

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 33344

Name: Quest Cherokee, LLC

Address: P O Box 100

City/State/Zip: Benedict, KS 66714

Purchaser: Bluestem Pipeline, LLC

Operator Contact Person: Douglas L. Lamb

Phone: (620) 698-2250

Contractor: Name: WELL REFINED DRILLING COMPANY

License: 33072

Wellsite Geologist: MARK BRECHEISEN

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. _____

05-04-2004	05-05-2004	05-17-2004
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

RECEIVED
KANSAS CORPORATION COMMISSION
OCT 15 2004
CONSERVATION DIVISION
WICHITA, KS

API No. 15 - 133-26070-00-00

County: NEOSHO

NE SW Sec. 10 Twp. 30 S. R. 18 East West

1980 feet from S / N (circle one) Line of Section

1830 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: RISSEN Well #: 10-1

Field Name: CHEROKEE BASIN CBM

Producing Formation: MULKY/SUMMIT

Elevation: Ground: 905 Kelly Bushing: _____

Total Depth: 1079 Plug Back Total Depth: 1064.95

Amount of Surface Pipe Set and Cemented at 21.6 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1064.95

feet depth to SURFACE w/ 143 sx cmt.

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: *Douglas L. Lamb*

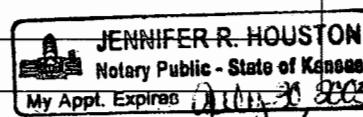
Title: Manager Date: 10/04/04

Subscribed and sworn to before me this 4th day of October,

2004.

Notary Public: Jennifer R. Houston

Date Commission Expires: July 30, 2005



KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ORIGINAL

Operator Name: Quest Cherokee, LLC Lease Name: RISSEN Well #: 10-1
 Sec. 10 Twp. 30 S. R. 18 East West County: NEOSHO

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Lenapah Lime	334' +571'
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Altamont Lime	550' +355'
RECEIVED List All E. Logs Run: <u>KANSAS CORPORATION COMMISSION</u> DUAL INDUCTION LOG COMP. DENSITY NEUTRON LOG GAMMA RAY CONSERVATION DIVISION WICHITA, KS		Pawnee Lime	485' +420'
OCT 15 2004		Oswego Lime	562' +343'
		Verdigris Lime	700' +205'
		Mississippi Lime	1031' -126'

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 1/4	8-5/8"	24.75#	21.6	"A"	5	
Production	6 3/4	4-1/2"	10.5#	1064.95	"A"	143	

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives	

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)		
4	583-587			150 SX SAND 630 BBLs K CL WATE 583-587		
4	596-599					

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8	666'			

Date of First, Resumed Production, SWD or Enhr. <u>07-03-2004</u>		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	
		40.58	52				

Disposition of Gas	METHOD OF COMPLETION			Production Interval			
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled _____			<input type="checkbox"/> Other (Specify) _____			