17	NO
CUSTOMER <u>Admiral Bay Resources</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>410 N State St</u>			<u>506</u>	<u>Fred Mad</u>	<u>505-7106</u>	<u>Mark Wil</u>
CITY <u>Jola</u>			<u>368</u>	<u>Mat Mad</u>		
STATE <u>KS</u>			<u>510</u>	<u>Rod Bas</u>		
ZIP CODE <u>66749</u>			<u>503</u>	<u>Ken Him</u>		
JOB TYPE <u>Longstring</u>	HOLE SIZE <u>6 3/4</u>	HOLE DEPTH <u>1190</u>	CASING SIZE & WEIGHT <u>4 1/2</u>			
CASING DEPTH <u>1189'</u>	DRILL PIPE	TUBING	OTHER			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>4 1/2 Plug</u>			
DISPLACEMENT <u>18.8</u>	DISPLACEMENT PSI	MIX PSI	RATE <u>4 BPM</u>			

REMARKS: Check casing depth w/wireline. Establish circulation
Mix Pump 180# Premium Gel Flush. Mix Pump 13 BRL
Tell tale dye. Follow with 155 sks Thickset Cement w/
5# Kol Seal 1/4# Flo Seal per sack. Flush pump & lines
clean. Displace 4 1/2" rubber plug to casing TD w/18.8
BRL Fresh water. Pressure to 700# PSI. Release
pressure to set float valve. Check plug depth w/wireline.

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE <u>Cement Pump</u>	<u>368</u>	<u>800.00</u>
5406	-0-	MILEAGE <u>Trucks on lease.</u>	<u>368</u>	<u>N/C</u>
5407A	<u>2.258 Ton</u>	<u>Ton Mileage</u>	<u>510</u>	<u>1165.52</u>
5407A	<u>5.029 Ton</u>	<u>Ton Mileage.</u>	<u>503</u>	<u>369.63</u>
5501C	<u>2 1/2 hrs</u>	<u>Transport</u>	<u>505-7106</u>	<u>245.00</u>
1126A	<u>147</u>	<u>Thickset Cement</u>		<u>2153.55</u>
1115B	<u>100#</u>	<u>Premium Gel</u>		<u>14.00</u>
1110A	<u>775#</u>	<u>Kol Seal</u>		<u>279.00</u>
1107	<u>39#</u>	<u>Flo Seal</u>		<u>70.20</u>
4404	<u>1</u>	<u>4 1/2" Rubber plug</u>		<u>40.00</u>
<u>Sub Total</u>				<u>4137.20</u>
<u>Tax @ 6.3%</u>				<u>161.07</u>
SALES TAX ESTIMATE				
TOTAL				<u>4298.27</u>

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AUTHORIZATION _____

TITLE WOT# 209806

DATE _____

CEMENTING WORK ORDER

CONSOLIDATED OIL WELL SERVICES, INC.
Phone (620) 431-9210 Chanute, Kansas 66720

DAY Monday
DATE 10/9/2006
Month / Day / Time

NAME OF CUSTOMER: Admiral bay

LEASE # Quinn WELL # #1-2

JOB DESCRIPTION cem

PIPE SIZE: 4 1/2 SIZE OF HOLE: 6 3/4

DEPTH OF WELL: 1190

TYPE OF RIG: AIR MUD

AMOUNT OF CEMENT NEEDED: 155 sks thickset

% OF GEL NEEDED: _____

MATERIALS: 147 sks thickset, 775# kolseal, 39# floseal
100# gel

TRUCKS: VAC TRANSPORT

LOCATION OF JOB

506-FM, 368-MM, 510-RB, 503-KH, 505/T106-MW

ORDER TAKEN BY: Jim Green

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