

ORIGINAL

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

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: Doug Lamb
Phone: (620) 698-2250
Contractor Name: James D. Lorenz
License: 9313
Wellsite Geologist: Michael L. Ebers

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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, 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. _____

01/21/2004 01/22/2004 01/26/2004
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 205-25701-0000
County: Wilson
SW SW NE NE Sec. 3 Twp. 28 S. R. 16 East West
1300 feet from S / (N) (circle one) Line of Section
1100 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: Campbell Well #: 3-1
Field Name: Cherokee Basin CBM

Producing Formation: Not yet complete

Elevation: Ground: 1020 Kelly Bushing: _____

Total Depth: 1288' Plug Back Total Depth: 1285'

Amount of Surface Pipe Set and Cemented at 24 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1285
feet depth to Surface w/ 169 sx cmt.

Drilling Fluid Management Plan ALT #2 KGR 5/30/07
(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: 05/19/2004
Subscribed and sworn to before me this 19th day of May,
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

JENNIFER R. HOUSTON
Notary Public - State of Kansas
My Appt. Expires July 30, 2005

Operator Name: Quest Cherokee, LLC Lease Name: Campbell Well #: 3-1
 Sec. 3 Twp. 28 S. R. 16 East West County: Wilson

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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Lenapah Lime	611	+409
Altamont Lime	643	+377
Pawnee Lime	754	+266
Oswego Lime	811	+209
Verdegris	925	+95
Mississippi	1228	-208

List All E. Logs Run:

Density-Neutron
 Dual Induction - Guard

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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	11"	8-5/8"	24.75	24'	"A"	6sx	
Production	6-3/4"	4-1/2"	6.5	1285'	"A"	169sx	

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> 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
None	Waiting on Pipeline		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input 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

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 32728
 LOCATION CHANUTE
 FOREMAN TODD A. TINDLE

TREATMENT REPORT

DATE <i>1-26-04</i>	CUSTOMER # <i>6628</i>	WELL NAME <i>#3-1 CAMPBELL</i>	FORMATION
SECTION <i>3</i>	TOWNSHIP <i>28</i>	RANGE <i>16</i>	COUNTY <i>WL</i>
CUSTOMER <i>QUEST CHEROKEE LLC</i>			
MAILING ADDRESS <i>P.O. BOX 100</i>			
CITY <i>BENEDICT</i>			
STATE <i>KANSAS</i>		ZIP CODE <i>66714</i>	
TIME ARRIVED ON LOCATION			

TRUCK #	DRIVER	TRUCK #	DRIVER
<i>255</i>	<i>HERB</i>		
<i>103</i>	<i>WES</i>		
<i>140</i>	<i>TIM</i>		
<i>286</i>	<i>WILL</i>		

WELL DATA	
HOLE SIZE <i>6 3/4</i>	PACKER DEPTH
TOTAL DEPTH 1285 <i>1285</i>	PERFORATIONS
	SHOTS/FT
CASING SIZE <i>4 1/2</i>	OPEN HOLE
CASING DEPTH <i>1285</i>	
CASING WEIGHT	TUBING SIZE
CASING CONDITION	TUBING DEPTH
	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input checked="" type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISF. PUMP	<input type="checkbox"/>
<input type="checkbox"/> OTHER	<input type="checkbox"/>

PRESSURE LIMITATIONS		
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB BREAK CIRCULATION W/ FRESH H₂O; RUN 366L W/ COTTON SEED HULLS;
RUN 5BBL PAD; RUN 10 BBLS DYE W/ SODIUM SILICATE IN LAST 5BBL; CEMENT UNTIL
DYE RETURN; FLUSH PUMP; PUMP PLUG W/ KCL WATER; SET FLOAT SHOE. LEAD IN @ 14.4 (Cement)
 AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____

TIME AM / PM	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
							BREAKDOWN PRESSURE
							DISPLACEMENT
							MIX PRESSURE
							MIN PRESSURE
							ISIP
							15 MIN.
							MAX RATE
							MIN RATE

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CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

TICKET NUMBER **24167**

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

LOCATION CHANUTE

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
1-2604	6628	CAMPBELL #3-1		3	28	16	WL	
CHARGE TO				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				
QUEST CHEROKEE LLC								
P.O. BOX 100								
BENEDICT, KANSAS 66714								

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1- WELL	PUMP CHARGE CEMENT PUMP		525 ⁰⁰
1110	18 SKS	GILSONITE		349 ²⁰
1118	3 SKS	PREMIUM GEL BENTONITE (3 SKS AHEAD)		35 ⁴⁰
1107	2 SKS	CELLOFLAKE / FLO-SEAL		75 ⁵⁰
111B	15 GAL	SODIUM SILICATE		150 ⁰⁰
1215	1 GAL	KCL		22 ⁰⁰
1105	1 SKS	COTTONSEED HULLS		10 ⁹⁵
1123	7350 GALS	CITY WATER (175 BBLs)		82.69
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				MAY 21 2004
				KCC WICHITA
BLENDING & HANDLING				
5407	15 mi	TON-MILES minimum		190 ⁰⁰
STAND BY TIME				
MILEAGE				
5501	5 1/2 HR	WATER TRANSPORTS		440 ⁰⁰
5502	5 1/2 HR	VACUUM TRUCKS		412 ⁵⁰
FRAC SAND				
1126	169 SKS	CEMENT OWC		1909 ⁷⁰
				SALES TAX
(OWC; 5# GILSONITE; 1/4# FLO-SEAL)				164.77
ESTIMATED TOTAL				4369.71

Ravin 2790

CUSTOMER or AGENTS SIGNATURE _____

CIS FOREMAN

T.A. Tindle
TODD A. TINDLE

CUSTOMER or AGENT (PLEASE PRINT) _____

DATE

1-6-04

188759