

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

Operator: License # 33344
Name: Quest Cherokee, LLC
Address: P.O. Box 707
City/State/Zip: Howard, KS 67349
Purchaser: Bluestem Pipeline, LLC
Operator Contact Person: E. Wayne Willhite
Phone: (620) 374-2133
Contractor: Name: L & L Well Service
License: 9313
Wellsite Geologist: Mark Brecheisen

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. _____

<u>7/19/04</u>	<u>8/3/04</u>	<u>8/31/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-30593-00-00

County: Montgomery
150 N + 14 W + 3 E
20 N - S12 - SW - SE Sec. 24 Twp. 34 S. R. 13 East West

350' 780' feet from (S) / N (circle one) Line of Section
1980' 674' feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE (SE) NW SW

Lease Name: Beyen, Robert H. Well #: 24-1

Field Name: Cherokee Basin CBM

Producing Formation: Riverton

Elevation: Ground: 838' 783' Kelly Bushing: _____

Total Depth: 1588' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 21'6" Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1584'

feet depth to surface w/ 220 sx cmt.

Drilling Fluid Management Plan Act #2 KGR 6/15/07
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used Compressed air with injected water

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: E. Wayne Willhite
Title: Dist. Mgr. Date: 10-5-04
Subscribed and sworn to before me this 5th day of October,
20 04.
Notary Public: John P. Black
Date Commission Expires: 3/26/05

 **JOHN P. BLACK**
Notary Public - State of Kansas
My Appt. Expires 3/26/05

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: Beyen, Robert H. Well #: 24-1
 Sec. 24 Twp. 34 S. R. 13 East West County: Montgomery

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:

Dual Induction Open Hole, Temperature & Density Log

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Lexington Shale	941'	
Summit Shale	1073'	
Mulky Shale & Coal	1102'	
Ironpost Coal	1128'	
Crowberg Coal & Shale	1151'	
Bartlesville Sand	1300'	
Riverton Coal	1494'	
Mississippi	1538'	

RECEIVED
OCT 21 2004
KCC WICHITA

CASING RECORD <input checked="" 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"		21.6'	portland	6	
production	6 3/4"	4 1/2"	9.5"/ft Rge 3	1584'	thickset	220	OWC Blend, Floeal, Gilsonite, 2% Gel

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	Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
13 shots	1495'-1498'		
	Acid Breakdown	3300gl water, 10 gl KCL, 250 gl 15% HCL, 80bbbs water	
		3% KCL	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		New 2 3/8"	1570'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method		
8/31/04			<input type="checkbox"/> Flowing <input checked="" 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
		None	18bbblpd		

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-1B.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____