

**CONFIDENTIAL** KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

2/6/10  
Form ACC-1  
September 1999  
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  
Purchaser: Southeastern Kansas Pipeline  
Operator Contact 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      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.

11/16/07      11/30/07  
Spud Date or      Date Reached TD      Completion Date or  
Recompletion Date           Recompletion Date

API No. 15 - 049-22471-00-00  
County: Elk  
C W/2 SW SW Sec. 5 Twp. 29 S. R. 13  East  West  
660 feet from  S  N (circle one) Line of Section  
330 feet from E  W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Countryman Trust      Well #: A-2  
Field Name: Cherokee Basin Coal Gas Area  
Producing Formation: N/A  
Elevation: Ground: Unknown      Kelly Bushing: N/A  
Total Depth: N/A      Plug Back Total Depth: N/A  
Amount of Surface Pipe Set and Cemented at N/A      Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set      Feet  
If Alternate II completion, cement circulated from N/A  
feet depth to N/A      w/ N/A      sx cmt.

**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: 2/6/08

Subscribed and sworn to before me this 6 day of February, 2008.

Notary Public: *Tracy Miller*  
**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:      RECEIVED  
 Wireline Log Received      KANSAS CORPORATION COMMISSION  
 Geologist Report Received  
 UIC Distribution      FEB 11 2008  
CONSERVATION DIVISION  
WICHITA, KS