

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33342
Name: Blue Jay Operating LLC
Address: 4916 Camp Bowie Blvd., Suite 204
City/State/Zip: Fort Worth, TX 76107
Purchaser: Cherokee Basin Pipeline LLC
Operator Contact Person: Jens Hansen
Phone: (817) 546-0034
Contractor: Name: Cherokee Wells, LLC
License: 33539
Wellsite Geologist: NA

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. _____

12/21/05 1/4/06 1-4-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-205-26230-0000
County: Wilson
SW SW Sec. 2 Twp. 27 S. R. 12 East West
660 feet from S N (circle one) Line of Section
660 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Black Well #: A-1
Field Name: Cherokee Basin Coal Gas

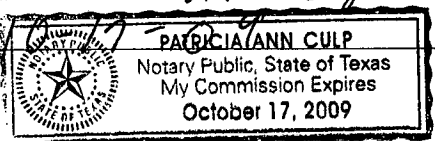
Producing Formation: _____
Elevation: Ground: 987.7' Kelly Bushing: _____
Total Depth: 1847' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 41' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from bottom casing
feet depth to surface w/ 200 sx cmt.

Drilling Fluid Management Plan
(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: _____ 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: _____ Date: 3-30-06
Subscribed and sworn to before me this 30 day of March
06
Notary Public: Patricia Ann Culp
Date Commission Expires: _____



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

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Operator Name: Blue Jay Operating LLC Lease Name: Black Well #: A-1
 Sec. 2 Twp. 27 S. R. 12 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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)
 List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Driller's Log Enclosed

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High Resolution Compensated Density/Neutron Log; Dual Induction Log

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 1/4"	8 5/8"	26#	41'	Portland	8	
Long String	6 3/4"	4 1/2"	10.5	1840'	Thick Set Cement	200	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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method			
		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <i>SIGW waiting on pipeline</i>			
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) SIGW - waiting on pipeline
 Production Interval

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Cherokee Wells, LLC

4916 Camp Bowie Blvd. Ste. 200 - Fort Worth, TX 76107

Contractor License # 33539

817-546-0034/ TX Office; 817-296-6541/Jens Hansen Cell; 817-624-1374/FAX

620-839-5581/ KS Office; 620-432-6170/Jeff Kephart Cell; 620-839-5582/FAX

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Rig #:	CW		Lic: 33342		S 2	T 27 S	R 12 E	
API #:	15-205-26230				Location:		SW SW	
Operator:	Blue Jay Operating LLC				County:		Wilson	
	4916 Camp Bowie Suite 204							
	Fort Worth, TX 76107							
Well #:	A-1	Lease Name:	Black		Gas Tests			
Location:	660 ft. from S	Line		Depth	Pounds	Orifice	flow - MCF	
	660 ft. from W	Line		1180	No Flow			
				1205	No Flow			
Spud Date:	12/21/2005			1280	1	1/4	8.95	
Date Completed:	1/4/2006	TD:	1847'	1480	2	1/4	12.7	
Driller:	Jeff Thompson			1505	Gas Check the Same			
Casing Record	Surface	Production						
Hole Size	11 1/4"	6 3/4"						
Casing Size	8 5/8"							
Weight	26#							
Setting Depth	41'							
Cement Type	Portland							
Sacks	8							
Feet of Casing	41'6"							
Rig Time and Work Performed								
1/3/2006	Replace hose start drilling 10:00 am							
	Bent single rod & radiator leaking on							
	Auxillary computer shut down at 11:30am & 1180'							
Well Log								
Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	2	Overburden	893	923	shale	1352	1476	sandy shale
2	9	lime	923	931	lime	1476	1477	coal
9	40	shale	931	1018	shale	1477	1497	Gray shale
40	43	lime	1018	1108	Pink lime	1497	1714	Mississippi lime
43	164	shale	1108	1110	coal	1580		a lot of water
164	202	lime	1110	1112	shale	1714	1723	Green shale
202	221	sand	1112	1146	lime	1723	1725	lime
221	359	sandy shale	1146	1155	shale	1725	1743	Green shale
359	424	lime	1155	1161	lime	1743	1764	lime
424	586	shale	1161	1170	shale	1764	1797	Gray shale
586	644	lime	1170	1185	lime	1797	1811	Black shale
600		Injured worker	1185	1191	shale	1811	1847	Arbuckle lime
644	681	sand	1191	1192	coal	1811	1817	oil
681	713	shale	1192	1262	shale	1841		water
713	858	lime	1192	1263	coal	1847		Total Depth
713	861	shale	1263	1343	sandy shale			
861	893	lime	1343	1352	sand			

06LA-010405-CW-001-Black-A-1-BJO

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CONSOLIDATED OIL WELL SERVICES, INC.

P.O. BOX 884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

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TREATMENT REPORT & FIELD TICKET

CEMENT

TICKET NUMBER

8094

LOCATION

Eureka

FOREMAN

Troy Strickler

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-6-06	1294	Black A-1	2	275	13E	Wilson
CUSTOMER Blue Jay Operating			Go-Joe			
MAILING ADDRESS 4916 Camp Bowie Blvd Ste 204			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Fortworth			463	Alan		
STATE TX			439	Justin		
ZIP CODE 76107						

JOB TYPE Long string HOLE SIZE 6 3/4 HOLE DEPTH 1847' CASING SIZE & WEIGHT 4 1/2 10.5 New
 CASING DEPTH 1840 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.00 SLURRY VOL 60RBbl WATER gal/sk 8° CEMENT LEFT in CASING 0'
 DISPLACEMENT 29 1/4 Bbl DISPLACEMENT PSI 1300 ~~MAX~~ PSI 1500 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2" casing. Break Circulation w/ 15 Bbl fresh water.
 Pump 10 Bbl Gel Flush - 20 RBbl Dry water mixed 200 sks Thick Set Cement w/ 5# Per/ft
 Kol-Seal @ 13.4# Per/ft, wash out Pump & lines. Shut down. Released Plug.
 Displaced w/ 29 1/4 Bbl Water. Final Pump 1300 PSI. Bump Plug to 1500 PSI
 Wait 2 mins Released Pressure. Plug Hold. Good Cement Returns to surface.
 7 Bbl Slurry to Pit.
 Job Complete P.s down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
5406	40	MILEAGE	3.15	126.00
1126A	200 sks	Thick Set Cement	13.65	2730.00
1110A	20 sks	Kol-Seal 5" Per/ft	17.75	355.00
1118A	4 sks	Gel Flush	7.00	28.00
5407		Ton Mileage Bulk Truck	111/c	275.00
44104	1	4 1/2" Top Rubber Plug	40.00	40.00
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Thank You!			Sub Total	4354.00
			6.3% SALES TAX	198.63
			ESTIMATED TOTAL	4552.63

AUTHORIZATION Bob McNew

TITLE _____

DATE _____