

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
October 2008  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

OPERATOR: License # 33583  
Name: Admiral Bay (USA) Inc.  
Address 1: 7060 B South Tucson Way  
Address 2: \_\_\_\_\_  
City: Centennial State: CO Zip: 80112 + \_\_\_\_\_  
Contact Person: Chris Ryan  
Phone: ( 303 ) 350-1255  
CONTRACTOR: License # 33734  
Name: HAT Drilling LLC  
Wellsite Geologist: Chris Ryan  
Purchaser: Seminole Energy Services  
Designate Type of Completion:  
 New Well     Re-Entry     Workover  
 Oil     SWD     SIOW  
 Gas     ENHR     SIGW  
 CM (Coal Bed Methane)     Temp. Abd.  
 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.     Conv. to SWD  
 Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled    Docket No.: \_\_\_\_\_  
 Dual Completion    Docket No.: \_\_\_\_\_  
 Other (SWD or Enhr.?)    Docket No.: \_\_\_\_\_  
4-10-09    5-6-09    6-24-09  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

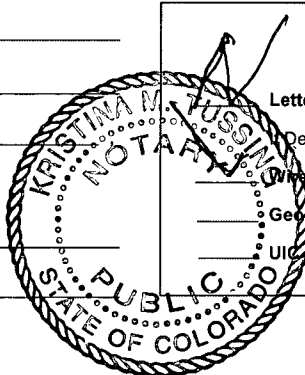
API No. 15 - 099-24551-00-00  
Spot Description: \_\_\_\_\_  
SE NE NE Sec. 1 Twp. 33 S. R. 18  East  West  
1155 Feet from  North /  South Line of Section  
330 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Labette  
Lease Name: Hinkle Well #: 1-1  
Field Name: Mound Valley  
Producing Formation: Cherokee Coals  
Elevation: Ground: 840 Kelly Bushing: \_\_\_\_\_  
Total Depth: 888 Plug Back Total Depth: 886  
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: 888  
feet depth to: surface w/ 200 sx cmt.

Drilling Fluid Management Plan AH II NR 8-12-09  
(Data must be collected from the Reserve Pit)  
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: VP Business Development Date: July 23, 2009  
Subscribed and sworn to before me this 23rd day of July  
20 09  
Notary Public: [Signature]  
Date Commission Expires: 5-22-11



KCC Office Use ONLY

Letter of Confidentiality Received  
Denied, Yes  Date: \_\_\_\_\_  
Wireline Log Received  
Geologist Report Received  
UIC Distribution

KANSAS CORPORATION COMMISSION

JUL 27 2009

RECEIVED

Operator Name: Admiral Bay (USA) Inc. Lease Name: Hinkle Well #: 1-1  
 Sec. 1 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 Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run: Gamma Ray Compensated Density Neutron	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Mississippian</td> <td>784'</td> <td>GL</td> </tr> <tr> <td>Excello</td> <td>307'</td> <td>GL</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Mississippian	784'	GL	Excello	307'	GL
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample											
Name	Top	Datum											
Mississippian	784'	GL											
Excello	307'	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	17#	21	portland	6	
Production	6.75	5.5	11.6	886	owc	200	gel, H2O

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
4	772-774	80 bbls acid	

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TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. _____		Producing Method: <input type="checkbox"/> Flowing <input checked="" 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: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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41-000539

Hinkle-1

**BREAK THROUGH**

COMPANY <b>LINN ENERGY</b>		FACILITY <b>Clinton</b>		API Number	DATE <b>April 15, 2009</b>
CONTRACTOR <b>WORK OVER RIG</b>		TOWN <b>NEWKIRK</b>	STATE <b>OK</b>	LEGAL DESCRIPTION	
LEASE / WELL NUMBER		Ticket Number <b>41-000538</b>	COUNTY <b>PAWNEE</b>	MILEAGE ONE WAY <b>100</b>	

DIRECTIONS  
**CLEVELAND: HWY 99 NORTH TO JCT 60 WEST TO JCT 77. NORTH ON 77 TO NEWKIRK. CALL CUSTOMER HE WILL LEAD TO LOCATION.**

Pumping Services	<input type="checkbox"/> Surface <input type="checkbox"/> Intermediate <input type="checkbox"/> Longstring <input type="checkbox"/> Plug Back <input type="checkbox"/> Liner <input checked="" type="checkbox"/> Squeeze <input type="checkbox"/> Acid <input type="checkbox"/> PTA <input type="checkbox"/> Other <input type="checkbox"/> H2S								
	Casing Size/Weight <b>5.5 / 17#</b>	Thread <b>8RD</b>	Tbng/DP Size <b>2 7/8</b>	Thread <b>8RD</b>	Plug. Cont.	Swage <b>X</b>	Top Plug	Bottom Plug	% Excess
	Number and Type Units <b>1 PUMP TRUCK - 1 BULK TRUCK</b>						BHST	BHCT	Hole Size
	Remarks <b>HAVE A SAFE JOB!</b>						Depth-TMD <b>1,800</b>	Depth-TVD <b>1800</b>	Mud Weight/Type <b>9.0 KCL WATER</b>

Cementing Materials	CEMENT	# of Sacks <b>200</b>	Type <b>STANDARD</b>	Additives <b>3% CALCIUM CHLORIDE</b>	
		Weight PPG <b>15.6</b>	Yield Ft <sup>3</sup> /Sk <b>1.20</b>	Water Gal/Sk <b>5.24</b>	
		# of Sacks	Type	Additives	
		Weight PPG	Yield Ft <sup>3</sup> /Sk	Water Gal/Sk	
		# of Sacks	Type	Additives	
		Weight PPG	Yield Ft <sup>3</sup> /Sk	Water Gal/Sk	
		# of Sacks	Type	Additives	
		Weight PPG	Yield Ft <sup>3</sup> /Sk	Water Gal/Sk	
		Spacer or Flush <b>5 BB</b>	Quantity <b>5 BB</b>	Type <b>PRO SPACER</b>	REMARKS
		Spacer or Flush	Quantity	Type	Additives
Other	Quantity	Type	Additives		

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Sales Items	Casing Size	Casing Weight	Thread	
	Guide Shoe	Float Shoe	Float Collar	Insert Float Valve
	Centralizers - Number	Size	Type	
	Well Cleaners - Number	Type	MSC (DV Tool)	MSC Plug Set
	Limit Clamps	Weld-A	Other	
	Remarks			

Customer Rep. <b>ROBERT BARNES</b>	Phone Number <b>918-798-0035</b>	Fax	Time of Call <b>Wednesday, April 15, 2009</b>
Call Taken By <b>STEVE APIGO</b>		Time Ready <b>Wednesday, April 15, 2009</b>	