

COPY

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 30451

Name: KanMap, Inc.

Address: 2101 W. Maple

City/State/Zip: Independence, KS 67301

Purchaser: Cherokee Methane Corp.

Operator Contact Person: Vance K. Cain

Phone (316) 331-3140

Contractor: Name:

License:

Wellsite Geologist:

Designate Type of Completion

 New Well Re-Entry Workover

<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> SWD	<input type="checkbox"/> SIOW	<input type="checkbox"/> Temp. Abd.
<input type="checkbox"/> Gas	<input type="checkbox"/> ENHR	<input type="checkbox"/> SIGN	
<input type="checkbox"/> Dry	Other (Core, WSW, Expl., Cathodic, etc)		

If Workover/Re-Entry: old well info as follows:

Operator: Unknown

Well Name: Unknown

Comp. Date: 11-30-76 Jld Total Depth: 1332

<input checked="" type="checkbox"/> Deepening	<input checked="" type="checkbox"/> Re-perf.	<input type="checkbox"/> Conv. to Inj/SWD
<input type="checkbox"/> Plug Back	1004	PBTD
Commingled	Docket No. _____	
Dual Completion	Docket No. _____	
Other (SWD or Inj?)	Docket No. _____	

Unknown 11-30-80 04-24-94

Spud Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 on 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.

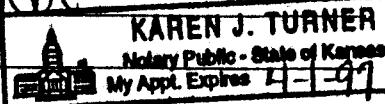
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Vance K. Cain

Title: President Date: 7-5-94

Subscribed and sworn to before me this 5th day of July, 1994.Notary Public: Karen J. Turner

Date Commission Expires: 4-1-97



API NO. 15-

County: Montgomery

SE NE SW Sec. 12 Twp. 33S Rge. 16E

1300 Feet from S/N (circle one) Line of Section

3375 Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE, SE, NW or SW (circle one)

Lease Name: Clark Well # 1

Field Name: Coffey-Cherry

Producing Formation: Weir Coal

Elevation: Ground 850 KB

Total Depth 1004 PBTD

Amount of Surface Pipe Set and Cemented at Unknown Fee

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Fee _____

If Alternate II completion, cement circulated from 1332

feet depth to Surface w/ 170 ex cmt

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbl

Dewatering method used _____

Location of fluid disposal if hauled offsite:

Operator Name: *RECEIVED
KANSAS CORPORATION COMMISSION
NOV 10 1994*

Lease Name: _____ License No. _____

Quarter: _____ Sec. _____ Twp. _____ S Rng. _____ E/W _____

County: _____ Docket No. _____

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

F Wireline Log Received

F Geologist Report Received

Distribution:

<input checked="" type="checkbox"/> SWD/Rep	<input type="checkbox"/> Plug
<input checked="" type="checkbox"/> KGS	<input type="checkbox"/> Other

<input type="checkbox"/> (Specify)

23545

SIDE TWO

9-1-EE-4

Lease Name Clark Well # 1
 Sec. 12 Twp. 33S Rge. 16E East West
 County Montgomery

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken
(Attach Additional Sheets.)

Yes No

Samples Sent to Geological Survey

Yes No

Cores Taken

Yes No

Electric Log Run
(Submit Copy.)

Yes No

List All E.Logs Run:

Gamma Ray- Sonic Bond Log

Log Formation (Top), Depth and Datums

Sample

Name	Top	Datum
Pawnee Ls	494	356
Peru Ss	548	302
Fort Scott Ls	584	266
Mulky Coal	640	210
Weir Coal	844	+ 6

CASING RECORD

New 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	9.5"	7"	15	40'	Portland	9	
Production	6.25"	4.5"	10.5	1332	Portland A	170	2 sx Flose 5 sx Gel 1sx Hulls

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate				
Protect Casing	546	557	Portland A	20
Plug Back To				
X 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	844-848	A/50 gal 15% HCl	84
	Set Bridge Plug @ 1004' (CIBP)	Frac 160 sx 20/40 Ottawa Sand	
		30,000 gal fresh water	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2.375"	900	none		

Date of First, Resumed Production, SWD or Inj.	Producing Method	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Expl.)
7-15-94		

Estimated Production Per 24 Hours	Oil Bbls.	Gas 20	Hcf	Water 20	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. Casingaled

Production Interval

844-848