

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1  
October 2008  
Form Must Be Typed

9/3/11

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33539  
Name: Cherokee Wells, LLC  
Address 1: P.O. Box 296  
Address 2: 1033 Fillmore  
City: Fredonia State: KS Zip: 66736 +  
Contact Person: Emily Lybarger  
Phone: (620) 378-3650

KCC

SEP 03 2009

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CONTRACTOR: License # 33072  
Name: Well Refined Drilling  
Wellsite Geologist: N/A  
Purchaser: Southeastern Kansas Pipeline

RECEIVED

SEP 14 2009

KCC WICHITA

API No. 15 - 205-27730-0000  
Spot Description: W2-SW-SW  
W2 SW SW Sec. 6 Twp. 28 S. R. 15  East  West  
660 Feet from  North /  South Line of Section  
330 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Wilson

Lease Name: Lewis Well #: A-1  
Field Name: Cherokee Basin Coal Gas Area  
Producing Formation: Unknown  
Elevation: Ground: 857' est. Kelly Bushing: N/A  
Total Depth: 1280' 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/ 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.: \_\_\_\_\_

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.: \_\_\_\_\_  
7/2/09 7/7/09 N/A  
Spud Date or Date Reached TD Completion Date or Recompletion Date

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 Lybarger  
Title: Administrative Assistant Date: 9/3/09

Subscribed and sworn to before me this 3 day of September

20 09

Notary Public: Nancy Miller

TRACY MILLER  
Notary Public - State of Kansas  
My Appt. Expires 12/1/2010

Date Commission Expires: \_\_\_\_\_

KCC Office Use ONLY  
 Letter of Confidentiality Received  
 If Denied. Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution