

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL 9/10/09

Form ACO-1  
September 1999  
Form Must Be Typed

Operator: License # 33539  
Name: Cherokee Wells, LLC  
Address: P.O. Box 296  
City/State/Zip: Fredonia, KS 66736  
Purchaser: Southeastern Kansas Pipeline  
Operator Contact Person: Tracy Miller  
Phone: (620) 378-3650  
Contractor: Name: Well Refined Drilling  
License: 33072  
Wellsite Geologist: N/A

KCC  
SEP 10 2007  
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Designate Type of Completion:  
 New Well    Re-Entry    Workover  
 Oil    SWD    SLOW    Temp. Abd.  
 Gas    ENHR    SIGW  
 Dry    Other (Core, WSW, Expt., 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. \_\_\_\_\_

5/16/07    5/17/07  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 205-27187-0000  
County: Wilson  
SE SE SW    Sec. 16    Twp. 28    S. R. 14     East  West  
335    feet from S / N (circle one) Line of Section  
2260    feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: J. Shinn    Well #: A-1  
Field Name: Cherokee Basin Coal Gas Area

Producing Formation: N/A  
Elevation: Ground: est. 990'    Kelly Bushing: N/A  
Total Depth: 1405'    Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 40' 8"    Feet  
Multiple Stage Cementing Collar Used?     Yes  No  
If yes, show depth set    Feet  
If Alternate II completion, cement circulated from bottom casing  
feet depth to surface    w/ 150    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: Sharon Stubbs  
Title: Administrative Assistant    Date: 9/10/07

Subscribed and sworn to before me this 10 day of September 2007

Notary Public: Tracy Miller  
Date Commission Expires: \_\_\_\_\_

TRACY MILLER  
Notary Public - State of Kansas  
My Appt. Expires 12/1/2010

KCC Office Use ONLY  
Y Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
Wireline Log Received - Logs reviewed will send later  
Geologist Report Received  
UIC Distribution  
SEP 11 2007