

12/18/08

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

CONFIDENTIAL

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
CONTRACTOR: License # 33072
Name: Well Refined Drilling
Wellsite Geologist: N/A
Purchaser: Southeastern Kansas Pipeline **DEC 1 2008**
Designate Type of Completion:
 New Well _____ Re-Entry _____ **KCC** 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.: _____
12/3/08 12/11/08
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

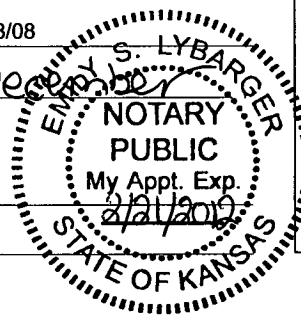
API No. 15 - 205-27738-0000
Spot Description: NE-SW-SW-NW
NE SW SW NW Sec. 7 Twp. 28 S. R. 15 East West
2200 Feet from North / South Line of Section
400 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Wilson
Lease Name: Jantz Well #: A-11
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Unknown
Elevation: Ground: 874' Kelly Bushing: N/A
Total Depth: 1230' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at: 21' 6" 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/ 130 sx cmt.

Drilling Fluid Management Plan APPENDIX 4-1409
(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 Skiff
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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Operator Name: Cherokee Wells, LLC Lease Name: Jantz Well #: A-11
 Sec. 7 Twp. 28 S. R. 15 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	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Driller Log - Enclosed <div style="text-align: center;"> KCC DEC 1 8 2008 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	12 1/4"	8 5/8"	26#	21' 6"	Portland	5	
Longstring	6 3/4"	4 1/2"	10.5#	1220'	Thickset	130	

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 #:	3	Lic # 33539
API #:	15-205-27738-0000	
Operator:	Cherokee Wells, LLC	
	4916 Camp Bowie Blvd	
	Fort Worth, TX 76107	



S7	T28S	R15E
Location:		NE, SW, SW, NW
County:		Wilson

				Gas Tests			
Well #:	A-11	Lease Name:	Jantz	Depth	Inches	Orifice	flow - MCF
Location:	2200 FNL	Line		480	3	3/8"	6.18
	400 FWL	Line		530	Gas Check Same		
Spud Date:	12/3/2008			580	Gas Check Same		
Date Completed:	12/11/2008	TD:	1230	605	Gas Check Same		
Driller:	Joe Chaloupek			730	Gas Check Same		
Casing Record	Surface	Production		755	Gas Check Same		
Hole Size	12 1/4"	6 3/4"		780	Gas Check Same		
Casing Size	8 5/8"			805	Gas Check Same		
Weight	26#			830	Gas Check Same		
Setting Depth	21' 6"			855	2	1/2"	8.87
Cement Type	Portland			880	Gas Check Same		
Sacks	5			930	3	1/2"	10.9
Feet of Casing				1005	Gas Check Same		
				1055	Gas Check Same		
				1180	Gas Check Same		
				1205	10	1/2"	19.9

08LL-121108-R3-076-Jantz A-11-CWLLC-CW-220

Well Log								
Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	1	overburden	353	443	lime	635	654	shale
1	4	clay	443	445	shale	654	656	lime
4	13	sand	445	452	lime	656	659	shale
13	18	lime	452	473	sand	659	672	lime
18	20	sand	473	482	sandy shale	672	676	shale
20	47	lime	482	490	lime	676	688	sand
47	136	sand	490	500	shale	688	706	shale
136	145	shale	500	518	lime	706	708	coal
145	160	lime	518	519	shale	708	713	shale
160	186	shale	519	521	blk shale	713	732	sand
186	260	lime	521	576	lime	732	733	coal
218	235	odor & show	576	576	lime	733	758	sand
260	286	shale	576	577	shale	758	765	shale
286	300	sand	577	580	blk shale	765	769	lime
300	325	shale	580	594	shale	769	770	coal
325	331	lime	594	595	coal	770	772	shale
331	342	shale	595	610	sand	772	795	lime
342	348	lime	610	625	shale	765	771	odor
348	353	sand	625	635	lime	795	797	blk shale

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Operator: Cherokee Wells LLC			Lease Name: Jantz		Well #	A-11		page 2
Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
797	819	shale	1176	1187	chat			
819	825	sand	1187	1230	lime			
825	826	coal	1230		Total Depth			
826	844	lime						
844	845	shale						
845	847	blk shale						
847	849	shale						
849	859	lime						
859	861	shale						
861	862	coal						
862	869	shale						
869	873	lime						
873	876	sand						
876	887	shale						
887	903	sand						
903	907	sandy shale						
907	913	shale						
913	916	sand						
		odor & show						
916	917	coal						
917	936	shale						
936	938	lime						
938	953	sand						
953	991	shale						
991	993	coal						
993	997	shale						
997	998	coal						
998	1034	shale						
1034	1035	coal						
1035	1040	sandy shale						
1040	1057	shale						
1057	1063	sand						
1063	1158	shale						
1158	1159	coal						
1159	1176	shale						

Notes:

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CONSOLIDATED
ENERGY SERVICES, LLC



ENTERED

TICKET NUMBER 20706
LOCATION Frank
FOREMAN Tom Stricker

PO Box 884, Chanute, KS 66720
820-431-8210 or 800-457-8876

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-12-08	8890	Jantz A-11				
CUSTOMER Domestic Energy Partners			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 4916 Camp Bowie Suite 200			520	Cliff		
CITY Ft. Worth			502	Al		
STATE TX		ZIP CODE 76107				

JOB TYPE 4 1/2 HOLE SIZE 6 1/4" HOLE DEPTH 1230' CASING SIZE & WEIGHT 4 1/2" 19.5"
CASING DEPTH 1220' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 12.4" SLURRY VOL 29.81 WATER gal/sk 8" CEMENT LEFT IN CASING 0'
DISPLACEMENT 19.481 DISPLACEMENT PSI 700 MIX PSI 1300 8 p/ly RATE _____

REMARKS: Safety Meeting. Rig up to 4 1/2" casing. Break Circulation - 1 2000 water.
Pump back Gel-Flush. 1000 Dye water. Mixed 130 lbs Thick Gel at 8" hole
@ 13.9" gal work out Pump + line. Release Plug. 11 gal - 1 1000 water.
Final Pumping Pressure 700 PSI. Pump PLY to 1200 PSI. 4000 gal before
Pressure. Float Hold. Good Cement to surface = 6.861 slurry @ Pit.
506 Complete

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	40	MILEAGE	3.65	146.00
1126A	130 lbs	Thick Gel Cement	17.00	2210.00
1110A	650"	Kal-Seal 5" / sk	.42	273.00
1118A	200"	Gel-Flush	.17	51.00
5407		Ton-Mileage	m/k	245.00
4401	1	4 1/2" Top Baller Pq	45.00	45.00
		Thick Gel		
			546.70	546.70
			6.22	6.22
			SALER TAX	162.48
			ESTIMATED TOTAL	4127.48

Revin 3737

028048

AUTHORIZATION called by Tyler Webb TITLE Co-Op

DATE: _____
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