

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

**CONFIDENTIAL**

**ORIGINAL**

Operator: License # 32219  
Name: Production Maintenance Service  
Address: 3922 CR 1250 (RR #1 Box 227)  
City/State/Zip: Coffeyville, KS 67337  
Purchaser: Cherokee Methane  
Operator Contact Person: Mike McClenning  
Phone: (620) 988-0042  
Contractor: Name: MOKAT Drilling  
License: 5831  
Wellsite Geologist: none

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  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. \_\_\_\_\_

10/31/03 11/3/03 11/5/03  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 125-30403-00-00  
County: Montgomery  
        N/2 SE/4 Sec. 29 Twp. 33 S. R. 16  East  West  
1820 feet from (S) N (circle one) Line of Section  
2310 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE (SE) NW SW  
Lease Name: Buchanan Well #: 1

Field Name: Cherokee Basin CBM  
Producing Formation: Coal  
Elevation: Ground: 800 Kelly Bushing: \_\_\_\_\_  
Total Depth: 1203 Plug Back Total Depth: na  
Amount of Surface Pipe Set and Cemented at 69'6" Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from 1185  
feet depth to 0 w/ 150 class A sx cm.

**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:  Pamela J. McClenning   
Title:  Owner  Date:  2/10/04   
Subscribed and sworn to before me this  10th  day of  February ,  
20  04 .  
Notary Public:  Donna R. Johnson   
Date Commission Expires:  10-07-05

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

**DONNA R. JOHNSON**  
Notary Public - State of Kansas  
My Appt. Expires 10-07-05

X