

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

*Ken
12/12/08*

Operator: License # 33583
Name: Admiral Bay (USA) Inc.
Address: 7060 B S. Tucson Way
City/State/Zip: Centennial, CO 80112
Purchaser: _____
Operator Contact Person: Chris Ryan
Phone: (303) 350-1255
Contractor: Name: HAT Drilling
License: 33734

Wellsite Geologist: Chris Ryan
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. _____

6/2/2008	6/4/2008	waiting on pipeline
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 099244210000
County: Labette
SE SW Sec. 4 Twp. 33 S. R. 18 East West
660 feet from S N (circle one) Line of Section
1980 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Thompson Well #: 14-4
Field Name: Cherokee Basin Coal Area

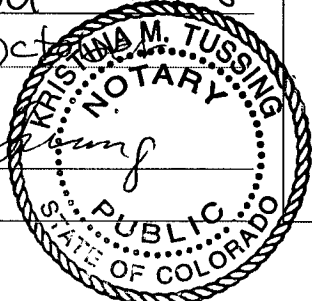
Producing Formation: Cherokee Coals
Elevation: Ground: 809 Kelly Bushing: 809
Total Depth: 954 Plug Back Total Depth: 940
Amount of Surface Pipe Set and Cemented at 21 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 0
feet depth to 940 w/ 100 sx cmt.

Drilling Fluid Management Plan *Ait II nr*
(Data must be collected from the Reserve Pit) *12-19-08*
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used air dry
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: Business Mgr. Date: Oct 19/08
Subscribed and sworn to before me this 20th day of Oct
2008
Notary Public: [Signature]
Date Commission Expires: 5-22-11



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____

Wireline Log Received
 Geologist Report Received
 UIC Distribution

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OCT 21 2008
CONSERVATION DIVISION
WICHITA, KS

Side Two

Operator Name: Admiral Bay (USA) Inc. Lease Name: Thompson Well #: 14-4
 Sec. 4 Twp. 33 S. R. 18 East West County: Labette

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 <input checked="" type="checkbox"/> Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction Compensated Density - Neutron Porosity	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Cherokee</td> <td>380</td> <td>gl</td> </tr> <tr> <td>Mississippian</td> <td>850</td> <td>gl</td> </tr> </table>	Name	Top	Datum	Cherokee	380	gl	Mississippian	850	gl
Name	Top	Datum								
Cherokee	380	gl								
Mississippian	850	gl								

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"	8.625"	24	21	portland	6	
production	6.75"	4.5"	10.5	940	owc	100	200#gel, 500#ko/seal

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
	not completed, waiting on pipeline		
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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) _____

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

Revised June 27, 2008 - 8:11 AM No. 4482
 TICKET NUMBER **11892**

LOCATION B-villa
 FOREMAN Jason Bill

TREATMENT REPORT & FIELD TICKET
 CEMENT #5

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-26-08	1067	Thompson 4-14-4				Lab.
CUSTOMER Admiral Bay						
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
			492	Tom		
			486	Jack		
CITY			403 T64	James K		
STATE			454 T90	Sam G		
ZIP CODE						

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH 954 CASING SIZE & WEIGHT _____
 CASING DEPTH 940.1 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.8 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 14.9 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Ran 4 sks of gel established circulation, Ran 100 sks o.w.c. shut down washed up behind plug. Pumped displacement and set shoe, knock loose and washed up.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE		925.00	
5406	15	MILEAGE		54.75	
5407	5.67	for mileage		374.22	
5402	940.1	footage		188.02	
5501c	2 x 3 hrs	transport		672.00	
1126	1000 lb o.w.c.	O.W.C.		1700.00	
1107a	80 #	Pleno		92.00	
1186	200 #	Gel		34.00	
1110A	500 #	Kolsal		210.00	
4404	1	4 1/2 Plug		45.00	
				SALES TAX	136.32
				ESTIMATED TOTAL	4431.31

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AUTHORIZATION [Signature] TITLE 223056 DATE _____