CONFIDENT ANSAS CORPORATION COMMISSION GIVAL Form ACO-1 October 2008 OIL & GAS CONSERVATION DIVISION AMENDED Form Must Be Typed WELL COMPLETION FORM

10/29/10

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33539	API No. 15 - 205-27581-0000
Name: Cherokee Wells, LLC	Spot Description: C-NW-SW
Address 1: P.O. Box 296	C _NW _SW Sec. 24 _Twp. 27 _S. R. 14 _ ✓ East ☐ West
Address 2:	1980 Feet from North / South Line of Section
City: Fredonia State: KS Zip: 66736 +	
Contact Person: Emily Lybarger	Footages Calculated from Nearest Outside Section Corner:
Phone: (620_) 378-3650	□NE □NW □SE ☑SW
CONTRACTOR: License #_5675	County: Wilson
Name: McPherson Drilling	Lease Name: M. Timmons Well #: A-13
Wellsite Geologist: N/A	Field Name: Cherokee Basin Coal Gas Area
Purchaser: Southeastern Kansas Pipeline	Producing Formation: N/A
	Elevation: Ground: 854' Kelly Bushing: N/A
Designate Type of Completion:	Total Depth: 1355' Plug Back Total Depth: 1338'
New Well Re-Entry Workover	Amount of Surface Pipe Set and Cemented at: Feet
OilSWDSIOW	Multiple Stage Cementing Collar Used? Yes V No
Gas ENHR SIGW CM (Coal Bed Methane) Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane) Terrip. Abd.	If Alternate II completion, cement circulated from: bottom casing
(Core, WSW, Expl., Cathodic, etc.)	feet depth to: surface w/ 140 sx cmt.)
If Workover/Re-entry: Old Well info as follows:	feet depth to: surface w/ 170 pt/2-Dig -2/3/0 9
Operator:	Drilling Fluid Management Plan
Well Name:	(Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: ppm Fluid volume: bbls
Deepening Re-perf Conv. to Enhr Conv. to SWD	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Docket No.:	Our sinter Names
Dual Completion Docket No.:	Operator Name: License No.:
Other (SWD or Enhr.?) Docket No.:	
10/14/08 10/15/08 11/18/08	QuarterSecTwpS. REast West County:Docket No.:
Spud Date or Pate Reached TD Completion Date or Recompletion Date Reached TD Recompletion Date	County: Docket No.:
Kansas 67202, within 120 days of the spud date, recompletion, workover or of side two of this form will be held confidential for a period of 12 months if re tiality in excess of 12 months). One copy of all wireline logs and geologist w BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 forms.	the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information equested in writing and submitted with the form (see rule 82-3-107 for confidencell report shall be attached with this form. ALL CEMENTING TICKETS MUST form with all temporarily abandoned wells.
All requirements of the statutes, rules and regulations promulgated to regulate are complete and correct to the best of my knowledge.	
Signature:	KCC Office Use ONLY
Title: Administrative Assistant Date: 12/9/08	Letter of Confidentiality Received
Subscribed and sworn to before me this day of	If Denied, Yes Date:
20 <u>08</u> PUB	KANSAS CORPORATION COMPASSION
Notary Public: My Appr	coolegistitoperities
Date Commission Expires:	CONSERVATION DIVISION
1000 OF	KAN WCHITA KE