CONFIDENTIAL

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

IO(12/09
Form ACO-1
September 1998
ORIGINA Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33539 Name: Cherokee Wells, LLC Address: P.O. Box 296 City/State/Zip: Fredonia, KS 66736 City/State/Zip: Fredonia, KS 66736 City/State/Zip: Fredonia, KS 66736 Controlled Furchaser: Southeastern Kansas Pipeline Operator Contact Person: Tracy Miller Operator: (620	East West of Section of Section
Address: P.O. Box 296 City/State/Zip: Fredonia, KS 66736 Purchaser: Southeastern Kansas Pipeline Operator Contact Person: Tracy Miller Operator Contact Person: Tracy Miller Operator: Name: Well Refined Drilling License: 33072 Wellsite Geologist: N/A Designate Type of Completion: New Well Re-Entry Workover Oil SWD SIOW Temp. Abd. Gas ENHR SIGW Dry Other (Core, WSW, Expl., Cathodic, etc) If Workover/Re-entry: Oid Well info as tollows: 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 Siz SE Se Sec. 4 Twp. 28 S. R. 15 J 380 feet from (S) / N (circle one) Line 660 feet from (S) / N (circle one) Line 6	East West of Section of Section
City/State/Zip. Fredonia, KS 66736 Purchaser: Southeastern Kansas Pipeline Operator Contract Person: Tracy Miller Operator Contract Person: Tracy Miller Phone: (620) 378-3650 Contractor: Name: Well Refined Drilling License: 33072 Wellsite Geologist: N/A Designate Type of Completion: ✓ New Well Re-Entry Workover — Oil SWD SIOW 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: — Plug Back Plug Back Total Depth — Dewatering method used — Dewatering method used — Location of fluid disposal if hauled offsite:	of Section of Section
Purchaser: Southeastern Kansas Pipeline Operator Contact Person: Tracy Miller Phone: (620	of Section
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Other (SWD or Enhr.?) Docket No. Operator Name:	
9/13/07 9/17/07 Lease Name: License No.:	
Spud Date or Date Reached TD Completion Date or Quarter Sec. Twp. S. R	East 🔲 West
Recompletion Date	
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 207 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 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 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 CI TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarity abandoned wells.	-107 apply.
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and tracerein are complete and correct to the best of my knowledge.	e statements
Signature: 30244 SWC Office Use ONLY	1
Fitle: Administrative Assistant Date: 10/12/07 Letter of Confidentiality Received	WALANDA
Subscribed and sworn to before me this 17 day of 900000000000000000000000000000000000	
7 Wireline Log Received RECFIN	Parameter and transfer of the second state of
TRACY MILLER Geologist Report Received KANSAS CORPORATION Geologist Report Received	ŒD
Notary Public: 1/4/4 Notary Public - State of Kansas UIC Distribution	/ED N COMMISSION
Date Commission Expires: My Appt. Expires [Z[1/2010]	ON COMMISSION