

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: Southeastern Kansas Pipeline
 Operator Contact Person: Rhonda Wilson
 Phone: (620) 378-3650
 Contractor: Name: Well Refined Drilling Co., Inc
 License: 33072
 Wellsite Geologist: n/a
 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. _____

10/12/06	10/16/06	11/22/06
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-26843-00-00
 County: Wilson
SW SW SE4 Sec. 29 Twp. 28 S. R. 15 East West
330 feet from (S) N (circle one) Line of Section
2310 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: V. Douglas Well #: A-3
 Field Name: Cherokee Basin Coal Gas
 Producing Formation: Mississippian
 Elevation: Ground: 898.39 Kelly Bushing: n/a
 Total Depth: 1237 Plug Back Total Depth: n/a
 Amount of Surface Pipe Set and Cemented at 38.7 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from bottom casing 1237
 feet depth to surface w/ 130 sx cmt.
Alt 2 - Dg - 9/29/08
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: Nancy Miller
 Title: ADMINISTRATIVE ASST Date: 12/6/06
 Subscribed and sworn to before me this 6th day of DECEMBER,
20 06.
 Notary Public: Rhonda Wilson
RHONDA WILSON
 Notary Public - State of Kansas
 Date Commission Expires: My Appt. Expires 9/8/2010

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
 KANSAS CORPORATION COMMISSION
DEC 12 2006

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Blue Jay Operating, LLC Lease Name: V. Douglas Well #: A-3
 Sec. 29 Twp. 28 S. R. 15 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 <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: Log Enclosed	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Log Enclosed
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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 5/8	26#	38.7	Portland	30	
Long String	6.75"	4 1/2	11.5#	1237	Thick Set Cement	130	

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		Depth
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify) _____

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 CONSERVATION DIVISION
 WICHITA, KS

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

TICKET NUMBER 10888
 LOCATION EUREKA
 FOREMAN Kevin McCoy

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
10-13-06	3070	V. Douglas A-3	29	285	15E	Wilson	
CUSTOMER		GATEWAY TITAN					
MAILING ADDRESS		P.O. Box 960					
CITY		Meeker					
STATE		OK					
ZIP CODE		74855					
TRUCK #		DRIVER		TRUCK #		DRIVER	
445		Justin					
441		Jerrid					

South River Resources
 4

JOB TYPE <u>Longstring</u>	HOLE SIZE <u>6 3/4</u>	HOLE DEPTH <u>1247'</u>	CASING SIZE & WEIGHT <u>4 1/2 11.50# New</u>
CASING DEPTH <u>1237</u>	DRILL PIPE _____	TUBING _____	OTHER _____
SLURRY WEIGHT <u>13.4#</u>	SLURRY VOL <u>39 BBL</u>	WATER gal/sk <u>8.0</u>	CEMENT LEFT in CASING <u>0'</u>
DISPLACEMENT <u>19.1 BBL</u>	DISPLACEMENT PSI <u>600</u>	MIX PSI <u>1100 Bump Plug</u>	RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2 casing. Break Circulation w/ 15 BBL Fresh water. Pump 4 sks Gel Flush, 10 BBL Dye water. Mixed 130 sks Thick Set Cement w/ 5# Kol-Seal per/sk @ 13.4# per/gal, yield 1.69. Wash out Pump & Lines. Shut down. Release Plug. Displace w/ 19.1 BBL Fresh water. Final Pumping Pressure 600 psi. Bump Plug to 1100 psi. Wait 2 minutes. Release Pressure. Float Held. Shut casing in @ 0 psi. Good Cement Returns to Surface = 8 BBL Slurry. Job Complete. Rig 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
1126 A	130 SKS	THICK Set Cement	14.65	1904.50
1110 A	650 #	KOL-SEAL 5# per/sk	.36 #	234.00
1118 A	200 #	Gel Flush	.14 #	28.00
5407	7.15 TONS	Ton Mileage Bulk TRUCK	MIC	275.00
4404	1	4 1/2 Top Rubber Plug	40.00	40.00
4129	1	4 1/2 Centralize	36.00	36.00
4161	1	4 1/2 AFU FLOAT Shoe	248.00	248.00
Sub Total				3691.50
SALES TAX			6.3%	156.90
ESTIMATED TOTAL				3848.40

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 KANSAS CORPORATION COMMISSION
 MAR 19 2008
 CONSERVATION DIVISION
 WICHITA, KS

THANK YOU

AUTHORIZATION Called By Gary Lestee TITLE South River Resources DATE _____