

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Prospect
Uniakaw

ORIGINAL

Operator: License # 32977
 Name: Dorado Gas Resources, LLC
 Address: 14550 E Easter Ave., Ste. 1000
 City/State/Zip: Centennial, CO 80112
 Purchaser: Seminole Energy
 Operator Contact Person: Steven Tedesco
 Phone: (303) 277-7016
 Contractor: Name: McGown Drilling
 License: 5786
 Wellsite Geologist: None
 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>4/10/05</u>	<u>4/11/05</u>	<u>P&A 4/18/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 011-23086-00-00
 County: Bourbon
 SE SW Sec. 20 Twp. 25 S. R. 22 East West
1981 feet from S N (circle one) Line of Section
679 feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Blythe Well #: 14-20
 Field Name: _____
 Producing Formation: _____
 Elevation: Ground: 902 Kelly Bushing: 905
 Total Depth: 664 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 640
 feet depth to surface w/ 115 sx cmt.

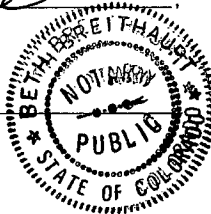
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JUN 06 2005
CONSERVATION DIVISION
WICHITA, KS

Drilling Fluid Management Plan AH II NCR 8-7-08
 (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: _____ 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: [Signature]
 Title: Sr. Petroleum Engineer Date: 6/3/05
 Subscribed and sworn to before me this 3rd day of June
20 05
 Notary Public: [Signature]
9-9-08



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

✓

X

Operator Name: Dorado Gas Resources, LLC Lease Name: Blythe Well #: 14-20
 Sec. 20 Twp. 25 S. R. 22 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: None	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input 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	8-5/8	24	20	Class A	5	None
Plug	6.75	2-3/8			Poz	115	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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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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)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) P&A

Production Interval _____

need ply Repair. Filled.

SOLIDATED OIL WELL SERVICES, INC.
 1 W. 14TH STREET, CHANUTE, KS 66720
 431-9210 OR 800-467-8676

TICKET NUMBER 2055
 LOCATION Ottawa
 FOREMAN Alan Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

ORIGINAL

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY			
4-18-05	6960	Blyght # 14-20	20	25	22	BB			
CUSTOMER Running Roxes		TRUCK #		DRIVER		TRUCK #		DRIVER	
BILLING ADDRESS 1550 E. Easter Ave Ste 1000		386		A Mader					
CITY Centennial		164		R Bob					
STATE Co		309		C Kennedy					
ZIP CODE 80112		144		I Gooding					
B TYPE <u>plug</u>		HOLE SIZE <u>6 3/4</u>		HOLE DEPTH <u>640</u>		CASING SIZE & WEIGHT <u> </u>			
CASING DEPTH <u> </u>		DRILL PIPE <u> </u>		TUBING <u>2 3/8</u>		OTHER <u> </u>			
CURRY WEIGHT <u> </u>		SLURRY VOL <u> </u>		WATER gal/sk <u> </u>		CEMENT LEFT in CASING <u> </u>			
DISPLACEMENT <u> </u>		DISPLACEMENT PSI <u> </u>		MIX PSI <u> </u>		RATE <u> </u>			

REMARKS: Established circulation down 2 3/8 tubing ran to 640'. Plugged well from bottom to top, in 3 stages, pulling 7 joints of tubing every time. Used 123 sx cement total. Well was left full to surface.

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405 A	1	PUMP CHARGE plug one well		750.00
5406	65	MILEAGE pump truck		159.25
5502 C	3	80 nac		240.00
5407 A		ten mileage		305.81
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1118 A	115	premium gel / S-3 gel		97.50
124	115	50/50 po2		851.00
6.3				
SALES TAX				53.61
ESTIMATED TOTAL				2457.17

TITLE

DATE