

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

7/30/10

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 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. _____

4-11-08 5-11-08 5-13-08

Spud Date or 4-11-08 Date Reached TD 5-11-08 Completion Date or 5-13-08 Recompletion Date

Recompletion Date

API No. 15-099-24309-0000

County: Labette

SW Ne Sec. 18 Twp. 34 S. R. 18 East West

1980 feet from S N (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: Jones, Robert B. Well #: 18-1

Field Name: Cherokee Basin CBM

Producing Formation: Not Yet Complete

Elevation: Ground: 802 Kelly Bushing: n/a

Total Depth: 991 Plug Back Total Depth: 965.69

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 965.69

feet depth to surface _____ w/ 140 _____ 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: 7/30/08

Subscribed and sworn to before me this 30th day of July

2008

Notary Public: Verra Klauman

Date Commission 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
JUL 31 2008

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

CONSERVATION DIVISION
WICHITA, KS