

1129110

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONFIDENTIAL

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 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: _____

API No. 15 - 049-22476-0000
County: Elk
S/2 SW SE Sec. 18 Twp. 29 S. R. 13 East West
330' feet from N (circle one) Line of Section
1980' feet from W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: C. Thomas Well #: A-2
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: N/A
Elevation: Ground: N/A Kelly Bushing: N/A
Total Depth: 1671' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at 45' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1666'
feet depth to surface w/ 170 sx cmt.

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. _____
1/10/08 1/15/08
Spud Date or 1/15/08
Recompletion Date Date Reached TD Completion Date or
Recompletion Date Recompletion Date

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: 1/24/08
Subscribed and sworn to before me this 24 day of January,
2008.
Notary Public: Tracy Miller
Date Commission Expires: _____

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

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
JAN 28 2008