

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008

Form Must Be Typed

12/18/08

Handwritten initials and date

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 **DEC 18 2008**
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.)

API No. 15 - 205-27697-0000
Spot Description: S2-NW-NW-NW
S2-NW-NW Sec. 23 Twp. 27 S. R. 14 East West
655 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: K. Claiborne Well #: A-17
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Unknown
Elevation: Ground: 858' Kelly Bushing: N/A
Total Depth: 1380' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at: 51' 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/ 145 ^{sx cmt}

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.: _____

Handwritten note: AIF2-DIG-4/1/09

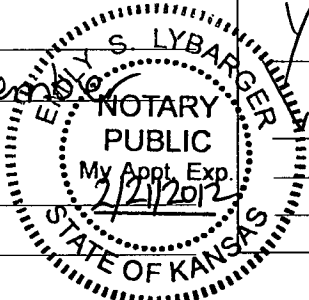
If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
_____ Deepening _____ Re-perf. _____ Conv. to Enhr. _____ Conv. to SWD
_____ Plug Back: _____ Plug Back Total Depth
_____ Commingled, _____ Docket No.: _____
_____ Dual Completion _____ Docket No.: _____
_____ Other (SWD or Enhr.?) _____ Docket No.: _____
11/13/08 11/17/08
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

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 Hinkle
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

JAN 23 2009

RECEIVED

Operator Name: Cherokee Wells, LLC Lease Name: K. Claiborne Well #: A-17
 Sec. 23 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 | <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-weight: bold; font-size: 1.2em;"> KCC DEC 18 2008 CONFIDENTIAL </div> |
|--|--|

| 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# | 51' | Portland | N/A | |
| Longstring | 6 3/4" | 4 1/2" | 10.5# | 1370' | Thickset | 145 | |
| | | | | | | | |

| 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: _____ KANSAS CORPORATION COMMISSION |
|---|--|--|

CHEROKEE WELLS, LLC

December 18, 2008

Kansas Corporation Commission
130 South Market Street
Room 2078
Wichita, KS 67202

RE: K. CLAIBORNE #A-17
15-205-27697-0000
23-27s-14e

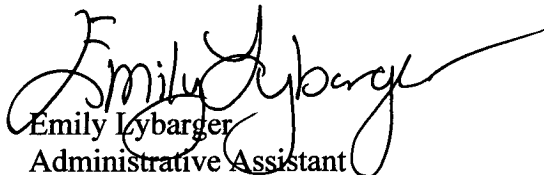
KCC
DEC 18 2008
CONFIDENTIAL

To Whom It May Concern:

This letter is being sent as a formal request by Cherokee Wells, LLC for the enclosed Well Completion Form and any other information gathered from this well to be held in confidence by the Kansas Corporation Commission (KCC) for the maximum allowable time period.

A similar letter is being sent to the Kansas Geological Survey requesting confidentiality for all samples and any other information required to be filed as well as wireline logs, driller's logs or any other information filed with the KCC.

Sincerely,

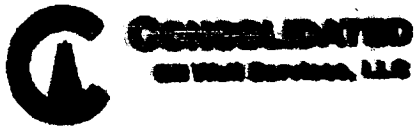

Emily Lybarger
Administrative Assistant

KANSAS CORPORATION COMMISSION

JAN 23 2009
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4916 Camp Bowie Blvd.
Suite 200
Fort Worth, TX 76107

Phone: 817-626-9898
Fax: 817-624-1374



ENTERED

TICKET NUMBER 20430
 LOCATION FUREKA
 FOREMAN Lick Lobb

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 |
|-----------------|------------|--------------------|---------|----------|---------|--------|
| 11-12-08 | 2190 | K. Clayborne A-17 | | | | Butler |
| CUSTOMER | | | TRUCK # | DRIVER | TRUCK # | DRIVER |
| MAILING ADDRESS | | | 463 | Shannon | | |
| CITY | | | 515 | Jarrod | | |
| STATE | | | 437 | Colin | | |
| ZIP CODE | | | | | | |
| Foot Worth | | | | | | |
| Tx | | | | | | |
| 70107 | | | | | | |

JOB TYPE logstring HOLE SIZE 6 7/8" HOLE DEPTH 1380' CASING SIZE & WEIGHT 4 1/2" 10.5"
 CASING DEPTH 1370' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.4° SLURRY VOL 44 bbl WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 2 1/4 bbl DISPLACEMENT PSI 800 RATE PSI 1200 RATE _____

REMARKS: Safety meeting - Rig up to 4 1/2" casing. Break circulation w/ 30 bbl
fresh water pump 6 sec gel-flush, 20 bbl water spacer 12 bbl die water
Mixed 14.5 sec thickest cement w/ 5" Holscol @ 13.9°/sec. Washout
pump + lines, shut down release plug. Displace w/ 2 1/4 bbl fresh water. Final
pump pressure 800 PSI. Bump plug to 1200 PSI. wait 2 minutes release
pressure, float held. Core cement returns to surface - 8 bbl slurry to pit.
Job complete Rig down

"Thank You"

| 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 |
| 1186A | 145 sacs | thickest cement | 12.00 | 2160.00 |
| 1110A | 225' | 5" Holscol @/hr | .88 | 304.50 |
| 1118A | 300' | gel-flush | .17 | 51.00 |
| 5407 | 7.98 | ten-mileage back to | 0.46 | 3.55 |
| 5502C | 3.5 hrs | 80 bbl W.C. TEL | 100.00 | 350.00 |
| 1123 | 3000 gals | city water | 14.00 | 42.00 |
| 4404 | 1 | 4 1/2" top center plug | 45.00 | 45.00 |
| | | | 6.32 | |
| | | | SUBTOTAL | 4683.50 |
| | | | SALES TAX | 113.10 |
| | | | ESTIMATED TOTAL | 4826.60 |

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Rev'n 3737

001519

AUTHORIZATION called by Tyler Webb TITLE Co. Lp DATE _____

KANSAS CORPORATION

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