

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1  
September 1999  
Form Must Be Typed

AMENDED

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: 33539  
License: Cherokee Wells LLC  
Wellsite Geologist: n/a

API No. 15 - 205-26168-00-00  
County: Wilson  
NW4 SE4 NE4 Sec. 10 Twp. 29 S. R. 14  East  West  
1500 feet from S  (circle one) Line of Section  
990 feet from  (circle one) E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Richardson Well #: A-4  
Field Name: Cherokee Basin Coal Gas  
Producing Formation: Mississippian  
Elevation: Ground: 867 Kelly Bushing: n/a  
Total Depth: 1282 Plug Back Total Depth: n/a  
Amount of Surface Pipe Set and Cemented at 40.4 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/ 140 sx cm.

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. \_\_\_\_\_  
4/11/06 4/12/06 7/26/06  
Spud Date or 4/11/06 Date Reached TD 4/12/06 Completion Date or 7/26/06  
Recompletion Date 4/11/06 4/12/06 7/26/06

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.: \_\_\_\_\_

DU 10-3-08

**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: 12/16/06  
Subscribed and sworn to before me this 16<sup>th</sup> day of DECEMBER,  
2006  
Notary Public: RHONDA WILSON  
My Appt. Expires 9/8/2010  
Date Commission Expires: \_\_\_\_\_

**RHONDA WILSON**  
Notary Public - State of Kansas  
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

Operator Name: Blue Jay Operating, LLC Lease Name: Richardson Well #: A-4  
 Sec. 10 Twp. 29 S. R. 14  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  <div style="text-align: center;"> <b>RECEIVED</b>  <b>KANSAS CORPORATION COMMISSION</b>  <b>DEC 12 2006</b>  <b>CONSERVATION DIVISION</b>  <b>WICHITA, KS</b> </div>
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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#	40"	Portland	8	
Long String	6.75	4 1/2	13.4#	1276	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

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

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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September 1999  
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Operator Contact Person: Rhonda Wilson  
Phone: (620) 378-3650  
Contractor: Name: Cherokee Wells, LLC  
License: 33539

Wellsite Geologist: N/A  
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. \_\_\_\_\_

4/11/06	4/12/06	7/12/06
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-26168-00-00  
County: Wilson  
NW SE NE Sec. 10 Twp. 29 S. R. 14  East  West  
1500 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: Richardson Well #: A-4  
Field Name: Cherokee Basin Coal Gas

Producing Formation: See Perforating Record  
Elevation: Ground: 867' Kelly Bushing: \_\_\_\_\_  
Total Depth: 1276' Plug Back Total Depth: N/A  
Amount of Surface Pipe Set and Cemented at 40' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from bottom casing 1276'  
feet depth to surface w/ 140 sx cmt.

Alt 2 - Dig - 10/3/08  
**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  
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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 Assistant Date: 11/9/06

Subscribed and sworn to before me this 9<sup>th</sup> day of NOVEMBER

20 06  
Notary Public: Rhonda Wilson

**RHONDA WILSON**  
Notary Public - State of Kansas  
My Appt. Expires 9/8/2010

**KCC Office Use ONLY**

N Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
Wireline Log Received \_\_\_\_\_  
Geologist Report Received RECEIVED  
UIC Distribution KANSAS CORPORATION COMMISSION  
**NOV 14 2006**

CONSERVATION DIVISION  
WICHITA, KS

Operator Name: Blue Jay Operating, LLC Lease Name: Richardson Well #: A-4  
 Sec. 10 Twp. 29 S. R. 14  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.

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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
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Long String	6.75"	4 1/2"	13.4	1276	Thick Set Cement	140	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 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
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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      **METHOD OF COMPLETION**      Production Interval

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

CONSOLIDATED OIL WELL SERVICE INC.  
 P.O. BOX 884, CHANUTE, KS 66720  
 620-437-9210 OR 800-467-8676

TICKET NUMBER **08664**

LOCATION **Fuick**  
 FOREMAN **Brad Butler**

**TREATMENT REPORT & FIELD TICKET  
 CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-13-06	3070	Richardson A-4				Wilson
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Mailing Address			446	Scott		
CITY			441	Colin		
STATE						
ZIP CODE						
Meeker						
OK						
74855						

JOB TYPE Logging HOLE SIZE 6 3/4" HOLE DEPTH 1282' CASING SIZE & WEIGHT 4 1/2"  
 CASING DEPTH 1276' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.4 SLURRY VOL 42 Bbl WATER gal/sk 8.0 CEMENT LEFT in CASING 0'  
 DISPLACEMENT 20 Bbls DISPLACEMENT PSI 800 PSI 1200 Bump Plug RATE \_\_\_\_\_

REMARKS: Safety Meeting. Rig up to 4 1/2" casing. Break circulation with 20 Bbls water. 10 of Full Pump 10 Bbl Gel Flush, 10 Bbl Dye water. Mixed 140 sks Thick set cement / 5" PYSK of KOL-SEAL @ 13". Shut down. Wash out pump lines. Release Plug. Displace Plug with 20 Bbls water. Final pumping @ 800 PSI. Bumped Plug to 1200 PSI - wait 2 min. Release Pressure. Float held close casing with OPST. Good cement returns to surface with 9 Bbl slurry. Job complete - Tear down

Thank you

ACCOUNT CODE	QUANTITY of UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
5406	0	MILEAGE 2nd Well of	3.15	N/C
1126A	140 SKS	Thick Set cement	14.65	2051.00
1110A	700 lbs	KOL-SEAL 5" PYSK	36.00	2520.00
1118A	200 lbs	Gel Flush	14.00	2800.00
5407	Ten	Mileage - Bulk Truck	m/c	275.00
4161	1	4 1/2" AFU Float shoe	146.00	146.00
4129	1	4 1/2" Centralizers	29.00	29.00
4404	1	4 1/2" Top Rubber Plug	40.00	40.00
			6.37%	SALES TAX 160.40
				ESTIMATED TOTAL 3781.40

RECEIVED  
 KANSAS CORPORATION COMMISSION  
 MAR 19 2008  
 CONSERVATION DIVISION  
 WICHITA, KS

THORIZATION \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_