



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form Must Be Typed
Form must be Signed
All blanks must be Filled

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:

- Checkboxes for completion types: New Well, Re-Entry, Workover, Oil, Gas, OG, CM (Coal Bed Methane), Cathodic, Other (Core, Expl., etc.), WSW, D&A, ENHR, GSW, SIOW, SIGW, Temp. Abd.

If Workover/Re-entry: Old Well Info as follows:

Operator: Cherokee Wells, LLC
Well Name: D. Claiborne A-15
Original Comp. Date: 11/7/2008 Original Total Depth: 1430
Checkboxes for completion details: Deepening, Re-perf., Conv. to ENHR, Conv. to SWD, Conv. to GSW, Plug Back: 1412, Commingled, Dual Completion, SWD, ENHR, GSW with Permit # fields.

3/1/2012 Spud Date or Recompletion Date
Date Reached TD
3/2/2012 Completion Date or Recompletion Date

API No. 15 - 15-205-27527-00-01
Spot Description:
W2 SE SW Sec. 19 Twp. 27 S. R. 14 East West
660 Feet from North / South Line of Section
1650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE NW SE SW
County: Wilson
Lease Name: D. CLAIBORNE Well #: A-15
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Unknown
Elevation: Ground: 934 Kelly Bushing: 934
Total Depth: 1430 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 43 Feet
Multiple Stage Cementing Collar Used? Yes 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

- Checkboxes for office use: Letter of Confidentiality Received (Date: 04/12/2012), Confidential Release Date, Wireline Log Received, Geologist Report Received, UIC Distribution, ALT I II III Approved by: NAOMI JAMES Date: 04/13/2012