1078582

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33539
Name: Cherokee Wells LLC
Address 1: 4916 CP BOWIE BLVD
Address 2: STE 204
City: FT WORTH State: TX Zip: 76107 + 4181
Contact Person: Emily Browning
Phone: (817) 626-9898
CONTRACTOR: License # 33072
Name: Well Refined Drilling Company, Inc.
Wellsite Geologist: N/A
Purchaser: Southeastern Kansas Pipeline

Designate Type of Completion:

- [ ] New Well
- [ ] Re-Entry
- [x] Workover

- [ ] Oil
- [ ] WSW
- [ ] SWD
- [ ] SIOW
- [ ] Gas
- [ ] D&A
- [ ] ENHR
- [ ] SIGW
- [ ] OG
- [ ] GSW
- [ ] Temp. Abd.
- [x] CM *(Coal Bed Methane)*
- [ ] Cathodic
- [ ] Other *(Core, Expl., etc.)*:

If Workover/Re-entry: Old Well Info as follows:
Operator: Cherokee Wells, LLC
Well Name: Boyle A-1
Original Comp. Date: 11/27/2007 Original Total Depth: 1405

- [ ] Deepening
- [x] Re-perf.
- [ ] Conv. to ENHR
- [ ] Conv. to SWD
- [ ] Conv. to GSW
- [x] Plug Back: 1389 Plug Back Total Depth
- [ ] Commingled Permit #:
- [ ] Dual Completion Permit #:
- [ ] SWD Permit #:
- [ ] ENHR Permit #:
- [ ] GSW Permit #:

2/17/2012		2/24/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-205-27344-00-01
Spot Description: C NWSE
__ - __ - NW - SE Sec. 31 Twp. 27 S. R. 14 [x] East [ ] West
1980 Feet from [ ] North / [x] South Line of Section
1980 Feet from [x] East / [ ] West Line of Section
Footages Calculated from Nearest Outside Section Corner:
[ ] NE [ ] NW [x] SE [ ] SW
County: Wilson
Lease Name: BOYLE Well #: A-1
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Unknown
Elevation: Ground: 940 Kelly Bushing: 940
Total Depth: 1405 Plug Back Total Depth: 1389
Amount of Surface Pipe Set and Cemented at: 43 Feet
Multiple Stage Cementing Collar Used? [ ] Yes [x] No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from:
feet depth to: w/ 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 #:
Quarter Sec. Twp. S. R. [ ] East [ ] West
County: Permit #:

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

- [x] Letter of Confidentiality Received
  Date: 04/11/2012
- [ ] Confidential Release Date:
- [ ] Wireline Log Received
- [ ] Geologist Report Received
- [ ] UIC Distribution

ALT [ ] I [x] II [ ] III Approved by: NAOMI JAMES Date: 04/12/2012