

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

COPY

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

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: _____

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. _____

<u>02/16/04</u>	<u>02/17/04</u>	<u>02/28/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-25726-0000

County: Wilson

 - - - Sec. 29 Twp. 27 S. R. 17 East West

700 feet from (S) N (circle one) Line of Section

700 feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW (SW)

Lease Name: Myers, Wayne D. Well #: 29-1

Field Name: Cherokee Basin CBM

Producing Formation: Not yet complete

Elevation: Ground: 974 Kelly Bushing: _____

Total Depth: 1164 Plug Back Total Depth: 1163

Amount of Surface Pipe Set and Cemented at 22 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1163

feet depth to surface w/ 153 sx cmt.

Drilling Fluid Management Plan W H M 6-28-07
(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 K Lamb

Title: Manager Date: 06/21/04

Subscribed and sworn to before me this 21st day of June, 2004.

Notary Public: Jennifer R. Houston

Date Commission Expires: July 30, 2005

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

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: Quest Cherokee, LLC Lease Name: Myers, Wayne D. Well #: 29-1
 Sec. 29 Twp. 27 S. R. 17 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)

List All E. Logs Run:

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Lenapah Lime	500	+474
Altamont Lime	531	+443
Pawnee Lime	648	+326
Oswego Lime	699	+275
Verdigris Lime	818	+156
Mississippi Lime	1128	-158

Dual Induction Log
 Compensated Density-Neutron Log

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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#	22'	"A"	6sx	
Production	6-3/4"	4-1/2"	10.5#	1063'	"A"	153sx	

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 RECEIVED JUN 25 2004 KCC WICHITA		

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 _____

Production Interval Other (Specify) _____



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

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

TICKET NUMBER **23215**

LOCATION CHANUTE

FIELD TICKET

DATE 2-28-04	CUSTOMER ACCT # 6620	WELL NAME W. MYERS 29-1	QTR/QTR	SECTION 29	TWP 27S	RGE 17E	COUNTY WL	FORMATION
CHARGE TO QUEST CHEROKEE LLC				OWNER				
MAILING ADDRESS P.O. Box 100				OPERATOR				
CITY & STATE BENEDICT, KS 66714				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1- WELL	PUMP CHARGE CEMENT PUMP		525.00
3123	81 #	DIACEL FL		729.00
1128	81 #	LOMAR D		324.00
1110	28 SKS	GILSONITE		543.20
1111	325 #	SALT		81.25
1111A	67 #	METSO BEADS		90.45
1107	3 SKS	FLO-SEAL / CELLOFLAKE		113.25
1118	2 SKS	PREMIUM GEL / BENTONITE		23.60
1215B	1 GAL	KCL		22.00
5408		WEEKEND SURCHARGE		N/C
5609	5 HRS	MISC. PUMP - WASH		6.00.00
1123	8400 GAL	CITY WATER (200 BBL)		94.50
RECEIVED				
5407	8 mi	BLENDING & HANDLING TON-MILES MINIMUM STAND BY TIME MILEAGE	JUN 25 2004 KCC WICHITA	190.00
5501	7 HR	WATER TRANSPORTS		560.00
5502	7 HR	VACUUM TRUCKS FRAC SAND		525.00
1104	135 SKS	CEMENT CLASS "A" (152 TOTAL SKS)	SALES TAX	1147.50 198.25
ESTIMATED TOTAL				5767.00

Revin 2790

CUSTOMER or AGENTS SIGNATURE _____

CIS FOREMAN

TODD A. TINDLE

CUSTOMER or AGENT (PLEASE PRINT) _____

DATE _____

189112

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

TICKET NUMBER 32774
 LOCATION CHANUTE
 FOREMAN TODD A. TINDLE

TREATMENT REPORT

DATE	CUSTOMER #	WELL NAME	FORMATION
2-28-04	6628	#29-1 W. MYERS	
SECTION	TOWNSHIP	RANGE	COUNTY
29	27S	17E	WL
CUSTOMER			
QUEST CHEROKEE LLC			
MAILING ADDRESS			
P.O. BOX 100			
CITY			
BENEDICT			
STATE		ZIP CODE	
KS.		66714	
TIME ARRIVED ON LOCATION			

TRUCK #	DRIVER	TRUCK #	DRIVER
255	HERB		
103	WES		
295	CHRIS		
140	TIM		

WELL DATA

HOLE SIZE	6 3/4	PACKER DEPTH	
TOTAL DEPTH	1164'	PERFORATIONS	
		SHOTS/FT	
CASING SIZE	4 1/2	OPEN HOLE	
CASING DEPTH	1163'		
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 checked="" type="checkbox"/> MISP. 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 WASH DOWN 7 JOINTS CASING; RUN 3 GEL & CIRCULATE TO SURFACE; RUN 1 GEL AHEAD; 5 BBL PAD; RUN 10 BBL DYE; CEMENT UNTIL DYE RETURN; FLUSH PUMP; PUMP PLUG; SET FLOAT SHOE; CEMENT LEAD IN @ 12.4; TAIL IN @ 13.5

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

RECEIVED
 JUN 25 2004
 KCC WICHITA