

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

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>8-9-03</u>	<u>8-11-03</u>	<u>8-22-03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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API No. 15 - 205-25641-00-00
 County: Wilson
 _____ NW _____ SE _____ Sec. 25 Twp. 29 S. R. 14 East West
1250' FSL _____ feet from S / N (circle one) Line of Section
1250' 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: B Neill Well #: D4-25
 Field Name: Fredonia
 Producing Formation: Penn Coals
 Elevation: Ground: 884' Kelly Bushing: _____
 Total Depth: 1224' Plug Back Total Depth: 1220'
 Amount of Surface Pipe Set and Cemented at 45 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 KGR 5/23/07
 (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 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: 3-10-04
 Subscribed and sworn to before me this 10th day of March,
2004
 Notary Public: Karen L. Welton
 Date Commission Expires: _____
 Notary Public, Ingham County, MI
 My Comm. Expires Mar. 3, 2007

KCC Office Use ONLY

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: B Neill Well #: D4-25
 Sec. 25 Twp. 29 S. R. 14 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 <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	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Log</td> <td style="width: 40%;">Formation (Top), Depth and Datum</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td colspan="3" style="text-align: center; padding: 20px;"> RECEIVED MAR 15 2004 KCC WICHITA </td> </tr> </table>	Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample	Name	Top	Datum	RECEIVED MAR 15 2004 KCC WICHITA		
Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample								
Name	Top	Datum								
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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"		45'	Class A	8	
Prod	6 3/4"	4 1/2"	11.6	1220'	50/50 Poz	150	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
6	1140'-1141'	NA	

TUBING RECORD	Size Set At	Packer At	Liner Run
NA	NA	NA	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Date of First, Resumed Production, SWD or Enhr.	Producing Method
Not Complete	Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <input type="checkbox"/>

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
NA	NA	NA	NA	NA	NA

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

McPherson Drilling LLC Drillers Log

Rig Number: 2	S. 25	T. 29	R. 14 E
API No. 15- 205-25641	County: WL		
Elev. 836'	Location:		

Operator:	Dart Cherokee Basin Operating Co. LLC		
Address:	3541 CR 5400 Independence, KS 67301		
Well No:	D4-25	Lease Name:	B. Neill
Footage Location:	1250 ft. from the	South	Line
	1250 ft. from the	East	Line
Drilling Contractor:	McPherson Drilling LLC		
Spud date:	8/9/2003	Geologist:	
Date Completed:	8/11/2003	Total Depth:	1224'

Gas Tests:
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Remarks:
start injecting water @ 420'

Casing Record			Rig Time:	
	Surface	Production	2 hrs.	Gas Tests
Size Hole:	11"	6 3/4"		
Size Casing:	8 5/8"	McPherson		
Weight:	20#			
Setting Depth:	45'			
Type Cement:	Portland	McPherson		
Sacks:	8			

Well Log										
Formation	Top	Btm.	Formation	Top	Btm.	Formation	Top	Btm.	Formation	Btm.
lime	0	56	shale	650	681	coal	984	985		
shale	56	70	coal	681	682	shale	985	1004		
lime	70	80	shale	682	695	coal	1004	1008		
shale	80	190	sand	695	710	lime	1008	1009		
lime	190	195	shale	710	744	shale	1009	1048		
sand	195	215	lime pink	744	747	sand	1048	1056		
sand/shale	215	250	coal	747	748	shale	1056	1153		
lime	250	265	lime	748	764	lime Miss	1153	1224	TD	
shale	265	314	shale	764	793					
lime	314	364	sand	793	809					
sand	364	385	lime Osw	809	832					
sandy lime	385	405	Summit	832	841					
shale	405	410	lime	841	849					
sand (wet)	410	445	Mulkey	849	855					
sand/shale	445	462	lime	855	857					
lime	462	490	shale	857	904					
shale	490	510	coal	904	905					
lime	510	530	shale	905	924					
shale	530	585	lime	924	926					
lime	585	608	coal	926	927					
shale	608	620	shale	927	967					
lime	620	630	coal	967	968					
sand (oil)	630	642	shale	968	970					
sand	642	650	shale	970	984					

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

RECEIVED ORIGINAL 29236
 TICKET NUMBER 29236
 LOCATION Bartlesville
 FOREMAN Tracy Williams
 MAR 15 2004
 KCC WICHITA

TREATMENT REPORT

DATE	CUSTOMER #	WELL NAME	FORMATION
8-12-03	2368	Baill DMS	
SECTION	TOWNSHIP	RANGE	COUNTY
25	29B	14E	Wilson
CUSTOMER			
Dart			
MAILING ADDRESS			
CITY			
STATE		ZIP CODE	
TIME ARRIVED ON LOCATION			

TRUCK #	DRIVER	TRUCK #	DRIVER
418	Tom		
401	Roy		
285	Mark		
90	Steven		

WELL DATA	
HOLE SIZE	PACKER DEPTH
6 3/4	
TOTAL DEPTH	PERFORATIONS
1223	
	SHOTS/FT
CASING SIZE	OPEN HOLE
4 1/2	
CASING DEPTH	
1223	
CASING WEIGHT	TUBING SIZE
CASING CONDITION	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	
SURFACE PIPE	THEORETICAL INSTRUCTED
ANNULUS LONG STRING	
TUBING	

INSTRUCTION PRIOR TO JOB: Ran 150 sks of 50/50 permix with 5% gel + broke circulation with mud flush. Ran 150 sks @ 13.5ppg. Shutdown & washed up behind plug. Pumped plug to bottom & set float shoe. Shut in. Circulated 600 cement to pi.

AUTHORIZATION TO PROCEED	TITLE	DATE
Tracy Williams		

TIME AM/PM	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
							BREAKDOWN PRESSURE
							DISPLACEMENT
							MIX PRESSURE
							MIN PRESSURE
							ISIP
							15 MIN
							MAX RATE
							MIN RATE

186050



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

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

RECEIVED

MAR 15 2004

KCC WICHITA

ORIGINAL

TICKET NUMBER 22399

LOCATION Bartlesville

FIELD TICKET

DATE 8-12-03	CUSTOMER ACCT # 2368	WELL NAME B. Well D4-25	QTR/QTR	SECTION 25	TWP 29S	RGE 14E	COUNTY Wilson	FORMATION
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	1sk	Cottonseed Hulls		12.95
1107	2sk	Flo Seal		25.50
1110	15sk	Gilsonite		291.00
1111	350#	Granulated Salt		35.00
1118	5sk	Premium Gel		59.00
1123	6500gal	City Water		23.13
4404	1	4 1/2" Rubber Plug		22.00
1205	1 1/2 gal	Supersweet (Bacteriacide)		33.75
1238	1 gal	Mud Flush		30.00
		BLENDING & HANDLING		
5407	min	TON-MILES		190.00
		STAND BY TIME		
		MILEAGE		
5501	4 hrs	WATER TRANSPORTS		300.00
5502	3 1/2 hrs	VACUUM TRUCKS		245.00
		FRAC SAND		
1124	150sk	CEMENT		962.50
			SALES TAX	84.76
ESTIMATED TOTAL				2949.59

Ravin 2790

CUSTOMER or AGENTS SIGNATURE William Banks

CIS FOREMAN Judy L. Williams

CUSTOMER or AGENT (PLEASE PRINT)

DATE 186050