

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

5/28/08

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Handwritten initials and date: *ccu*
may 30/08

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: _____
Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
_____ Oil _____ SWD _____ SIOW _____ 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. _____
5/19/08 5/21/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

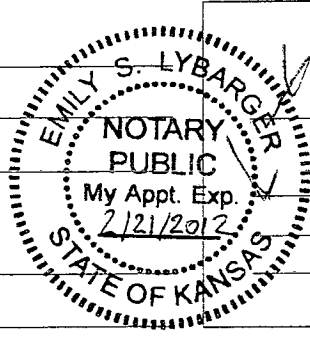
API No. 15 - 205-27400-0000
County: Wilson
C NE SE _____ Sec. 30 Twp. 27 S. R. 15 East West
1980 feet from (S) N (circle one) Line of Section
660 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Frisbie Well #: A-2
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Unknown
Elevation: Ground: N/A Kelly Bushing: N/A
Total Depth: 1305' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at 60' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from bottom casing
feet depth to surface w/ 50 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: Sharon Shick
Title: Administrative Assistant Date: 5/28/08
Subscribed and sworn to before me this 28 day of May
20 08
Notary Public: Emily Lybarger
Date Commission Expires: 2/21/2012



KCC Office Use ONLY
Letter of Confidentiality Received _____
If Denied, Yes Date: _____
Wireline Log Received _____
Geologist Report Received _____
UIC Distribution _____
RECEIVED
KANSAS CORPORATION COMMISSION
MAY 29 2008