

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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: 4916 Camp Bowie Blvd., Suite 204

Address 2: _____

City: Fort Worth State: TX Zip: 76107 + _____

Contact Person: Robert DeFeo

Phone: (817) 546-0032

CONTRACTOR: License # 33072

Name: Well Refined Drilling Co.

Wellsite Geologist: None

Purchaser: Coffeyville Resources

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.: _____

<u>6/27/2006</u>	<u>6/28/2006</u>	<u>8/11/2006</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 087-20642-00-00

Spot Description: _____

SE SW SW _____ Sec. 9 Twp. 9 S. R. 20 East West

514 Feet from North / South Line of Section

864 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Jefferson

Lease Name: Zachariah Well #: 20

Field Name: Zachariah

Producing Formation: McLouth sandstone

Elevation: Ground: 1067 Kelly Bushing: _____

Total Depth: 1550 Plug Back Total Depth: _____

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: 43

feet depth to: surface w/ 8 sx cmt.

Drilling Fluid Management Plan AKAN 4-2010
(Data must be collected from the Reserve Pit)

Chloride content: fresh water ppm Fluid volume: _____ bbls

Dewatering method used: evaporation

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 Shirk

Title: Administrative Assistant Date: 10/7/09

Subscribed and sworn to before me this 7 day of October

20 09

Notary Public: Nancy Miller

Date Commission Expires: 12/1/2010

TRACY MILLER
Notary Public - State of Kansas
My Appt. Expires _____

KCC Office Use ONLY

RECEIVED

FEB 16 2010

KCC WICHITA

RECEIVED

OCT 29 2009

KCC WICHITA

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

KCC WICHITA

Operator Name: Cherokee Wells, LLC Lease Name: Zachariah Well #: 20
 Sec. 9 Twp. 9 S. R. 20 East West County: Jefferson

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 checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray / Neutron / CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum UPPER MCLOUTH SANDSTONE 1452' - 385'
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CASING RECORD <input checked="" 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
Surface	12.25"	8 5/8"	26#	43 feet	Portland	8	
Production	7 7/8"	5 1/2"	15#	1547 feet	Thickset	240	5# Kol Seal
							61# Flo Seal

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
4	1454 - 1460; 1462 - 1485	3 3/8" DPD 23 gram tungsten expendable casing guns	
		RECEIVED RECEIVED FEB 16 2010 OCT 29 2009 KCC WICHITA KCC WICHITA	

TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>1505</u> Packer At: _____ Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First Resumed Production, SWD or Enhr. <u>9/1/06 8/11/06</u> Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Lxplain)
Estimated Production Per 24 Hours: Oil <u>3</u> Bbl's. Gas <u>10</u> Mcf Water _____ Bbl's. Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Solid <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 08741
 LOCATION Ottawa KS
 FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-10-06	1294	Zachariah # 20	9	9	20	JF
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Blue Jay Operating			506	Frc Mad.		
MAILING ADDRESS			164	Ric Arb		
4916 Camp Bowie Blvd Ste 204			237	Ala Hie		
CITY	STATE	ZIP CODE	505-7106	Max Mad		
Ft Worth	TX	76107				

JOB TYPE Long string HOLE SIZE 5 9/8 HOLE DEPTH 1550' CASING SIZE & WEIGHT 5 1/2"
 CASING DEPTH 1547' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gall/sk _____ CEMENT LEFT in CASING 5 1/2" Plug
 DISPLACEMENT 37.7 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 6 BPM

REMARKS: Wash last 10' casing in hole. Mix + Pump 30 BBLs Soap Flush (ESA-41). Mix + Pump 254 SKS Thickset Cement. Flush pump + lines clean. Displace 5 1/2" rubber Plug to casing T.D. w/ 37.7 BBLs Fresh water Pressure to 800# PSF. Release pressure to set Float Valve. Check plug depth w/ measuring line.
 Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump 164		800.00
5406	6.5 mi	MILEAGE Pump Truck 164		204.75
5407A	11.938 Ton	Ton Mileage 257.		814.77
5503C	4 hrs	Transport 505-T106		392.00
1126A	240 SKS	Thickset Cement		3516.00
1110A	1270 #	Kol Seal		457.30
1107	178 #	Flo Seal		320.40
4406	1	5 1/2" Rubber Plug		56.00
1238	1 Gal	ESA-41 (soap)		33.25
		Sub Total	KCC WICHITA	6594.87
		Tax @ 6.3%		276.16
		SALES TAX ESTIMATED TOTAL		6871.03

WOT# 206848

AUTHORIZATION _____

DATE _____



CONSOLIDATED
OIL WELL
SERVICES, INC.
AN INFINITY COMPANY

REMIT TO
Consolidated Oil Well Services, Inc.
Dept. 1228
Denver, CO 80256

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 206848

Invoice Date: 07/14/2006 Terms: 0/30,n/30

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BLUEJAY OPERATING
4916 CAMP BOWIE BLVD SUITE 204
FT. WORTH TX 76107
() -

ZACHARIAH #20
9-9-20
8741
07/10/06

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	240.00	14.6500	3516.00
1110A	KOL SEAL (50# BAG)	1270.00	.3600	457.20
1107	FLO-SEAL (25#)	178.00	1.8000	320.40
1238	SILT SUSPENDER SS-630,ES	1.00	33.7500	33.75
4406	5 1/2" RUBBER PLUG	1.00	56.0000	56.00

Description	Hours	Unit Price	Total
164 CEMENT PUMP	1.00	800.00	800.00
164 EQUIPMENT MILEAGE (ONE WAY)	65.00	3.15	204.75
237 TON MILEAGE DELIVERY	1.00	814.77	814.77
T-106 WATER TRANSPORT (CEMENT)	4.00	98.00	392.00

Parts:	4383.35	Freight:	.00	Tax:	276.16	AR	6871.03
Labor:	.00	Misc:	.00	Total:	6871.03		
Sublt:	.00	Supplies:	.00	Change:	.00		

RECEIVED
FEB 16 2010

Signed _____

Date _____

KCC WICHITA

BARTLESVILLE, OK
P.O. Box 1453 74005
918/338-0808

EUREKA, Ks
820 E. 7th 67045
620/583-7664

OTTAWA, Ks
2631 So. Eisenhower Ave. 66067
785/242-4044

GILLETTE, WY
300 Enterprise Avenue 82716
307/686-4914

THAYER, Ks
8655 Dorn Road 66776
620/839-5269