

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

9/25/10

Form AGO-1  
October 2008  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

AMENDED

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

CONTRACTOR: License # 5675

Name: McPherson Drilling

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Wellsite Geologist: N/A

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.: \_\_\_\_\_

8/27/08      8/29/08      11/11/08

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - 205-27633-0000

Spot Description: \_\_\_\_\_

SE NW Sec. 24 Twp. 27 S. R. 14  East  West

1980 Feet from  North /  South Line of Section

1980 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

County: Wilson

Lease Name: Thomas, R. Well #: A-8

Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Unknown

Elevation: Ground: 963' Kelly Bushing: N/A

Total Depth: 1455' Plug Back Total Depth: 1440'

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: surface

feet depth to: bottom casing w/ 155 sx cmt.

Drilling Fluid Management Plan ATTN 4-2209  
(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: Shanna Shindle

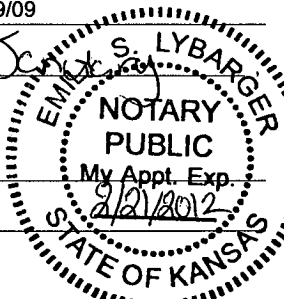
Title: Administrative Assistant Date: 1/19/09

Subscribed and sworn to before me this 19 day of Jan

20 09

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

RECEIVED

Operator Name: Cherokee Wells, LLC Lease Name: Thomas, R. Well #: A-8  
 Sec. 24 Twp. 27 S. R. 14  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 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: High Resolution Compensated Density/Neutron Log, Dual Induction Log - Previously Submitted Cement Bond Log - Enclosed	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum Drillers Log - Previously Enclosed  <div style="text-align: center; font-size: 2em; opacity: 0.5;">CONFIDENTIAL</div>
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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	11"	8 5/8"	18#	43'	Portland	8	
Longstring	6 3/4"	4 1/2"	N/A	1445'	Thickset	155	

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	1243-1244.5	3000# Sand	
4	1210.5-1211.5; 1197.5-1199	5900# Sand	
4	1139-1140.5	3500# Sand	
4	1054.5-1056.75; 1041.25-1042.5	12000# Sand	
4	965-966.25	2600# Sand	

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. 11/12/08		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity
		20	50-75

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ KANSAS CORPORATION COMMISSION
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