

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

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: Douglas L. Lamb
Phone: (620) 431-9500
Contractor: Name: L S Well Service, LLC
License: 33374
Wellsite Geologist: N/A

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CONSERVATION DIVISION
WICHITA, KS

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. D-28,419

10/14/04	10/16/04	11/3/04
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-25861-0000

County: Neosho

_____ c. _____ nw _____ nw Sec. 30 Twp. 29 S. R. 17 East West

800 feet from S (circle one) Line of Section

810 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Erbe Living Trust SWD Well #: 30-1

Field Name: Cherokee Basin CBM

Producing Formation: Arbuckle

Elevation: Ground: 872 Kelly Bushing: n/a

Total Depth: 1438' Plug Back Total Depth: 1370'

Amount of Surface Pipe Set and Cemented at 21.6 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1370

feet depth to surface w/ 240 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

ALT II W Am
8-16-07

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.: _____

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

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: Douglas L. Lamb

Title: Manager Date: 1/10/2005

Subscribed and sworn to before me this 10th day of January, 2005.

Notary Public: Jennifer R. Houston

Date Commission Expires: July 30, 2005

JENNIFER R. HOUSTON
Notary Public - State of Kansas
My Appt. Expires July 30, 2005

✓em

Operator Name: Quest Cherokee, LLC Lease Name: Erbe Living Trust SWD Well #: 30-1
 Sec. 30 Twp. 29 S. R. 17 East West County: Neosho

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Lenapah	372.5'	+497.5'
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Altamont	408.5'	+461.5'
List All E. Logs Run:		Pawnee	529.5'	+340.5'
Compensated Density/Neutron Log		Oswego	603'	+267'
Dual Induction Log		Verdigris	839'	+31'
Gamma Ray Neutron Log		Mississippi	1053'	-183'

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	11"	8-5/8"	24.75#	21.6'	"A"	6sks	
Production	6-3/4"	5-1/2"	15.5#	1370'	"A"	240sks	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
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TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-3-04		Erbe Living Trust SWD 30-1	30	29 S.	17 E	W.L.

FOREMAN OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRUCK HOURS	EMPLOYEE SIGNATURE
Dwayne	7:02	3:46	/	398	8 hr	<i>[Signature]</i>
WCS	7:00	3:34	/	197	8 hr	<i>[Signature]</i>
Jimmy	6:54	3:44	/	103	8 hr	<i>[Signature]</i>
Larry	7:00		/	401	8 hr	<i>[Signature]</i>
Joe	6:48	3:27	/	286	8 hr	Joe Blend

J&B TYPE Long String HOLE SIZE 7 7/8 HOLE DEPTH 1410' CASING SIZE & WEIGHT 5 1/2 / 15.5
 CASING DEPTH 1370 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.6 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 32 BBH DISPLACEMENT PSI 450 MIX PSI 0 RATE 4 BPM

REMARKS: Drop Ball on Packer Shoe then Break circulation to set Packer then Pump 2 sacks of Prem Gel Followed By a 10 BBH pad with 15 gal Sodium Silicate then Switch to cement and Pump 240 sacks. Stop and wash out Pump then Pump Wiper Plug to Bottom and set Float Shoe

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
398	8 hr	Foreman Pickup		
197	8 hr	Cement Pump Truck		
103	8 hr	Bulk Truck		
1110	24 SK.	Gilsonite		
1107	2.5 SK.	Flo-Seal		
1118	7 SK	Premium Gel 5 In Cement 2 Ahead of Job		
1215A	2 Gal	KCL		
1111B	15 Gal	Sodium Silicate		
1123	5000 Gal	City Water		
401	8 hr	Transport		
286	8 hr	80 Vac		
	222	Cement 30/50 P2 5 # 2 # Gel 240 sacks total with additions		
	1	5 1/2 Rubber Plug		
			SALES TAX	
			ESTIMATED	
			TOTAL	