

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

12/18/09

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

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. Ammann
Phone: (620) 431-9500
Contractor: Name: _____
License: _____
Wellsite Geologist: Ken Recoy

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. _____

8-21-07 9/12/07 - Plugged
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 205-27262-0000

County: Wilson

NE-NE Sec. 7 Twp. 28 S. R. 16 East West

660 feet from S (N (circle one) Line of Section

660 feet from E (W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Mustain, Don Well #: 7-1

Field Name: Cherokee Basin CBM

Producing Formation: n/a

Elevation: Ground: 968 Kelly Bushing: n/a

Total Depth: n/a Plug Back Total Depth: n/a

Amount of Surface Pipe Set and Cemented at n/a Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from n/a

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan DANK 3/24/09
(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. Ammann

Title: New Well Development Coordinator Date: 12/18/07

Subscribed and sworn to before me this 18th day of December, 2007.

Notary Public: Denise V. Veneman

Date Commission Expires: _____

DENISE V. VENEMAN
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 7-1-08

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION

DEC 20 2007

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Quest Cherokee, LLC Lease Name: Mustain, Don Well #: 7-1
 Sec. 7 Twp. 28 S. R. 16 East West County: Wilson

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See attached
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	n/a		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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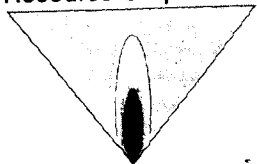
Date of First, Resumerd Production, SWD or Enh.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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QUEST

Resource Corporation



211 W. 14TH STREET,
CHANUTE, KS 66720
620-431-9500

Called Larry
CONFIDENTIAL
DEC 18 2007
KCC

TICKET NUMBER **2456**

FIELD TICKET REF # _____

FOREMAN Joe

623310

TREATMENT REPORT & FIELD TICKET CEMENT

DATE	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
9-12-07	MUSTAIN DON	7-1	7	28	16	W.L.	
FOREMAN / OPERATOR	TIME IN	TIME OUT	LESS LUNCH	TRUCK #	TRAILER #	TRUCK HOURS	EMPLOYEE SIGNATURE
Joe	10:00	1:00		903427		3	Joe D. [Signature]
Maverick	↓	↓		903197		↓	[Signature]
Tyler	↓	↓		903103		↓	[Signature]
Mike R	↓	↓		931385	931387	↓	[Signature]
Daniel	↓	↓		931420		↓	[Signature]

JOB TYPE Plug HOLE SIZE 6 3/4 HOLE DEPTH 700 FT CASING SIZE & WEIGHT _____
 CASING DEPTH B DRILL PIPE _____ TUBING 700 Ft 2 3/8 OTHER _____
 SLURRY WEIGHT 14 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 4bpm

REMARKS:

Broke circulation down 700 ft 2 3/8 tubing Pump 141 SKS of Cement
 To get Cement to surface. Shut down. Pulled all tubing out of hole top
 Well off with Cement washed up left location.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	TOTAL AMOUNT
903427	3 hr	Foreman Pickup	
903197	3 hr	Cement Pump Truck	
903603	3 hr	Bulk Truck	
1104	141 SK	Portland Cement	
1124		50/50 POZ Blend Cement	
1126		OWC - Blend Cement	
1110	0	Gilsonite	
1107	0	Flo-Seal	
1118	0	Premium Gel	
1215A	0	KCL	
1111B	0	Sodium Silicate	
1123	7000 gal	City Water	
931385	3 hr	Transport Truck	
931387	3 hr	Transport Trailer	
931420	3 hr	80 Vac	

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