

**JUN 13 2006**

Form C-1

December 2002

Form must be Typed

Form must be Signed

All blanks must be Filled

For KCC Use: 6-18-06  
Effective Date: \_\_\_\_\_  
District # 3  
SGA?  Yes  No

**KANSAS CORPORATION COMMISSION**  
**OIL & GAS CONSERVATION DIVISION**

**NOTICE OF INTENT TO DRILL**

**CONSERVATION DIVISION**  
**WICHITA, KS**

*Must be approved by KCC five (5) days prior to commencing well*

Expected Spud Date June 22, 2006  
month day year

OPERATOR: License# 33074  
Name: Dart Cherokee Basin Operating Co. LLC  
Address: 211 W. Myrtle  
City/State/Zip: Independence KS 67301  
Contact Person: Tony Williams  
Phone: 620-331-7870

CONTRACTOR: License# Unknown  
Name: Will advise of licensed contractor on ACO-1

<b>Well Drilled For:</b>	<b>Well Class:</b>	<b>Type Equipment:</b>
<input type="checkbox"/> Oil	<input type="checkbox"/> Enh Rec	<input type="checkbox"/> Infield
<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input checked="" type="checkbox"/> Pool Ext.
<input type="checkbox"/> CWMO	<input type="checkbox"/> Disposal	<input checked="" type="checkbox"/> Air Rotary
<input type="checkbox"/> Seismic; # of Holes _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Cable
<input type="checkbox"/> Other _____		

If OWWO: old well information as follows:  
Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Original Completion Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Directional, Deviated or Horizontal wellbore?  Yes  No  
If Yes, true vertical depth: \_\_\_\_\_  
Bottom Hole Location: \_\_\_\_\_  
KCC DKT #: \_\_\_\_\_

Spot  East  
SW - NE - NW Sec. 35 Twp. 29 S. R. 14E  West  
4200 FSL feet from  N /  S Line of Section  
3500 FEL feet from  E /  W Line of Section  
Is SECTION  Regular  Irregular?

*(Note: Locate well on the Section Plat on reverse side)*

County: Wilson  
Lease Name: B. Neill et al Well #: A2-35  
Field Name: Cherokee Basin Coal Gas Area

Is this a Prorated / Spaced Field?  Yes  No

Target Information(s): Mississippian

Nearest Lease or unit boundary: 810 feet

Ground Surface Elevation: 891 feet MSL

Water well within one-quarter mile:  Yes  No

Public water supply well within one mile:  Yes  No

Depth to bottom of fresh water: 175' +

Depth to bottom of usable water: 200'

Surface Pipe by Alternate:  1  2

Length of Surface Pipe Planned to be set: 40'

Length of Conductor Pipe required: \_\_\_\_\_

Projected Total Depth: 1434 feet

Formation at Total Depth: Mississippian

Water Source for Drilling Operations:

Well  Farm Pond Other \_\_\_\_\_

DWR Permit #: \_\_\_\_\_

*(Note: Apply for Permit with DWR )*

Will Cores be taken?  Yes  No

If Yes, proposed zone: \_\_\_\_\_

**AFFIDAVIT**

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 days** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: June 12, 2006 Signature of Operator or Agent: Tony Williams Title: Sr Regulatory & Safety Compliance Specialist

<b>For KCC Use ONLY</b>	
API # 15 - <u>205-26751-0000</u>	
Conductor pipe required <u>None</u> feet	
Minimum surface pipe required <u>40</u> feet per Alt. <b>XO 2</b>	
Approved by: <u>6-13-06</u>	
This authorization expires: <u>12-13-06</u>	
<i>(This authorization void if drilling not started within 6 months of effective date.)</i>	
Spud date: _____	Agent: _____

**Remember to:**

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed;
- Obtain written approval before disposing or injecting salt water.
- If this permit has expired (*See: authorized expiration date*) please check the box below and return to the address below.

**Well Not Drilled - Permit Expired**

Signature of Operator or Agent: \_\_\_\_\_

Date: \_\_\_\_\_

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

35  
29  
14E

JUN 13 2006

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

CONSERVATION DIVISION  
WICHITA, KS

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15 - 205-26751-0000  
Operator: Dart Cherokee Basin Operating Co. LLC  
Lease: B. Neill et al  
Well Number: A2-35  
Field: Cherokee Basin Coal Gas Area  
Number of Acres attributable to well: 40  
QTR / QTR / QTR of acreage: SW - NE - NW

Location of Well: County: Wilson  
4200 FSL \_\_\_\_\_ feet from  N /  S Line of Section  
3500 FEL \_\_\_\_\_ feet from  E /  W Line of Section  
Sec. 35 Twp. 29 S. R. 14E  East  West

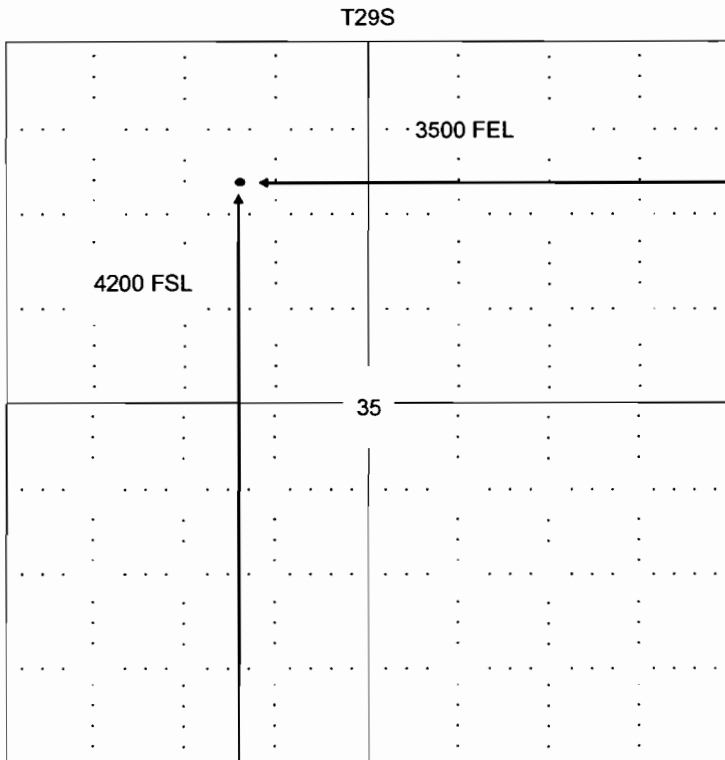
Is Section:  Regular or  Irregular

If Section Is Irregular, locate well from nearest corner boundary.

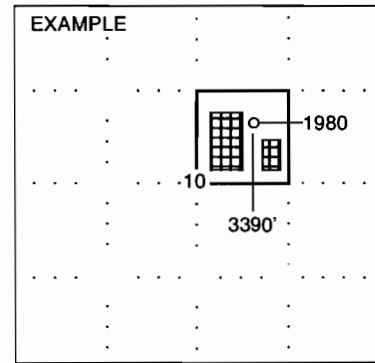
Section corner used:  NE  NW  SE  SW

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.)  
(Show footaae to the nearest lease or unit boundary line.)



R14E



Wilson Co.

NOTE: In all cases locate the spot of the proposed drilling locaton.

In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the section's south / north and east / west.
3. The distance to the nearest lease or unit boundary line.
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; CG-8 for gas wells).

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

RECEIVED  
KANSAS CORPORATION COMMISSION

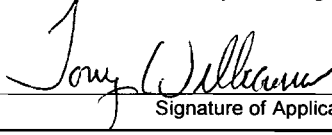
JUN 13 2006

Form CDP-1  
April 2004  
Form must be Typed

APPLICATION FOR SURFACE PIT

CONSERVATION DIVISION  
WICHITA, KS

Submit in Duplicate

Operator Name: Dart Cherokee Basin Operating Co. LLC		License Number: 33074	
Operator Address: 211 W. Myrtle		Independence KS 67301	
Contact Person: Tony Williams		Phone Number: ( 620 ) 331 - 7870	
Lease Name & Well No.: B. Neill et al		A2-35	
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit (If WP Supply API No. or Year Drilled)		Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: 926 _____ (bbbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l (For Emergency Pits and Settling Pits only)	
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
How is the pit lined if a plastic liner is not used? <b>Natural Clays</b>			
Pit dimensions (all but working pits): <u>35</u> Length (feet) <u>30</u> Width (feet)    _____ N/A: Steel Pits Depth from ground level to deepest point: <u>5</u> (feet)			
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.	
Distance to nearest water well within one-mile of pit <u>N/A</u> feet    Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: _____ measured    _____ well owner    _____ electric log    _____ KDWR	
<b>Emergency, Settling and Burn Pits ONLY:</b> Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Drilling, Workover and Haul-Off Pits ONLY:</b> Type of material utilized in drilling/workover: <u>Air</u> Number of working pits to be utilized: <u>one</u> Abandonment procedure: <u>Air dry, fill</u> _____ Drill pits must be closed within 365 days of spud date.	
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.			
June 12, 2006 Date		 Signature of Applicant or Agent	
<b>KCC OFFICE USE ONLY</b>			
Date Received: <u>6/13/06</u> Permit Number: _____ Permit Date: <u>6/13/06</u> Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

15-205-26751-0000

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202