

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

Handwritten signature and initials.

5/05/10

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

API No. 15 - 205-27442-0000
County: Wilson
NE SE NE Sec. 21 Twp. 27 S. R. 14 [X] East [] West
1854/1659 feet from S (N) (circle one) Line of Section
400 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: Bowker Well #: A-1
Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Unknown
Elevation: Ground: N/A Kelly Bushing: N/A
Total Depth: 1380' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at 63' Feet
Multiple Stage Cementing Collar Used? [] Yes [X] No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from bottom casing
feet depth to surface w/ 145 _____ 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.: _____

Designate Type of Completion:
[X] New Well [] Re-Entry
[] Oil [] SWD [] SLOW [] Temp. Add.
[X] Gas [] ENHR [] SIGW
[] Dry [] Other (Core, WSW, Expl., Cathodic, etc)

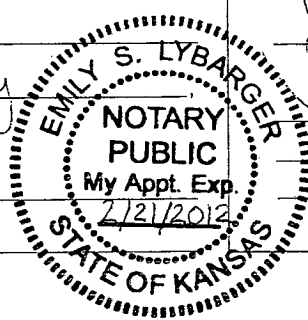
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KCC

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. _____
4/23/08 4/24/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

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: Shannon Skiff
Title: Administrative Assistant Date: 5/5/08
Subscribed and sworn to before me this 5 day of May
2008
Notary Public: Emily S. Lybarger
Date Commission Expires: 2/21/2012



KCC Office Use ONLY
Letter of Confidentiality Received
If Denied, Yes [] Date: _____
RECEIVED
WIRELINE LOG RECEIVED
Geologist Report Received
UIC Distribution
MAY 08 2008
KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
WICHITA, KS