

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 32912
Name: Carroll Energy, LLC
Address: 200 Arco Place - Suite 230 - Box 149
City/State/Zip: Independence, KS 67301
Purchaser: _____
Operator Contact Person: Tim Carroll
Phone: (620) 332-1600
Contractor: Name: Kand Drill, Inc.
License: 32548
Wellsite Geologist: _____

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. _____

<u>6/19/2007</u>	<u>7/1/2007</u>	<u>7/2/2007</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-019-26816-00-00
County: Chautauqua
NW NW NE Sec. 10 Twp. 32S R. 11E East West
330 feet from S / (circle one) Line of Section
2280 feet from W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: HUDSON AB Well #: 10-C1

Field Name: NA

Producing Formation: Cherokee Coals

Elevation: Ground: 1130 Kelly Bushing: _____

Total Depth: 2114 Plug Back Total Depth: 2104

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 2104
feet depth to _____ w/ 135 sx cmt.

Alt 2-Dlg - 11/4/09

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: _____

Title: Vice Operating Manager Date: 10/7/2007

Subscribed and sworn to before me this 07 day of October

20 07

Notary Public: Chelsea L. Carr

Date Commission Expires: 3-28-2011

CHELSEA L. GARR
Notary Public - State of Kansas
My Appt. Expires 3-28-2011

KCC Office Use ONLY

- Letter of Confidentiality Received
- If Denied, Yes Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 19 2007

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Carroll Energy, LLC Lease Name: HUDSON AB Well #: 10-C1

Séc. 10 Twp. 32S S. R. 11E East West County: Chautauqua

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

Log Formation (Top), Depth and Datum Sample

Name Top Datum

See Attached

List All E. Logs Run:
 Density Nuutron

CASING RECORD <input 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"	8.625	32	40	Portland	12	
Production	6 3/4"	4 1/2	10.5	2104	OWC	135	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
..... Perforate				
..... Protect Casing				
..... Plug Back TD				
..... 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

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 Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval

RECEIVED
 KANSAS CORPORATION COMMISSION

OCT 19 2007

CONSERVATION DIVISION
 CHITA, KS

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

TICKET NUMBER 09624
 LOCATION Burkheadwell
 FOREMAN Coop

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-2-07		AD Hudson #10-C1				CO
CUSTOMER Z.L. Curral			TRUCK #		DRIVER	
MAILING ADDRESS			419		Andy	
CITY			407		Ross	
STATE			235		Travis	
ZIP CODE						

JOB TYPE L.S. HOLE SIZE 6 7/8 HOLE DEPTH 2114 CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 2111 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 131/139 SLURRY VOL 1824 cu ft WATER gal/sk _____ CEMENT LEFT in CASING -0-
 DISPLACEMENT 33.5 DISPLACEMENT PSI 150-400 MIX PSI 150 RATE 4.5 BPM

REMARKS: Pumped 20 Bbl ahead, pumped 95 lbs lead cement 8% gel 4 1/2" F.L. + 135 lbs DWC, finished pump + lines displaced plug to bottom, set shoe, shut in.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		840.00
5406	65	MILEAGE		214.50
5402	2111	Footage		379.98
5402A	1	Ten exchange		722.92
5502L	6hr	RD Vac		540.00
1104	8,930#	Cement		1160.90
1109A	160#	Phos Seal		168.00
1118B	900#	Gel		135.00
1126	135lbs	DWC cement		2029.00
1123	2500, 1	Coly Water		3200
4404	1	4 1/2 Rubber Plug		40.00
			SALES TAX	222.75
			ESTIMATED TOTAL	16590.05

AUTHORIZATION [Signature] TITLE # 214529 DATE _____

RECEIVED
 KANSAS CORPORATION COMMISSION
 OCT 19 2007
 CORPORATION DIVISION
 WICHITA, KS

Geolograph Mining Services Chart

CHANGE CHARTS AT 8:00 A.M. AND 8:00 P.M.

OPERATOR Carrall & Nequy, Inc.

NO. 10-31 LEASE Hudson RR

LOC. SEC. 10 T. 32 R. 11E

COUNTY Chautauqua STATE Kansas

DATE ON: _____ T. D. OFF _____

TIME ON: 8 A.M. 8 P.M. T. D. ON _____

DR'L G TIME	DR'LG OPERATIONS
8:00	
05	
10	
15	
20	
25	
30	
35	
40	
45	
50	
55	
9:00	
05	
10	
15	
20	
25	
30	
35	
40	
45	
50	
55	
10:00	
05	
10	
15	
20	
25	
30	
35	
40	
45	
50	
55	
11:00	
05	
10	
15	
20	
25	
30	
35	

Set 40'
8 5/8" pipe
Cement BY
Hand 12 SK

Wipe up
Drill ahead

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 19 2007

REGISTRATION DIVISION
WICHITA, KS