

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

3/25/11
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
CONTRACTOR: License # 33072
Name: Well Refined 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.)

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.: _____
3/16/09 3/18/09
Spud Date or Date Reached TD Completion Date or Recompletion Date

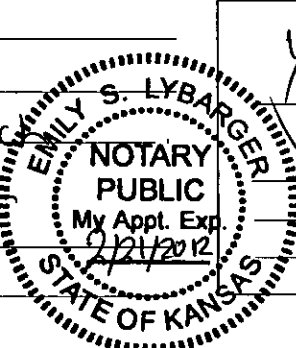
API No. 15 - 205-27713-0000
Spot Description: _____
NW SE SE SW Sec. 22 Twp. 27 S. R. 15 East West
360 Feet from North / South Line of Section
2280 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Wilson
Lease Name: Clinesmith Well #: A-2
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Unknown
Elevation: Ground: 872' Kelly Bushing: N/A
Total Depth: 1280' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at: 21' 4" 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 AKTINJ 5-14-09
(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: Harmon Shultz
Title: Administrative Assistant Date: 3/25/09
Subscribed and sworn to before me this 25 day of March
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
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Cherokee Wells, LLC Lease Name: Clinesmith Well #: A-2
 Sec. 22 Twp. 27 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 Drillers Log - Enclosed
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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#	21' 4"	Portland	4	
Longstring	6 3/4"	4 1/2"	10.5#	1268'	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 Entr. _____		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) _____	PRODUCT RECEIVED KANSAS CORPORATION COMMISSION MAR 30 2009
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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 #:	15-205-27713-0000	
Operator:	Cherokee Wells, LLC	
	4916 Camp Bowie Blvd	
	Fort Worth, TX 76107	

S22	T27S	R15E
Location:		SE,SE,SW
County:		Wilson

				Gas Tests			
Well #:	A-2	Lease Name:	Clinesmith	Depth	Inches	Orifice	flow - MCF
Location:	360	FSL	Line	280		No Flow	
	2280	FWL	Line	305		No Flow	
Spud Date:	3/16/2009			330		No Flow	
Date Completed:	3/18/2009			405		No Flow	
TD:	1280						
Driller:	Shaun Beach			530		No Flow	
Casing Record	Surface	Production		680		Trace	
Hole Size	12 1/4"	6 3/4"		730		No Flow	
Casing Size	8 5/8"			805	2	1/4"	2.37
Weight	24#			955	5	1/4"	3.71
Setting Depth	21' 4"			980	Gas Check Same		
Cement Type	Portland			1005	Gas Check Same		
Sacks	4			1030	8	1/4"	4.76
Feet of Casing				1205	8	3/8"	10.1
				1230	Gas Check Same		
				1280	Gas Check Same		

09LC-031809-R3-009-Clinesmith A-2-CWLLC-CW-237

Well Log

Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	2	overburden	319	320	coal	631	635	lime
2	18	clay	320	345	shale	635	667	shale
18	148	shale	330		add water	667	675	lime
148	170	lime	345	357	lime	675	677	shale
170	173	sand	357	363	shale	677	679	blk shale
173	175	lime	363	386	lime	679	684	lime
175	182	sand	386	387	blk shale	684	687	shale
182	212	shale	387	450	lime	687	701	sand
212	216	lime	450	457	shale	701	712	shale
216	223	shale	457	460	blk shale	712	715	sand
223	224	sand	460	465	lime	715	717	coal
224	270	lime	465	475	sand	717	734	sand
270	271	blk shale	475	483	lime	734	738	sandy shale
271	274	lime	483	485	sahale	738	765	shale
274	285	sand	485	503	lime	765	768	lime
285	300	shale	503	508	shale	768	769	coal
300	301	coal	508	510	blk shale	769	796	lime
301	317	shale	510	552	lime	796	798	blk shale
317	319	sand	552	631	shale	798	799	coal

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Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
799	813	shale	1153	1165	shale			
813	817	sandy shale	1165	1199	sand			
817	820	lime			oil odor			
820	826	sand	1199	1202	coal			
826	829	sandy shale	1202	1217	shale			
829	874	lime	1217	1218	Mississippi chat			
		more water	1218	1280	Mississippi lime			
874	883	shale	1280		Total Depth			
883	883	shale						
883	886	lime						
886	889	shale						
889	910	sand						
910	915	sandy shale						
915	917	shale						
917	921	sand						
921	923	sandy shale						
923	936	sand						
936	938	coal						
938	941	shale						
941	942	lime						
942	952	shale						
952	956	lime						
956	958	blk shale						
958	959	coal						
959	964	shale						
964	969	lime						
969	981	shale						
981	990	sand						
990	993	shale						
993	995	coal						
995	999	sand						
999	1001	coal						
1001	1008	sandy shale						
1008	1010	lime						
1010	1014	shale						
1014	1016	coal						
1016	1040	shale						
1040	1042	sand						
1042	1044	sandy shale						
1044	1048	laminated sand						
1048	1050	sandy shale						
1050	1069	shale						
1069	1073	lime						
1073	1102	shale						
1102	1108	sandy shale						
1108	1120	sand						
1120	1128	sandy shale						
1128	1140	shale						
1140	1153	sand						

Notes:

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CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 21037

LOCATION EUREKA

FOREMAN KEVIN MCCOY

*12
2/19/09*

PO Box 884, Chanute, KS 66720
620-431-8210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-19-09	2890	Clinesmith A-2	22	27S	15 E	WILSON
CUSTOMER <u>Domestic Energy Partners</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>4916 Camp Bowe Ste 200</u>			445	Justin		
CITY <u>Fort Worth</u>			441	Ed		
STATE <u>Tx</u>						
ZIP CODE <u>76107</u>						

JOB TYPE Longstump HOLE SIZE 6 3/4 HOLE DEPTH 1400' CASING SIZE & WEIGHT 4 1/2 10.5" New
 CASING DEPTH 1268 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.4" SLURRY VOL 39 BBL WATER gal/sk 8" CEMENT LEFT in CASING 0'
 DISPLACEMENT 21" BBL DISPLACEMENT PSI 900 BUMP PSI 1300 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2 Casing. Break Circulation w/ 30 BBL fresh water. Pump 6 sks Gel Flush. 10 BBL Dye water. Mixed 130 sks Thick Set Cement w/ 5" Kol-Seal /sk @ 13.4" /gal, yield 1.69. wash out Pump & Lines. shut down. Release Plug. Displace w/ 21 BBL fresh water. final Pumping Pressure 900 PSI. Bump Plug to 1300 PSI. wait 2 mins. Release Pressure. float held. shut casing in @ 0 PSI. Good Cement Returns to Surface = 5 BBL Slurry (17 sks) to pit. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	870.00	870.00
5406	40	MILEAGE	3.45	138.00
1126 A	130 sks	THICK Set Cement	16.00	2080.00
1110 A	650 "	KOL-SEAL 5" /sk	.39 "	253.50
1118 A	300 "	Gel Flush	.16 "	48.00
5407	7.15 Tons	Ton Mileage BULK TRUCK	M/C	296.00
4404	1	4 1/2 Top Rubber Plug	43.00	43.00
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Sub Total				3728.50
SALES TAX			6.3%	152.74
ESTIMATED TOTAL				3881.24

Form 3737

AUTHORIZATION Greg Brunner

TITLE _____

029183

DATE 3/19/09

THANK YOU