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

Operator: License # 30451
Name: KanMap. Inc.
Address: P.O. Box 706
City/State/Zip: Independence, KS 67301
Purchaser: Cherokee Methane Corporation
Operator Contact Person: Mike McKenzie
Phone: ( 620 ) 331-3140 Cell 620-330-0787
Contractor: Name: MOKAT Drilling
License: 05831
Wellsite Geologist: none
Designate Type of Completion:
✓ New Well ____ Re-Entry ____ Workover
____ Oil ____ SWD ____ SIOW ____ Temp. Abd.
✓ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

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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.

| 10-25-03 | 10-27-03 | 12-30-03 |
|---|---|---|
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 125-30426 -00-00
County: Montgomery County
C SW SE Sec. 13 Twp. 33 S. R. 16 ✓ 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: Knisley Well #: 15-12
Field Name: Coffeyville-Cherryvale
Producing Formation: Weir Coal
Elevation: Ground: 890' Kelly Bushing:
Total Depth: 1167' Plug Back Total Depth:
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 surface
feet depth to 1169' w/ 145 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:
Title: Project Manager Date: 5-17-04

Subscribed and sworn to before me this 17th day of May
20 04 .

Notary Public: Daleen J. Steele

Date Commission Expires: 12-3-2004

DALEEN J. STEELE
NOTARY PUBLIC
My Appt. Exp. 12-3-2004
STATE OF KANSAS

**KCC Office Use ONLY**
____ Letter of Confidentiality Received
If Denied, Yes ☐ Date:
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

5c9918

*Side Two*

Operator Name: KanMap. Inc. Lease Name: Knisley Well #: 15-12

Sec. 13 Twp. 33 S. R. 16 ☑ East ☐ West County: Montgomery County

**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) ☐ 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:

Dual Induction
Dual Compensatied Porosity Log
Gamma Ray Cement Bond Log

☑ Log Formation (Top), Depth and Datum ☐ Sample

| Name | Top | Datum |
|---|---|---|
| Ft. Scott | 616 | +274 |
| Weir Coal | 880 | +10 |
| Riverton Coal | 1101 | -211 |
| Mississippi Lime | 1116 | -226 |

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 | 12 3/4" | 8 5/8" | 23.0# | 21.6 | Portland | 4 | |
| Production | 6 7/8" | 4 1/2" | 10.5 # | 1169' | 40/60 Poz | 145 | 5% gilsonite,%salt,2%gel, flow seal |
| | | | | | | | |

ADDITIONAL CEMENTING / SQUEEZE RECORD

| Purpose: ___ Perforate ___ Protect Casing ___ Plug Back TD ___ 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) | Depth |
|---|---|---|---|
| 4 | 887-893 | 350 gal 15% HCL,4200# 16/30 sand,1600# 12-20 SD,363 bbls slick water 7# and 1% KCl | 887-893 |
| | | | |
| | | | |
| | | | |
| | | | |

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| TUBING RECORD Size | Set At | Packer At | Liner Run |
|---|---|---|---|
| 2 3/8" | 778 | | ☐ Yes ☑ No |

| Date of First, Resumerd Production, SWD or Enhr. | Producing Method |
|---|---|
| 12-30-03 | ☐ Flowing ☑ Pumping ☐ Gas Lift ☐ Other (Explain) |

| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
|---|---|---|---|---|---|
| | | 30 | 52 | | |

Disposition of Gas METHOD OF COMPLETION Production Interval

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

☐ Open Hole ☑ Perf. ☐ Dually Comp. ☐ Commingled _____

☐ Other (Specify) _____