

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33539

Name: Cherokee Wells, LLC

Address 1: P.O. Box 296

Address 2: _____

City: Fredonia State: KS Zip: 66736 + _____

Contact Person: Emily Lybarger

Phone: (620) 378-3650 **CONFIDENTIAL**

CONTRACTOR: License # 5675

Name: McPherson Drilling **DEC 18 2008**

Wellsite Geologist: N/A **KCC**

Purchaser: Southeastern Kansas Pipeline

Designate Type of Completion:

- New Well _____ Re-Entry _____ Workover _____
- _____ Oil _____ SWD _____ SIOW _____
- Gas _____ ENHR _____ SIGW _____
- _____ CM (Coal Bed Methane) _____ Temp. Abd. _____
- _____ 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. _____ Conv. to SWD _____

_____ Plug Back: _____ Plug Back Total Depth _____

_____ Commingled _____ Docket No.: _____

_____ Dual Completion _____ Docket No.: _____

_____ Other (SWD or Enhr.?) _____ Docket No.: _____

11/12/08 11/14/08

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - 205-27701-0000

Spot Description: SE-SE-SW

SE SE SW - _____ Sec. 4 Twp. 28 S. R. 15 East West

330 Feet from North / South Line of Section

2970 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Wilson

Lease Name: Miller Well #: A-3

Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Unknown

Elevation: Ground: 841' Kelly Bushing: N/A

Total Depth: 1230' Plug Back Total Depth: N/A

Amount of Surface Pipe Set and Cemented at: 54' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: surface

feet depth to: bottom casing w/ 130 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: Shannon Hinkle

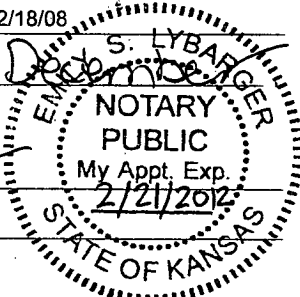
Title: Administrative Assistant Date: 12/18/08

Subscribed and sworn to before me this 18 day of December

20 08

Notary Public: Emily Lybarger

Date Commission Expires: 2/21/2012



KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

KANSAS CORPORATION COMMISSION

JAN 23 2009

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