

ORIGINAL

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
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

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KCC WICHITA

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. _____

3-19-04 3-24-04 3-29-04
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 125-30485-00-00
County: Montgomery
SE SW SW Sec. 9 Twp. 31 S. R. 15 East West
115' FSL feet from S / N (circle one) Line of Section
4106' 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: Scott Well #: D1-9 SWD
Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Penn Coals
Elevation: Ground: 1000' Kelly Bushing: _____
Total Depth: 1781' Plug Back Total Depth: 1670'
Amount of Surface Pipe Set and Cemented at 22' 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 KPR 6/6/07
(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume 600 bbls
Dewatering method used empty w/ vac trk and air dry

Location of fluid disposal if hauled offsite:
Operator Name: Dart Cherokee Basin Operating Co LLC
Lease Name: Adee B1-8 SWD License No.: 33074
Quarter NW Sec. 8 Twp. 31 S. R. 16 East West
County: Montgomery Docket No.: D-28237

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: 4-30-04
Subscribed and sworn to before me this 30th day of April,
20 04
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

✓

X

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: Scott Well #: D1-9 SWD
 Sec. 9 Twp. 31 S. R. 15 East West County: Montgomery

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 <i>(Attach Additional Sheets)</i> 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 <i>(Submit Copy)</i> 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; font-weight: bold; font-size: 1.2em;"> RECEIVED MAY 03 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"		22'	Class A	5	
Prod	6 1/2"	5 1/2"	15.5#	1670'	50/50 Poz	280	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 <i>(Amount and Kind of Material Used)</i>	Depth
	1670'-1781' open hole	500 gal 20% HCl, 1500 gal 15% HCl, 220 BBL fl	

TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	<input checked="" type="checkbox"/> No
		2 7/8"	1625'	1620'			
Date of First, Resumed Production, SWD or Enhr.			Producing Method				
WO approval			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		

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) _____



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

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

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MAY 03 2004

KCC WICHITA

FIELD TICKET

TICKET NUMBER 24036

LOCATION Bartlesville

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
3-25-04	2368	Scott D1-9SWD		9	31S	15E	Montgomery	
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	3sks	Cottonseed Halls		38.85
1107	4sks	Flo Seal		151.00
1110	30sks	Gilsonite		582.00
1111	2.00#	Granulated Salt		175.00
1118	10sks	Premium Gel		118.00
1123	10000gal	City Water		112.50
4405	1	5/8" Rubber Plug		37.50
4147	1	5/8" Type B Packer Shoe		885.00
	68			
1205	2gal	Supersweet		45.00
1238	1gal	Mud Flush		30.00
		BLENDING & HANDLING		
5407	2trucks	TON-MILES		380.00
		STAND BY TIME		
		MILEAGE		
5501	2trucks x 3 1/2 hrs	WATER TRANSPORTS (1hr Total)		560.00
		VACUUM TRUCKS		
		FRAC SAND		
1124	280sks	CEMENT		1848.00
		Montgomery Co. 5.3% SALES TAX		209.24
		ESTIMATED TOTAL		5697.09

Ravin 2790

CUSTOMER or AGENTS SIGNATURE Wichita Bartles CIS FOREMAN Tracy L. Williams

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

199509

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

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TICKET NUMBER **32674**
 LOCATION Bart/less, He
 FOREMAN Tracy J. Williams

TREATMENT REPORT
KCC WICHITA

DATE 3-25-04	CUSTOMER # 2368	WELL NAME Scott 01-9540	FORMATION
SECTION 9	TOWNSHIP 31S	RANGE 15E	COUNTY Montgomery
CUSTOMER Dart			
MAILING ADDRESS			
CITY			
STATE			
ZIP CODE			
TIME ARRIVED ON LOCATION			

WELL DATA Type B Packer Shoe

HOLE SIZE 7 7/8	PACKER DEPTH
TOTAL DEPTH 7781	PERFORATIONS
	SHOTS/FT
CASING SIZE 5 1/2	OPEN HOLE
CASING DEPTH 1690	
CASING WEIGHT 15.5	TUBING SIZE
CASING CONDITION	TUBING DEPTH
39.25	TUBING WEIGHT
TREATMENT VIA	TUBING CONDITION

TRUCK #	DRIVER	TRUCK #	DRIVER
418	Tom		
203	Travis		
226	Brad		
403	Tom		
401	Larry		

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: loaded casing & set packer shoe. Ran 4 sks of gel with 1sk Halle, 5 bbl spacer, 15 bbl mud flush + 10 spacer to break circ. Ran 20 sks of soap mix with 5# gels, 5.2 salt 2% gel + 7# flo @ 13.5 spgs. Shutdown & set plug. Pumped plug to bottom & set shoe. Shut in. Circulated 12 bbl cement slurry to pit.

AUTHORIZATION TO PROCEED

William Banks

TITLE: Displacement of plug was 38.5 bbl

TIME AM/PM	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
						800	BREAKDOWN PRESSURE
						500	DISPLACEMENT
	800psi to set			Bumped plug on bottom		1000	MIX PRESSURE
						0	MIN PRESSURE
						0	ISIP
							15 MIN
							MAX RATE
							MIN RATE

10-9509