

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1108302

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

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33539	API No. 15 - 15-205-24118-00-01			
Name: Cherokee Wells LLC Address 1: PO BOX 296	Spot Description: SW SE NW NW Sec. 6 Twp. 27 S. R. 16 ▼ East West 4125 Feet from North / South Line of Section 4437 Feet from ▼ East / West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW ▼ SE SW			
Address 2: City: FREDONIA State: KS Zip: 66736 +				
Contact Person: TRACY MILLER Phone: (620) 378-3650				
CONTRACTOR: License # . 33539 Name: Cherokee Wells LLC	County: Wilson Lease Name: CLAY BRAMAN Well #: 22			
Wellsite Geologist: N/A	Field Name:			
Purchaser: Designate Type of Completion:	Producing Formation: UNKNOWN Elevation: Ground: 902 Kelly Bushing: 902			
New Well Re-Entry Workover Oil WSW SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. ✓ CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Total Depth: 1101 Plug Back Total Depth:			
Operator: Cherokee Wells, LLC				
Well Name: Clay Braman 22 Original Comp. Date: 03/28/1985	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 #:			
Spud Date or Date Reached TD Completion Date or Recompletion Date				

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:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
☐ UIC Distribution
ALT I I II Approved by: Deanna Garrison Date: 01/22/2013

Side Two

1108302

Operator Name: Che	erokee Wells LLC	<u> </u>	Lease Name:	CLAY BRAM	AN	_ Well #:22			
Sec. 6			County: Wil	County: Wilson					
INSTRUCTIONS: Shi time tool open and clo recovery, and flow rate line Logs surveyed. A	sed, flowing and shu es if gas to surface te	t-in pressures, whethe st, along with final cha	r shut-in pressure re	eached static level.	hydrostatic pres	sures bottom b	ole tomperature fluid		
Drill Stem Tests Taken (Attach Additional Sheets) Samples Sent to Geological Survey Yes No			Log Formation	n (Top), Depth ar	nd Datum	Sample			
		i	me		Тор				
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	d Electronically	Yes No Yes No	N/A						
List All E. Logs Run:									
	·		IG RECORD	New Used	on etc	·			
Purpose of String	Size Hote Drilled	Size Casing Set (In O.D.)	Weight	Setting	Type of	# Sacks	Type and Percent		
	Office	Set (in O.D.)	Lbs. / Ft.	Depth	Cement	Used	Additives		
									
							F-14.		
	i					!			
Purpose:	Depth		AL CEMENTING / SO	QUEEZE RECORD					
Perforate	Top Bottom	Type of Cement	# Sacks Used	# Sacks Used Type and Percent Additives					
Protect Casing Plug Back TD	-								
Plug Off Zone	-				"-				
	DEDECRATIC								
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					
· 									
		- "-	74						
i									
				****		76 **	<u> </u>		
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No				
Date of First, Resumed P	Production, SWD or ENF	HR. Producing Me	ethod:	Gas Lift Ot	ner (Explain)				
Estimated Production Per 24 Hours	Oil B	bls. Gas	Mcf Wa	ater Bb!		las-Oil Ratio	Gravity		
DISPOSITIO	N OF GAS:		METHOD OF COMPL	ETION:		PRODUCTION	JINTERVAL		
Vented Sold	Used on Lease	Open Hole	Perf. Dual	ly Comp. 🔲 Comr	mingled	7 ((0000110)	THEINVAL.		
(If vented, Subn	nit ACO-18.)	Other (Specify)	(Submit	ACO-5) (Subm.	(t ACO-4)				