

10/5/09

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE

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: Tracy Miller
 Phone: (620) 378-3650
 Contractor: Name: Well Refined Drilling
 License: 33072
 Wellsite Geologist: N/A
 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. _____
 7/20/07 7/25/07
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

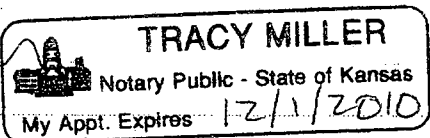
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KCC

API No. 15 - 205-27234-00-00
 County: Wilson
 SW - SW - SE - Sec. 5 Twp. 29 S. R. 14 East West
410 feet from (S) N (circle one) Line of Section
2310 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: D. Robertson Well #: A-1
 Field Name: Cherokee Basin Coal Gas Area
 Producing Formation: N/A
 Elevation: Ground: 862.9' Kelly Bushing: N/A
 Total Depth: 1305' Plug Back Total Depth: N/A
 Amount of Surface Pipe Set and Cemented at 43' 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/ 135 sx crnt.

Drilling Fluid Management Plan
 (Date 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: Emily Gylbarg
 Title: Administrative Assistant Date: 10/5/07
 Subscribed and sworn to before me this 5 day of October
 20 07
 Notary Public: Tracy Miller
 Date Commission Expires: _____


KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____ RECEIVED
 Wireline Log Received KANSAS CORPORATION COMMISSION
 Geologist Report Received
 UIC Distribution
OCT 09 2007
 CONSERVATION DIVISION
 WICHITA, KS