

CONFIDENTIAL

ORIGINAL

9/25/10

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

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  
 Wellsite Geologist: N/A  
 Purchaser: Southeastern Kansas Pipeline  
 Designate Type of Completion:  
 New Well \_\_\_\_\_ Re-Entry \_\_\_\_\_ Workover \_\_\_\_\_  
 Oil \_\_\_\_\_ SWD \_\_\_\_\_ SLOW \_\_\_\_\_  
 Gas \_\_\_\_\_ ENHR \_\_\_\_\_ SIGW \_\_\_\_\_  
 CM (Coal Bed Methane) \_\_\_\_\_ Temp: Abd. \_\_\_\_\_  
 Dry \_\_\_\_\_ Other \_\_\_\_\_  
 (Core, WSW, Expl., Cathodic, etc.)

API No. 15 - 205-27579-0000  
 Spot Description: \_\_\_\_\_  
SE NE \_\_\_\_\_ Sec. 24 Twp. 27 S. R. 14  East  West  
1980 Feet from  North /  South Line of Section  
660 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-10  
 Field Name: Cherokee Basin Coal Gas Area  
 Producing Formation: Unknown  
 Elevation: Ground: 869' Kelly Bushing: N/A  
 Total Depth: 1355' Plug Back Total Depth: 1335'  
 Amount of Surface Pipe Set and Cemented at: 42' 10" 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/ 140 sx cmt.

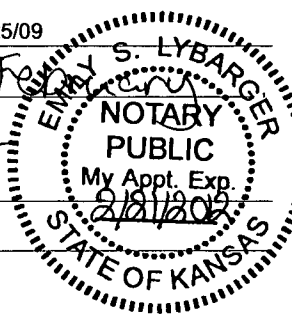
If Workover/Re-entry: Old Well Info as follows:  
 Operator: \_\_\_\_\_  
 Well Name: \_\_\_\_\_  
 Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
 \_\_\_\_\_ Deepening \_\_\_\_\_ Re-perf. \_\_\_\_\_ Conv. to Enhr. \_\_\_\_\_ Conv. to SWD  
 \_\_\_\_\_ Plug Back: \_\_\_\_\_ Plug Back Total Depth  
 \_\_\_\_\_ Commingled \_\_\_\_\_ Docket No.: \_\_\_\_\_  
 \_\_\_\_\_ Dual Completion \_\_\_\_\_ Docket No.: \_\_\_\_\_  
 \_\_\_\_\_ Other (SWD or Enhr.?) \_\_\_\_\_ Docket No.: \_\_\_\_\_  
8/12/08 8/14/08 10/14/08  
 Spud Date or \_\_\_\_\_ Date Reached TD \_\_\_\_\_ Completion Date or  
 Recompletion Date \_\_\_\_\_ Recompletion Date

Drilling Fluid Management Plan AA INJ 4 2109  
 (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: Stamm Shuler  
 Title: Administrative Assistant Date: 2/25/09  
 Subscribed and sworn to before me this 25 day of February  
 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

**RECEIVED**  
 KANSAS CORPORATION COMMISSION  
 MAR 30 2009

Operator Name: Cherokee Wells, LLC Lease Name: Thomas, R. Well #: A-10  
 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 Submitted
--	---

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#	42' 10"	Portland	8	
Longstring	6 3/4"	4 1/2"	10.5#	1343'	Thickset	140	

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	1147-1148'	6100# Sand	
4	1099.25-1100.25'	2300# Sand	
4	1039-1041'	3900# Sand	
4	955-957; 941.5-943'	13900# Sand	
4	863-864	3200# Sand	

**RECEIVED**  
 KANSAS CORPORATION COMMISSION  
**MAR 30 2009**  
 CONSERVATION DIVISION  
 WICHITA, KS

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. <u>10/15/08</u>		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.
		20	50-75
Gas-Oil Ratio		Gravity	

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: _____ _____
--	---	--