

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

9/11/09

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33539

Name: Cherokee Wells, LLC

Address 1: P.O. Box 296

Address 2: 1033 Fillmore

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 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.: _____

8/31/09 9/2/09

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 205-27791-0000

Spot Description: NW-SW

_____ NW SW Sec. 31 Twp. 27 S. R. 14 East West

1980 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: B. Haun Well #: A-3

Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Unknown

Elevation: Ground: 982' est. Kelly Bushing: N/A

Total Depth: 1455' Plug Back Total Depth: N/A

Amount of Surface Pipe Set and Cemented at: 43' 5" Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: bottom casing

feet depth to: surface w/ 155 sx cm.

Drilling Fluid Management Plan ATTN 19-3009
(Data must be collected from the Reserve Party)

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: Emily Lybarger

Title: Administrative Assistant Date: 9/11/09

Subscribed and sworn to before me this 11 day of September

20 09

Notary Public: Tracy Miller

Date Commission Expires: _____

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

KCC Office Use ONLY

- Letter of Confidentiality Received
- If Denied, Yes Date: _____
- Wireline Log Received
- _____ Geologist Report Received
- _____ UIC Distribution

Operator Name: Cherokee Wells, LLC Lease Name: B. Haun Well #: A-3
 Sec. 31 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 - Enclosed	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Drillers Log - Enclosed <div style="text-align: center;"> </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"	N/A	43' 5"	Portland	10	
Longstring	6 3/4"	4 1/2"	9.5#	1445'	Thickset	155	

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 <i>(Amount and Kind of Material Used)</i>	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

KCC
SEP 11 2009
CONFIDENTIAL

Rig #:	3	Lic # 33539
API #:	15-205-27791-0000	
Operator:	Cherokee Wells, LLC	
	4916 Camp Bowie Blvd	
	Fort Worth, TX 76107	
S31	T27S	R14E
Location:	NW,SW	
County:	Wilson	



				Gas Tests			
Well #:	A-3	Lease Name:	B Haun	Depth	Inches	Orifice	flow - MCF
Location:	1980	FSL	Line	405		No Flow	
	660	FWL	Line	455		No Flow	
Spud Date:	8/31/2009			505		No Flow	
Date Completed:	9/2/2009			655		No Flow	
Driller:	Louis Heck			755	1	1/4"	1.68
Casing Record	Surface	Production		780	Gas Check Same		
Hole Size	12 1/4"	6 3/4"		805	6	1/4"	4.12
Casing Size	8 5/8"			905	Gas Check Same		
Weight				980	Gas Check Same		
Setting Depth	43' 5"			1030	1	3/8"	3.56
Cement Type	10			1080	2	3/8"	5.05
Sacks				1105	Gas Check Same		
Feet of Casing				1205	Gas Check Same		
				1255	Gas Check Same		
				1305	Gas Check Same		
				1455	Gas Check Same		
09LI-090209-R3-031-B Haun A-3-CWLLC-CW-259							

RECEIVED
SEP 14 2009
KCC WICHITA

Well Log								
Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	3	overburden	524	531	sand	853	904	shale
3	17	clay	531	570	lime	904	944	lime
17	77	shale	570	597	sand	944	951	shale
77	78	lime	597	599	coal	951	963	sand
78	84	shale	599	743	shale	963	972	shale
84	90	lime	743	745	blk shale	972	974	sand
90	122	shale	745	748	shale	974	985	sandy shale
122	141	sand	748	751	lime	985	998	sand
141	159	shale	751	767	sand	998	1020	shale
159	162	lime	767	768	coaql	1020	1023	lime
162	311	sand	768	776	lime	1023	1025	blk shale
311	368	lime	776	779	shale	1025	1026	coal
368	450	shale	779	794	lime	1026	1053	lime
450	462	lime	794	800	shale	1053	1057	blk shale
462	465	blk shale	800	802	blk shale	1057	1070	shale
465	471	shale	802	848	lime	1070	1078	sand
471	474	lime	848	849	blk shale	1078	1081	shale
474	512	shale	849	850	shale	1081	1096	lime
512	524	lime	850	853	blk shale	1096	1098	blk shale



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 23595

LOCATION EUREKA

FOREMAN Rick Ledford

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
9-3-09	8890	B. Hawn A-3				Wilson
CUSTOMER <u>Domestic Energy Partners</u>			Co. <u>T-16</u>			
MAILING ADDRESS <u>4916 Camp Bowie</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY <u>Ft Worth</u>			<u>520</u>	<u>Cliff</u>	<u>KCC</u>	
STATE <u>Tx</u>	ZIP CODE <u>76107</u>		<u>543</u>	<u>David</u>	<u>SEP 11 2009</u>	
CONFIDENTIAL						

JOB TYPE Logstring HOLE SIZE 6 3/4" HOLE DEPTH 1455' CASING SIZE & WEIGHT 4 1/2" 9.5"
 CASING DEPTH 1445' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.4" SLURRY VOL 46 Bbl WATER gal/sk 8.0" CEMENT LEFT in CASING 0'
 DISPLACEMENT 23.4" Bbl DISPLACEMENT PSI 6000 PSI 1000 RATE _____

REMARKS: Safety meeting. Rig up to 4 1/2" casing. Create circulation w/ 30 Bbl fresh water. Pump to set gel-flush, 15 Bbl water spacer, 15 Bbl dye water. Mixed 155 sacks thickset cement w/ 5" Kel-seal 1 1/2" @ 13.4" / 1000 yield 1.07. Washout pump + lines, shut down, release plug. Displace w/ 23.4" Bbls fresh water. Final pump pressure was 133. Bump plug to 1000 PSI. Wait 2 minutes, release pressure, float held. Good 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		
5406	40	MILEAGE	870.00	870.00
			3.95	158.00
1126A	155 sacks	thickset cement	16.00	2480.00
1118A	725"	5" Kel-seal 1 1/2"	.39	302.25
1118A	300"	gel-flush	.16	48.00
5407	8.53	ten-mileage back tie	m/c	291.00
4414	1	4 1/2" top rubber plug	43.00	43.00
			Subtotal	4177.25
			SALES TAX	181.01
			ESTIMATED TOTAL	4358.26

Revin 3737

AUTHORIZATION Joni Welch

TITLE 231146

DATE _____