

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 33074
 Name: Dart Cherokee Basin Operating Co., LLC
 Address: P O Box 177
 City/State/Zip: Mason MI 48854-0177
 Purchaser: Oneok
 Operator Contact Person: Beth Oswald
 Phone: (.517) 244-8716
 Contractor: Name: McPherson
 License: 5675
 Wellsite Geologist: Bill Barks
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: _____
 Well Name: _____
 Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

<u>2-17-04</u>	<u>2-19-04</u>	<u>2-25-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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API No. 15 - 205-25712-00-00
 County: Wilson
 _____ NW _____ SE Sec. 26 Twp. 30 S. R. 15 East West
1700' FSL feet from S / N (circle one) Line of Section
1980' FEL feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Almond et al Well #: C3-26
 Field Name: Cherokee Basin Coal Gas Area
 Producing Formation: Penn Coals
 Elevation: Ground: 975' Kelly Bushing: _____
 Total Depth: 1387' Plug Back Total Depth: 1383'
 Amount of Surface Pipe Set and Cemented at 24' 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 ALT#2 KJR 5/29/07
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume 0 bbls
 Dewatering method used no fl in pit
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Beth Oswald
 Title: Admn & Engr Asst Date: 4-1-04
 Subscribed and sworn to before me this 1st day of April, 2004
 Notary Public: Karen L. Welton
 Date Commission Expires: _____
 Karen L. Welton
 Notary Public, Ingham County, MI
 My Comm. Expires Mar. 3, 2007

KCC Office Use ONLY

NO Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

ORIGINAL

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: Almond et al Well #: C3-26
 Sec. 26 Twp. 30 S. R. 15 East West County: Wilson

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: High Resolution Compensated Density Neutron & Dual Induction	Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum See Attached <div style="text-align: center;"> RECEIVED APR 05 2004 KCC WICHITA </div>
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CASING RECORD New Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surf	11"	8 5/8"		24'	Class A	5	
Prod	6 3/4"	4 1/2"	9.5"	1383'	50/50 Poz	175	See Attached

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

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
4	1081.5'-1082.5'	300 gal 10% HCl, 1685# sd, 220 BBL fl	
4	1000'-1002'	300 gal 10% HCl, 1695# sd, 220 BBL fl	
4	940.5'-942.5'	300 gal 10% HCl, 3110# sd, 295 BBL fl	
4	899'-902.5'	300 gal 10% HCl, 7110# sd, 460 BBL fl	
4	709'-780'	300 gal 10% HCl, 1680# sd, 220 BBL fl	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8"	1344'	NA	Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method			
3-10-04		Flowing	<input checked="" type="checkbox"/> Pumping	Gas Lift	Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NA	0	49	NA	NA

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Sumit ACO-18.) Other (Specify) _____

McPherson Drilling LLC Drillers Log

ORIGINAL

Rig Number: 3	S. 26	T. 30	R. 15
API No. 15- 205-25712	County: WL		
Elev. 975'	Location: apx S/2 NW SE		

Operator:	Dart Cherokee Basin Operating Co. LLC		
Address:	3541 CR 5400 Independence, KS 67301		
Well No:	C3-26	Lease Name:	Almond et al
Footage Location:	1700 ft. from the	South	Line
	1980 ft. from the	East	Line
Drilling Contractor:	McPherson Drilling LLC		
Spud date:	2/17/2004	Geologist:	
Date Completed:	2/19/2004	Total Depth:	1307'

Gas Tests:

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Comments:
1227' A lot of water-can't test
Start injecting water @ 363

Casing Record			Rig Time:
	Surface	Production	1 day booster
Size Hole:	11"	6 3/4"	
Size Casing:	8 5/8"		
Weight:	23#		
Setting Depth:	24'	McPherson	
Type Cement:	Portland		
Sacks:	5	McPherson	

Well Log									
Formation	Top	Btm.	Formation	Top	Btm.	Formation	Top	Btm.	
lime	0	87	shale	920	939				
shale	87	135	coal	939	942				
lime	135	147	sand shale	942	960				
shale	147	199	coal	960	963				
lime	199	203	shale	963	1003				
sand	203	248	coal (wet)	1003	1005	no sho			
sand shale	248	301	sand shale	1005	1060				
lime	301	351	oil sand	1060	1077	wet			
sandy shale	351	374	sandy shale	1077	1137				
lime	374	401	coal	1137	1139				
sand	401	448	sandy shale	1139	1218				
shale	448	461	coal	1218	1220				
lime	461	487	water sand	1220	1263				
shale	487	595	coal	1263	1265				
lime	595	665	shale	1265	1268				
shale	665	711	sand	1268	1291				
sandy shale	711	795	Mississippi	1291	1387	TD			
pink lime	795	815							
shale	815	863							
1st oswego	863	886							
summit	886	892							
2nd oswego	892	908							
mulky	908	914							
3rd oswego	914	920							



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

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

CONSOLIDATED

→ C O W S CHA.

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FIELD TICKET

ORIGINAL

TICKET NUMBER 23887

LOCATION Bartholomew

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
2-20-04	2368	Almond C3-26		26	30S	15E	Wilson	
CHARGE TO <u>Dart</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE Production Casing		525.00
1105	3 sks	Cottonteed Hulls		38.85
1107	2 sks	Flp Seal		75.50
1110	18 sks	Gilsonite		349.20
1111	425 #	Granulated Salt		106.25
1118	6 sks	Premium Gel		20.80
1123	6,500 gal	City Water		23.13
4404	1	4 1/2" Rubber Plug		27.00
1205	1 1/2 gal	Supersweet		33.25
1238	1 gal	Mud Flush		30.00
5402	min	BLENDING & HANDLING TON-MILES		190.00
		STAND BY TIME		
		MILEAGE		
5501	4 hrs	WATER TRANSPORTS		320.00
5502	4 hrs	VACUUM TRUCKS		300.00
		FRAC SAND		
1124	175 sks	CEMENT		1155.00
			Wilson Co. 6.3% SALES TAX	119.43
ESTIMATED TOTAL				3413.91

Ravin 2790

CUSTOMER or AGENTS SIGNATURE William Banks CIS FOREMAN

Joseph W. Thomas

CUSTOMER or AGENT (PLEASE PRINT)

DATE

189006

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

TICKET NUMBER 30030
LOCATION Bathesville
FOREMAN Tracy Williams

TREATMENT REPORT

DATE <u>2-20-04</u>	CUSTOMER # <u>2368</u>	WELL NAME <u>Almoneta</u>	FORMATION <u>C3-26</u>
SECTION <u>26</u>	TOWNSHIP <u>30S</u>	RANGE <u>15E</u>	COUNTY <u>Wilson</u>
CUSTOMER <u>Dart</u>			
MAILING ADDRESS			
CITY			
STATE		ZIP CODE	
TIME ARRIVED ON LOCATION			

TRUCK #	DRIVER	TRUCK #	DRIVER
<u>418</u>	<u>Tim</u>		
<u>402</u>	<u>Travis</u>		
<u>428</u>	<u>Danny</u>		
<u>401</u>	<u>Larry</u>		

WELL DATA

HOLE SIZE <u>6 3/4</u>	PACKER DEPTH
TOTAL DEPTH <u>1389</u>	PERFORATIONS
	SHOTS/FT
CASING SIZE <u>4 1/2</u>	OPEN HOLE
CASING DEPTH <u>1383</u>	
CASING WEIGHT <u>9.5</u>	TUBING SIZE
CASING CONDITION <u>22.47 displac</u>	TUBING DEPTH
	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

TYPE OF TREATMENT

<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input checked="" type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISP. PUMP	<input type="checkbox"/>
<input type="checkbox"/> OTHER	<input type="checkbox"/>

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB Ran 25k of gel w/ 1st balls, 5 bbl spacer, 15 bbl mud flush, & 5 bbl spacer while break
circ. Ran 125k 50/50 with 5# gilsonite, 5% salt 2% gel + 1/4" fl @ 13.5 ppg. Shut down & washed up
behind plug. Pumped plug to bottom & set shoe. Shut in. Circulated 8 bbl cement slurry to pit

AUTHORIZATION TO PROCEED

TITLE

DATE

W. Barts

TIME AM / PM	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
						<u>100</u>	BREAKDOWN PRESSURE
						<u>600</u>	DISPLACEMENT
					<u>Run Plug on Bottom</u>	<u>200</u>	MIX PRESSURE
							MIN PRESSURE
						<u>0</u>	ISIP
							15 MIN.
						<u>5 1/2</u>	MAX RATE