CONFIDENTIAL

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

ORIGINAL 4/23/10 Sent

September 1999
Form Must Be Typed

RECEIVED KANSAS CORPORATION COMMISSION

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

| Operator: License # 33539 | | API No. 15 - 205-27399-000 | o APR 2 8 2008 CS |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| Name: Cherokee Wells, LLC | | | CONSERVATION DIVISION |
| Address: P.O. Box 296 | | | 19 Twp. 27 S. R. WSCHTA Sast West |
| City/State/Zip: Fredonia, KS 66736 | # | 100 | feet from Sy/ N (circle one) Line of Section |
| Purchaser: Southeastern Kansas Pipeline | · | 100 | feet from (b) / W (circle one) Line of Section |
| Operator Contact Person: Emily Lybarger | | | Nearest Outside Section Corner: |
| Phone: (620) 378-3650 | A177A1 | (circle one) NE | |
| Contractor: Name: Well Refined Drilling CONFIDE | Aph i it man | Lease Name: Collins | Well #: A-2 SWD |
| License: 33072 APR 2 | 3 7006 | Field Name: Cherokee Ba | sin Coal Gas Area |
| Wellsite Geologist: N/A | and there | Producing Formation: N/A | |
| Designate Type of Completion: | السراة ال | Elevation: Ground: N/A | Kelly Bushing: N/A |
| ✓ New Well Re-Entry Workove | er . | | ig Back Total Depth: 1752' |
| Oil SWD SIOWTer | np. Abd. | · | et and Cemented at 44.6 Feet |
| Gas ENHR SIGW | 4 | Multiple Stage Cementing | |
| Dry Other (Core, WSW, Expl., Cathod | dic, etc) | · · · · · · · · · · · · · · · · · · · | Feet |
| If Workover/Re-entry: Old Well Info as follows: | · | - | ement circulated from bottom casing |
| Operator: | | | w/_245sx cmt. |
| Well Name: | | | |
| Original Comp. Date: Original Total Dep | th: | Drilling Fluid Management (Data must be collected from the | + A 2 |
| Deepening Re-perf Conv. | to Enhr./SWD | | ppm Fluid volume bbls |
| Plug Back Plug Back | Total Depth | | ppm Fluid volume buls |
| Commingled Docket No | - | <u>-</u> | • |
| Dual Completion Docket No | | Location of fluid disposal if | hauled offsite: |
| Other (SWD or Enhr.?) Docket No | · | Operator Name: | |
| 2/29/08 3/5/08 4/21/ | /ne | Lease Name: | License No.: |
| Spud Date or Date Reached TD Comp | oletion Date or | Quarter Sec | _ Twp S. R |
| Recompletion Date Reco | mpletion Date | County: | Docket No.: |
| | | | |
| INSTRUCTIONS: An original and two copies of this for Kansas 67202, within 120 days of the spud date, re Information of side two of this form will be held confide 107 for confidentiality in excess of 12 months). One confidence of TICKETS MUST BE ATTACHED. Submit CP-4 form with the confidence of the c | ecompletion, workove ential for a period of 12 py of all wireline logs a | r or conversion of a well. Ru 2 months if requested in writing and geologist well report shall I | ule 82-3-130, 82-3-106 and 82-3-107 apply. g and submitted with the form (see rule 82-3- pe attached with this form. ALL CEMENTING |
| All requirements of the statutes, rules and regulations pherein are complete and correct to the best of my know | | e the oil and gas industry hav | re been fully complied with and the statements |
| Signature: Kanum Kull | ? | | KCC Office Use ONLY |
| Title: Administrative Assistant Date: 4 | /23/08 | Lette | r of Confidentiality Received |
| Subscribed and sworn to before me this $\frac{3}{2}$ day of | Apriliaring S | LYB4 If Der | nied, Yes . Date: |
| 20.08. | NO NO | OTARY Wirel | ine Log Received |
| trail 22 horan. | / P | - L | ogist Report Received |
| Notary Public: | My / | Appt. Exp. UIC D | istribution |
| Date Commission Expires: | | | |
| • | 11.1F | OFKAN III | |