

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

6/18/08

Operator: License # 33344
 Name: Quest Cherokee, LLC
 Address: 211 W. 14th Street
 City/State/Zip: Chanute, KS 66720
 Purchaser: Bluestem Pipeline, LLC
 Operator Contact Person: Jennifer R. Smith
 Phone: (620) 431-9500
 Contractor: Name: TXD/Foxe
 License: 33837
 Wellsite Geologist: Ken Recoy
 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. _____
 2-28-08 3-07-08 3-10-08
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15-15-099-24245-0000
 County: Labette
 _____ NE NW Sec. 9 Twp. 31 S. R. 19 East West
660 feet from S / NW (circle one) Line of Section
1980 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Diediker, John C. Well #: 9-1
 Field Name: Cherokee Basin CBM
 Producing Formation: Multiple
 Elevation: Ground: 923 Kelly Bushing: n/a
 Total Depth: 986 Plug Back Total Depth: 978
 Amount of Surface Pipe Set and Cemented at 22 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 978
 feet depth to surface w/ 150 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: Jennifer R. Smith
 Title: New Well Development Coordinator Date: 6/18/08
 Subscribed and sworn to before me this 18th day of June,
 20 08.
 Notary Public: Serra Klauman
 Date Commission Expires: 8-4-2010

TERRA KLAUMAN
 Notary Public - State of Kansas
 My Appt. Expires 8-4-2010

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
 KANSAS CORPORATION COMMISSION
JUN 19 2008