

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 Cherokee Wells 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., LLC  
 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. \_\_\_\_\_  

6/6/06	6/7/06	10/15/06
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-26475-00-00  
 County: Wilson  
 C SW SW Sec. 5 Twp. 28 S. R. 15  East  West  
660 feet from  S / N (circle one) Line of Section  
990 feet from E  W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE NW SW  
 Lease Name: Pierpoint Farms Inc Well #: A-2  
 Field Name: Cherokee Basin Coal Gas  
 Producing Formation: Mississippian  
 Elevation: Ground: Unknown Kelly Bushing: n/a  
 Total Depth: 1294 Plug Back Total Depth: n/a  
 Amount of Surface Pipe Set and Cemented at 26 Feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set \_\_\_\_\_ Feet  
 If Alternate II completion, cement circulated from bottom casing 1282  
 feet depth to surface w/ 140 sx cmt.  
AIT2-Dlg - 9/30/08

**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: Rhonda Wilson  
 Title: Office Manager Date: 12/11/06  
 Subscribed and sworn to before me this 11<sup>th</sup> day of December,  
2006.  
 Notary Public: Tracy Miller  
 Date Commission Expires: 12/1/2010

**TRACY MILLER**  
 Notary Public - State of Kansas  
 My Appt. Expires 12/1/2010

**KCC Office Use ONLY**

Letter of Confidentiality Received **RECEIVED**  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received **DEC 18 2006**  
 Geologist Report Received  
 UIC Distribution **KCC WICHITA**

Operator Name: Blue Jay Operating, LLC Lease Name: Pierpoint Farms Inc Well #: A-2  
 Sec. 5 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:  <b>Log Enclosed</b>	<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	11.25	8 5/8	26#	26	Portland	25	
Long String	6.75	4 1/2	9.5#	1282	Thick Set Cement	140	

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 <i>(Amount and Kind of Material Used)</i>		Depth

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
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

RECEIVED  
 DEC 18 2011  
 KCC WICHITA

CONSOLIDATED OIL WELL SERVICE, INC.  
 P.O. BOX 384, CHANUTE, KS 66720  
 620-431-9210 OR 800-467-8676

TICKET NUMBER 10125

LOCATION Evreksa

FOREMAN Russell McCoy

TREATMENT REPORT & FIELD TICKET  
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-9-06	3070	Pierpoint Farms A-2				Wilson
CUSTOMER Gateway Titan			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS P.O. Box 960			446 Scott			
CITY STATE ZIP CODE Meeker OK 74855			442 Rick P			
			437 ED			
			452/1103 Larry			

JOB TYPE barge string HOLE SIZE 6 3/4 HOLE DEPTH 1294 CASING SIZE & WEIGHT 4 1/2 9.5  
 CASING DEPTH 1282 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.3 SLURRY VOL 42 Bbl WATER gal/sk B CEMENT LEFT IN CASING 0'  
 DISPLACEMENT 20 3/4 Bbl DISPLACEMENT PSI 700\* MIX-POI Pump Plug 1200\* RATE \_\_\_\_\_

REMARKS: safety meeting. Rig up to 4 1/2 casing. Break circulation w/ 20 Bbl water mix 200# gel, 5 Bbl spacer, Pump 11 Bbl DyE water. Mix 140 SKs Thicket cement w/ 5# Kalsol at 13.3# Shut Down, wash out Pump + lines, Release Plug. Dis Place w/ 20 3/4 Bbl water Final pump PST was 700# Pump Plug to 200# Good cement Returns to Surface = 6 Bbl. Close casing in at 0 PST. Job complete, Tear Down.

Thank you  
 Russell McCoy

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	140 SK	Thicket Cement	14.65	2051.00
1110 A	700 #	Kalsol 5# P/10K	.36	252.00
1118 #	200 #	Gel - Flush	.14	28.00
5407		Tow mileage / Bulk Truck	m/l	275.00
5502 C	3 hrs	80 Bbl Vac Truck	90.00	270.00
5501 C	3 hrs	water Transport	98.00	294.00
1123	6,000 gallons	city water	12.80	76.80
4156	1	4 1/2 Flapper Type Flat Shoe	129.00	129.00
4129	1	4 1/2 Centralizer	29.00	29.00
4404	1	4 1/2 Tap Rubber Plug	40.00	40.00
		Sub Total		4370.80
		6.3%	SALES TAX	164.17
			ESTIMATED TOTAL	4,534.97

AUTHORIZATION called by Mike TITLE CO/REP DATE 6-9-06