

JAN 31 2008

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONSERVATION DIVISION
WICHITA, KS

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: Emily Lybarger

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: _____

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. _____

1/18/08 1/23/08

Spud Date or 1/18/08 Date Reached TD 1/23/08 Completion Date or 1/23/08 Recompletion Date

API No. 15 - 205-27403-0000

County: Wilson

N2 NW SW SE NE Sec. 18 Twp. 27 S. R. 15 East West

2290' feet from S / N (circle one) Line of Section

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

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Thomas Well #: A-3

Field Name: Cherokee Basin Coal Gas Area

Producing Formation: N/A

Elevation: Ground: 997.22' Kelly Bushing: N/A

Total Depth: 1480' Plug Back Total Depth: N/A

Amount of Surface Pipe Set and Cemented at 20' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1475'

feet depth to surface w/ 155 sx crit.

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: Emily Lybarger

Title: Administrative Assistant Date: 1/29/08

Subscribed and sworn to before me this 29 day of January

2008

Notary Public: Tracy Miller

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

Date Commission Expires: _____

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution