

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

12/18/08

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: P.O. Box 296  
 Address 2: \_\_\_\_\_  
 City: Fredonia State: KS Zip: 66736 + \_\_\_\_\_  
 Contact Person: Emily Lybarger  
 Phone: ( 620 ) 378-3650 **CONFIDENTIAL**  
 CONTRACTOR: License # 33072  
 Name: Well Refined Drilling **DEC 18 2008**  
 Wellsite Geologist: N/A **KCC**  
 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.: \_\_\_\_\_  
12/4/08 12/8/08  
 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

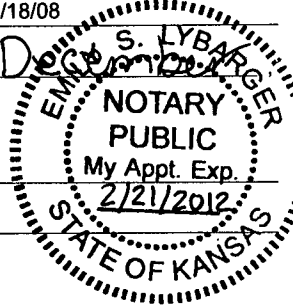
API No. 15 - 205-27723-0000  
 Spot Description: W2-SW-SW  
 W2 SW SW - Sec. 23 Twp. 28 S. R. 14  East  West  
660 Feet from  North /  South Line of Section  
330 Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
 County: Wilson  
 Lease Name: Fedell Well #: A-1  
 Field Name: Cherokee Basin Coal Gas Area  
 Producing Formation: Unknown  
 Elevation: Ground: 893' Kelly Bushing: N/A  
 Total Depth: 1230' Plug Back Total Depth: N/A  
 Amount of Surface Pipe Set and Cemented at: 42' 9" Feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set: \_\_\_\_\_ Feet  
 If Alternate II completion, cement circulated from: surface 1220  
 feet depth to: bottom casing w/ 130 **Alt 2 - Dsg - 4/16/09** <sup>sx cmt</sup>

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

**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 Shindler  
 Title: Administrative Assistant Date: 12/18/08  
 Subscribed and sworn to before me this 18 day of December  
 20 08.  
 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**

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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	<b>PRODUCTION INTERVAL:</b> _____ _____ <b>KANSAS CORPORATION COMMISSION</b>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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Operator Name: Cherokee Wells, LLC Lease Name: Fedell Well #: A-1  
 Sec. 23 Twp. 28 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: <b>High Resolution Compensated Density/Neutron Log, Dual Induction Log</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Driller Log - Enclosed   <div style="text-align: right; font-size: 1.2em;">                     KCC                      DEC 13 2008                 </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	12 1/4"	8 5/8"	24#	42' 9"	Portland	10	
Longstring	6 3/4"	4 1/2"	10.5#	1220'	Thickset	130	

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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	N/A	N/A	N/A

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. _____		Producing Method: <input type="checkbox"/> Flowing <input 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 _____

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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# Well Refined Drilling Co., Inc.

4230 Douglas Road Thayer, KS 66776

Contractor License # 33072

620-839-5581/ Office; 620-432-6170/Jeff Kephart Cell; 620-839-5582/FAX



Rig #:	2	Lic: 33539
API #:	15-205-27723-0000	
Operator:	Cherokee Wells, LLC	
	4916 Camp Bowie Suite 204	
	Fort Worth, TX 76107	

S23	T28S	R14E
Location:		W2,SW,SW
County:		Wilson

				Gas Tests			
Well #:	A-1	Lease Name:	Fedell	Depth	Inches	Orifice	flow - MCF
Location:	660	FSL	Line	205		Trace	
	330	FWL	Line	305		Trace	
Spud Date:	12/4/2008			405		Trace	
Date Completed:	12/8/2008	TD:	1230'	480	5	1/4"	3.71
Driller:	Shaun Beach			505	Gas Check Same		
Casing Record	Surface	Production		605	7	1/2"	16.7
Hole Size	12 1/4"	6 3/4"		705	Gas Check Same		
Casing Size	8 5/8"			805	Gas Check Same		
Weight				905	12	1/2"	21.9
Setting Depth	42' 9"			1005	Gas Check Same		
Cement Type	Portland			1180	5	3/4"	31.6
Sacks	10						
Sacks							
Note:							

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08LL-120808-R2-105-Fedell A-1-CWLLC-CW-218

## Well Log

Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	2	overburden	339	346	shale	695	710	lime
2	8	clay	346	347	lime	710	712	shale
8	41	shale	347	373	shale	712	714	blk shale
41	90	lime	373	478	lime	714	731	lime
90	192	shale	478	480	blk shale	731	740	shale
192	203	lime	480	515	sand	740	770	sand
203	235	shale	515	525	shale			picked up water
235	293	lime	525	554	lime	770	803	shale
		oil show	554	556	blk shale	803	804	lime
255		added water	556	628	lime	804	805	coal
293	301	shale	628	632	shale	805	810	shale
301	325	sand	632	634	blk shale	810	827	lime
325	327	blk shale	634	640	lime	827	829	blk shale
327	328	coal	640	668	shale	829	831	lime
328	333	shale	668	670	blk shale	831	844	shale
333	339	sand	670	695	shale	844	860	shale

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**CONSOLIDATED**  
Oilfield Services, LLC

**ENTERED**

TICKET NUMBER 20681  
LOCATION Euclid  
FOREMAN Troy Smith

PO Box 884, Chanute, KS 66720  
820-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-9-08	2890	Sedell A-1				Osage
CUSTOMER Domestic Energy Partners			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 4916 Camp Bowie Suite 200			520	Cliff		
CITY Fort Worth			502	Phil		
STATE TX						
ZIP CODE 76107						

JOB TYPE LS HOLE SIZE 8 1/2" HOLE DEPTH 1230' CASING SIZE & WEIGHT 4 1/2" 10.5"  
CASING DEPTH 1220' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT 13.20 SLURRY VOL \_\_\_\_\_ WATER gal/sk 8" CEMENT LEFT IN CASING 0'  
DISPLACEMENT 19.481 DISPLACEMENT PSI 600 MIX PSI 1100 @ 1 1/2 RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig 40 to 4 1/2" Casing. Break Circulation w/ 1000  
Pump lost Gel-Flud. 10001 Bar water. Mixed 130SK Thick Set Cement w/ 5"  
Kol-Seal @ 12.4" API. Wash out Pump + loose Release Plug. Displace w/ 130SK  
Water. Final Pumping Pressure 600 PSI. Bump Plug to 1100 PSI Limit Device  
Release Pressure. Float Held. Good Cement to surface - 6.00 Skips to API

*Job Complete*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	40	MILEAGE	3.45	138.00
1126A	130skt	Thick Set Cement	17.00	2210.00
1110A	650"	Kol-Seal 5"	.42	273.00
1118A	300"	Gel-Flud	.17	51.00
5407		Ton-Mileage	19.6	315.00
4404	1	4 1/2" Top Rubber Plug	45.00	45.00
		<i>Thank!</i>		
			<u>Sub Total</u>	<u>3765.00</u>
			SALES TAX	<u>162.48</u>
			ESTIMATED TOTAL	<u>4127.48</u>

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Revin 3737

AUTHORIZATION called by Troy Smith

201918  
TITLE Co-Rep

DATE \_\_\_\_\_  
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