

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

5/04/11

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: Tracy Miller
Phone: (620) 378-3650
CONTRACTOR: License # 33072
Name: Well Refined Drilling Co., Inc.
Wellsite Geologist: _____
Purchaser: SEK Pipeline + Transmission Co.
Designate Type of Completion:
 New Well _____ Re-Entry _____
_____ Oil _____ SWD _____ SLOW _____
_____ Gas _____ ENHR _____ SIGW _____
 CM (Coal Bed Methane) _____ Temp. Abd. _____
_____ Dry _____ Other _____
(Core. WSW. Expl.. Cathodic, etc.)

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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.: _____
3/25/09 4/8/09
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 205-27727-00-00
Spot Description: _____
W/2 NE SE SW Sec. 22 Twp. 28 S. R. 14 East West
990 Feet from North / South Line of Section
2300 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Wilson
Lease Name: Nelson Well #: A-1
Field Name: CBCGA
Producing Formation: N/A
Elevation: Ground: 903 est. Kelly Bushing: _____
Total Depth: 1255' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 42' 7" Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1243.73
feet depth to: surface w/ 135 sx cmt.

Drilling Fluid Management Plan Att #105 7709
(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: Sharon Shedd
Title: Administrative Assistant Date: 5/4/09
Subscribed and sworn to before me this 4 day of May
09
Notary Public: Tracy Miller
Date Commission Expires: _____

TRACY MILLER
Notary Public - State of Kansas
My Appl. Expires 12/1/2010

KCC Office Use ONLY
Y Letter of Confidentiality Received
If Denied, Yes Date: _____
_____ Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution

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Operator Name: Cherokee Wells, LLC Lease Name: Nelson Well #: A-1
 Sec. 22 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: 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 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	12.25"	8.625"	24#	42' 7"	Portland	9	
Longstring	6.75"	4.5"	10.5#	1243.73'	Thick Set	135	
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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
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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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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	S22	T28S	R14E
API #:	15-205-27727-0000		Location: N2,S2,SW		
Operator: Cherokee Wells, LLC			County: Wilson		
4916 Camp Bowie Blvd					
Fort Worth, TX 76107					

			Gas Tests			
Well #:	A-1	Lease Name: Nelson	Depth	Inches	Orifice	flow - MCF
Location:	990 FSL	Line	355		No Flow	
	1320 FWL	Line	505		No Flow	
Spud Date:	3/25/2009		555		No Flow	
Date Completed:	4/8/2009 TD: 1255'		580		No Flow	
Driller:	Shaun Beach		655	13	3/8"	12.9
Casing Record	Surface	Production	705	1	1"	25.8
Hole Size	12 1/4"	6 3/4"	755	Gas Check Same		
Casing Size	8 5/8"		830	Gas Check Same		
Weight	24#		930	Gas Check Same		
Setting Depth	42' 7"		980	3	1/2"	10.9
Cement Type	Portland	MAY 3 4 2009	1005	Gas Check Same		
Sacks	9		1080	Gas Check Same		
Feet of Casing			1180	Gas Check Same		
			1205	6	1/2"	15.4

09LD-040809-R3-012-Nelson A-1-CWLLC-CW-240

Well Log								
Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	1	overburden	393	497	lime	661	662	lime
1	11	clay			little odor	662	666	sand
11	21	sand	497	499	shale	666	673	sandy shale
21	68	shale	499	500	blk shale	673	683	shale
68	107	lime	500	510	lime	683	684	blk shale
107	219	shale	510	534	sand	684	686	shale
219	240	lime	534	535	shale	686	703	lime
240	264	shale	535	540	sand	703	715	shale
264	310	lime	540	542	coal	715	731	lime
270		good oil smell			not enough for sample	731	732	blk shale
310	315	shale	542	545	shale	732	735	lime
315	348	sand	545	560	lime	735	740	shale
348	349	shale	560	565	shale	740	750	sand
349	350	coal	565	575	lime	750	758	shale
350	353	shale	575	577	blk shale	758	770	sand
353	357	sand	577	639	lime	770	771	coal
357	359	shale	639	650	shale			not enough for sample
359	365	lime	650	651	blk shale	771	774	shale
365	393	shale	651	661	shale	774	791	sandy shale

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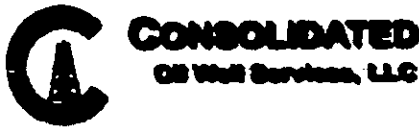
Operator: Cherokee Wells LLC			Lease Name: Nelson			Well # A-1		
Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
791	799	shale						
799	808	sand						
808	818	shale						
818	821	lime						
821	823	coal						
823	850	lime						
850	862	shale						
862	878	sand						
878	894	lime						
894	897	blk shale						
897	902	lime						
902	907	shale						
907	908	blk shale						
908	909	coal						
909	916	shale						
916	918	sand						
918	919	lime						
919	952	sand						
		odor						
952	968	shale						
968	969	coal						
969	984	shale						
984	987	lime						
987	992	blk shale						
992	993	coal						
993	1035	shale						
1035	1040	sand						
1040	1051	shale						
1051	1061	sand						
		with odor						
1061	1066	shale						
1066	1067	coal						
1067	1075	shale						
1075	1083	sand						
1083	1098	shale						
1098	1099	Red Bed shale						
1099	1110	shale						
1110	1112	lime						
1112	1120	shale						
1120	1131	Red Bed shale						
1131	1166	shale						
1166	1168	sand						
1168	1169	coal						
1169	1198	shale						
1198	1221	Mississippi chat						
		with odor						
1121	1255	Mississippi lime						
1255		Total Depth						

Notes:

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ENTERED

TICKET NUMBER 21094
LOCATION Eureka
FOREMAN Russell Mcloy

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-9-09	2890	Nelson A-1	22	28	14 E	Wilson
CUSTOMER Domestic Energy Partners			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 4916 Camp Bowie Suite 200			520	Cliff		
CITY STATE ZIP CODE Forth Worth TX 76107			515	Chris		

JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 1255 CASING SIZE & WEIGHT 4 1/2 10.5 #
 CASING DEPTH 1243.73 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.4 SLURRY VOL 40 Bbl WATER gal/sk _____ CEMENT LEFT IN CASING 0
 DISPLACEMENT 20 3/4 Bbl DISPLACEMENT PSI 600 MAX PSI Bump Plug 1100 RATE _____

REMARKS: Safety meeting, Rig up to 4 1/2 casing Break Circulation w/ 30 Bbl water
 Mix 300# Gel Flush Pump 5 Bbl Fresh water spacer. Mix 135 SK's T.S.
 Cement w/ 5# Kolseal per/sk @ 13.4 # w/ yield 1.69 wash out pump
 + liners, Release 4 1/2 Top Rubber Plug. Displace w/ 20 3/4 Bbl water. Final
 Pump P&T 600# Bump Plug to 1100# wait 2 min check float float hold.
 7 Bbl good cement slurry to surface. Annulus stayed full. Job complete
 Tear Down.

Thanki
 Russell Mcloy

MAY 24 2009

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	135 SK's	Thick set cement	16.00	2160.00
1110 A	675 #	Kolseal 5 # per/sk	.39	263.25
1118 A	300 #	Gel Flush (Pump Ahead)	.16	48.00
5407A	7.43	Ton mileage Bulk Truck	1.16	344.75
4404	1	4 1/2 Top Rubber Plug	43.00	43.00
			SUBTOTAL	3867.00
			SALES TAX	158.89
			ESTIMATED TOTAL	4,025.89

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Revin 5737 AUTHORIZATION Jimi Welch TITLE CO/Rep DATE 4-9-09
 629393