### Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1 September 1999 Form Must Be Typed

### WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License #_33074	API No. 15 - 205-25684-00-00 ORIGINAL
Name: Dart Cherokee Basin Operating Co., LLC	County: Wilson
Address: P O Box 177	
City/State/Zip: Mason MI 48854-0177	
- Oneok	4639' FSL feet from S / N (circle one) Line of Section
Operator Contact Person: Beth Oswald	1900' FEL feet from E / W (circle one) Line of Section
Phone: (517 ) 244-8716 APR 0 1 2004	Footages Calculated from Nearest Outside Section Corner:
	(circle one) NE SE NW SW
License: 5675	Lease Name: Orr Well #: A3-28 Field Name: Cherokee Basin Coal Gas Area
Wellsite Geologist: Bill Barks	Producing Formation: Penn Coals
Designate Type of Completion:	
New Well Re-Entry Workover	Elevation: Ground: 999' Kelly Bushing:
	Total Depth: 1487' Plug Back Total Depth: 1484'
OilSWDTemp. AbdGasENHRSIGW	Amount of Surface Pipe Set and Cemented at 20 Feet
	Multiple Stage Cementing Collar Used?  ☐Yes ☑ No
Dry Other (Core, WSW, Expl., Cathodic, etc)	If yes, show depth setFeet
If Workover/Re-entry: Old Well Info as follows:	If Alternate II completion, cement circulated from
Operator:	feet depth to w/sx cmt.
Well Name:	Drilling Fluid Management Plan ALT#2 KGR 5/29
Original Comp. Date: Original Total Depth:	(Data must be collected from the Reserve Pit)
Deepening Re-perf Conv. to Enhr./SWD	Chloride content ppm Fluid volume bbls
Plug BackPlug Back Total Depth	Dewatering method used
Commingled Docket No	Location of fluid disposal if hauled offsite:
Dual Completion Docket No	
Other (SWD or Enhr.?) Docket No	Operator Name:
1-22-04 1-30-04 1-31-04	Lease Name: License No.:
Spud Date or Date Reached TD Completion Date or	Quarter Sec Twp. S. R East West
Recompletion Date Recompletion Date	County: Docket No.:
INSTRUCTIONS: An original and two copies of this form shall be filed with Kansas 67202, within 120 days of the spud date, recompletion, workover information of side two of this form will be held confidential for a period of 12 107 for confidentiality in excess of 12 months). One copy of all wireline logs at TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells.	r or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. 2 months if requested in writing and submitted with the form (see rule 82-3- and geologist well report shall be attached with this form. ALL CEMENTING Submit CP-111 form with all temporarily abandoned wells.
All requirements of the statutes, rules and regulations promulgated to regulate terein are complete and correct to the best of my knowledge.	e the oil and gas industry have been fully complied with and the statements
Signature: Oth (Swald	KCC Office Use ONLY
itle: Admn Engr Asst Date: 3.29-04	
subscribed and sworn to before me this <u>29th</u> day of <u>March</u>	If Denied, Yes Date:
400£	Wireline Log Received
	Geologist Report Received
iotary Public: YOUN R. 4 20010 Karen L. Welton	UIC Distribution
Oate Commission Expires: Notary Public, Ingham County My Comm. Expires Mar. 3, 2	y, <b>MI</b>

**ORIGINAL** 

perator Name: Dart					Name: Oi		\	Nell #: <u>A3-</u> 2	28	
ec. 28 Twp. 30										
ISTRUCTIONS: Sho sted, time tool open a mperature, fluid reco lectric Wireline Logs s	and closed, flowin very, and flow rate	g and shut- s if gas to	-in pressures, v surface test, al	/hether sh ong with fi	iut-in press	sure reached st	atic level, hydrost	atic pressure	es, pottom	noie
rill Stem Tests Taken (Attach Additional SI	neets)	☐ Ye	es 🗸 No		Log	g Formation	ı (Top), Depth and	i Datum	<b>√</b> Sa	•
amples Sent to Geolo		☐ Ye	es 🗸 No		Name			Тор	Da	itum
Cores Taken		Ye	es 🗸 No		See A	ttached	PAGE NOT	a Age States & C. 1, Broom	- Barrion	
lectric Log Run (Submit Copy)		<b>∠</b> Ye	es No					CEIVE		
ist All E. Logs Run:								R 0 1 20		
High Resolution C	ompensated D	ensity Ne	eutron				KCC	C WICH	IITA	
		Repor	CASING F		New urface, intern	used Used mediate, production	n, etc.			
Purpose of String	Size Hole Drilled	Siz	e Casing t (In O.D.)	Weig Lbs./	ght	Setting Depth	Type of Cement	# Sacks Used		d Percent litives
Surf	11"		8 5/8"			20'	Class A	5		
Prod	6 3/4"		4 1/2"		9.5#	1484'	50/50 Poz	190	See Att	ached
			ADDITIONAL	CEMENTIN	NG / SOLIE	EEZE RECORD				
Purpose:  Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Туре	of Cement	#Sacks			Type and Per	cent Additives		
Shots Per Foot			RD - Bridge Plug Each Interval Perf				ure, Shot, Cement S		ď	Depth
4	ороси,	, co.ogc c.			1095.5'					
4				1033	3'-1034'	300 gal 10% HCl, 1690# sd, 215 BBL fl				
4				985'	'-987.5'	5' 300 gal 10% HCl, 5110# sd, 415 BBL fl				
4				869.5'	'-870.5'	300 gal 10% HCl, 1705# sd, 235 BBL fl				
TUBING RECORD	Size 2 3/8"	Set At 141		Packer A		Liner Run	Yes ✔ No			
Date of First, Resumed F	Production, SWD or I 2-14-04	Enhr.	Producing Meth	od	Flowing	✓ Pumping	g Gas Lift	Othe	er (Explain)	
Estimated Production Per 24 Hours	Oil N	Bbls.	Gas 0	Mcf	Water	Вb 42	s. Ga	s-Oil Ratio		Gravity NA
	1 14.	•	, ,	1						

#### McPherson Drilling LLC **Drillers Log**

T. 30 S R. 15 E S. 28 Rig Number: WL 15- 205-25684 County: API No. 999' Location: Elev.

Operator:

Dart Cherokee Basin Operating Co. LLC

Address:

3541 CR 5400

Independence, KS 67301

Well No:

A3-28

Lease Name:

Orr

Footage Location:

Drilling Contractor:

4639 ft. from the

South

1900 ft. from the East Line Line

McPherson Drilling LLC

Spud date:

1/22/2004

Geologist:

Date Completed:

1/30/2004

Total Depth:

1487'

Casing Record			Rig Time:
	Surface	Production	1
Size Hole:	11"	6 3/4"	
Size Casing:	8 5/8"		
Weight:	23#		
Setting Depth:	20'	McPherson	
Type Cement:	Portland		
Sacks:	5	McPherson	

### ORIGINAL

Gas Tests:
(5 <sup>22</sup> 0), \$6000 Allin 1000 A
RECEIVED
APR 0 1 2004
KCC WICHITA
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Comments:
start injecting water @ 300'

Well Log									
Formation	Тор	Btm.	Formation	Тор	Btm.	Formation	Тор	Btm	
lime damp	0	21	Mulky	982	987				
shale	21	60	lime	987	993				
lime	60	· 115	shale	993	1036				
shale	115	120	coal	1036	1037				
sandy lime	120	125	shale	1037	1053				
sandy shale	125	580	coal	1053	1054				
coal	280	281	shale	1054	1092				
shale	281	285	coal	1092	1093				
sand	285	360	shale	1093	1196				
shale	360	390	coal	1196	1197				
lime	390	495	shale	1197	1220	į			
shale	495	545	sand/shale	1220	1282				
lime	545	585	coal	1282	1283				
shale	585	587	shale	1283	1317				
lime	587	708	coal	1317	1318				
sandy shale	708	720	shale	1318	1333				
sand	720	750	coal	1333	1334				
shale	750	872	shale	1334	1335				
coal	872	873	Miss lime	1335	1487 TD				
lime pink	873	892							
shale	892	939							
lime Osw	939	963							
Summit	963	972							
lime	972	982							



#### 211 W. 14TH STREET, CHANUTE, KS 66720 620-431-9210 OR 800-467-8676

### **RECEIVED** APR 0 1 2004 KCC WICHITA

# **ORIGINAL**

TICKET NUMBER 23965

LOCATION Bartlesville

#### FIELD TICKET

	OMER ACCT# WELL	NAME QTR/QTR	SECTION TWP RGE	COUNTY	FORMATION
CHARGE TO	)art		OWNER		
MAILING ADDRESS			OPERATOR		
CITY & STATE			CONTRACTOR		
ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION	OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL . AMOUNT
540)	1	PUMP CHARGE P	roduction Casing		525.CO
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			And the second s		
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1102	7.463	Flasses	ANIS O		25.90
1116	19.75	Gilsonit			2/0/0
1/11	450	Granulati	de sate		112,50
1118	65K3	Premium	Rel		1000
1123	6,500gal	Cityla	ter d		23,13
4404	1	41/2"/Rubb	per Plug	· ·	21.00
·			·		
1205	16001	Supersu	E ET	,	33.25
1238	1331	Supersu Mid Flus	Ą		30,00
		BLENDING & HANDLING			
5407	・カル・カ	TON-MILES ·	}		190,00
		STAND BY TIME			7 3 4 3 6
		MILEAGE	1		
5501	4,600	WATER TRANSPORTS		·	320.00
5502	4605	VACUUM TRUCKS			300.00
	*	FRAC SAND	1		
1124	190sks	CEMENT	1		
	7 10 1010 3			DO CALECTAY	1254.00
			Wilson Col	3% SALES TAX	108,85
Ravin 2790			3		
	,			ESTIMATED TOTAL	3502.08
CUSTOMER or AGENTS	CICNATURE Trop la	Ba Aa	· · · · · · · · · · · · · · · · · · ·	09 \ 1/1	/-
COSTOWER OF AGENTS	SIGNATURE VI	The state of the s	CIS FOREMAN	J. Led le	amo
	,		:	12	
CUSTOMER or AGENT (F	PLEASE PRINT)		•	DATE	•

CONSOLIDATED OIL WELL SERVICES, INC. 211 W. 14TH STREET, CHANUTE, KS 66720 620-431-9210 OR 800-467-8676

RECEIVED
APR 0 1 2004

ORIGINAL
TICKET NUMBER 32655
LOCATION Bartless, le
FOREMAN Tracy, Lo. 11cm 3

# KCC WICHITA TREATMENT REPORT

DATE	CUSTOMER #	WELL NAME	FORMATION	1	TRUCK #	DRIVER	TRUCK#	DRIVER
1-31-04	2368	Ocr A3-2		1	418	Tim		2 10 4
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