



KANSAS CORPORATION COMMISSION 1081892

Form ACO-1

June 2009

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: 1033 FILLMORE STREET
Address 2:
City: FREDONIA State: KS Zip: 66736 +
Contact Person: TRACY MILLER
Phone: (620) 378-3650
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 ☒ Workover
- ☐ Oil ☐ WSW ☐ SWD ☐ SIOW
☒ Gas ☐ D&A ☐ ENHR ☐ SIGW
☐ OG ☐ GSW ☐ Temp. Abd.
☐ CM (Coal Bed Methane)
☐ Cathodic ☐ Other (Core, Expl., etc.):

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

Operator: Cherokee Wells, LLC
Well Name: Reed A-2

Original Comp. Date: 04/16/2008 Original Total Depth: 1380

- ☐ Deepening ☒ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD
☐ Conv. to GSW

- ☐ Plug Back: Plug Back Total Depth
☐ Commingled Permit #:
☐ Dual Completion Permit #:
☐ SWD Permit #:
☐ ENHR Permit #:
☐ GSW Permit #:

04/09/2012

04/10/2012

Spud Date or
Recompletion Date

Date Reached TD

Completion Date or
Recompletion Date

API No. 15 - 15-205-27348-00-01

Spot Description: C E2NWNE
W2 E2 NW NE Sec. 6 Twp. 28 S. R. 14 ☒ East ☐ West
660 Feet from ☒ North / ☐ South Line of Section
1680 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☒ NE ☐ NW ☐ SE ☐ SW

County: Wilson

Lease Name: REED Well #: A-2

Field Name:

Producing Formation: UNKNOWN

Elevation: Ground: 921 Kelly Bushing: 921

Total Depth: 1380 Plug Back Total Depth: 1368

Amount of Surface Pipe Set and Cemented at: 41 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☒ Letter of Confidentiality Received

Date: 05/18/2012

☐ Confidential Release Date:☐ Wireline Log Received☐ Geologist Report Received☐ UIC DistributionALT ☐ I ☒ II ☐ III Approved by: NAOMI JAMES Date: 05/21/2012