

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

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. _____
5-10-04 5-12-04 5-19-04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 125-30467-00-00
County: Montgomery
NE SE NW Sec. 24 Twp. 31 S. R. 14 East West
3650' FSL _____ feet from S / N (circle one) Line of Section
3200' 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: Twin Valley Enterprises Well #: B2-24
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Penn Coals
Elevation: Ground: 931' Kelly Bushing: _____
Total Depth: 1526' Plug Back Total Depth: 1523'
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 KOR 6/10/07
(Data must be collected from the Reserve Pit)
Chloride content NA ppm Fluid volume 114 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: Orr A1-28 License No.: 33074
Quarter NW Sec. 28 Twp. 30 S. R. 15 East West
County: Montgomery Docket No.: D-28282

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: 6-25-04
Subscribed and sworn to before me this 25th day of June,
2004
Notary Public: Karen L. Welton
Karen L. Welton
Notary Public, Ingham County, MI
My Comm. Expires Mar. 3, 2007
Acting in Ingham County

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Date Commission Expires: _____

ORIGINAL

Side Two

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: Twin Valley Enterprises Well #: B2-24
 Sec. 24 Twp. 31 S. R. 14 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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">Log Name</td> <td style="width:40%;">Formation (Top), Depth and Datum</td> <td style="width:30%;"><input checked="" type="checkbox"/> Sample</td> </tr> <tr> <td>See Attached</td> <td>Top</td> <td>Datum</td> </tr> </table>	Log Name	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample	See Attached	Top	Datum
Log Name	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample					
See Attached	Top	Datum					

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 3/4"	4 1/2"	10.5#	1523'	50/50 Poz	200	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	RECEIVED 1355'-1356'	300 gal 10% HCl, 1660# sd, 230 BBL fl	
4	JUN 28 2004 1205.5'-1206.5'	300 gal 10% HCl, 605# sd, 285 BBL fl	
4	KCC WICHITA 1137'-1139'	300 gal 10% HCl, 1675# sd, 225 BBL fl	
4	KCC WICHITA 1073.5'-1075.5'	300 gal 10% HCl, 2400# sd, 240 BBL fl	
4	KCC WICHITA 1041'-1043.5'	300 gal 10% HCl, 5235# sd, 365 BBL fl	

TUBING RECORD	Size 2 3/8"	Set At 1474'	Packer At NA	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 6-8-04	Producing Method Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <input type="checkbox"/>
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Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 5	Water Bbls. 53	Gas-Oil Ratio NA	Gravity NA
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Disposition of Gas: Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: _____



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

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

TICKET NUMBER 23771
LOCATION Bartlesville

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/GTR	SECTION	TWP	RGE	COUNTY	FORMATION
5-13-04	2368	Twin Valley Enterprises B234		24	31S	14C	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		675.00
1105	2 sks	Cottonseed Hulls		25.90
1107	3 sks	Flo-Seal		113.25
1110	20 sks	Gilsonite		388.00
1111	500 #	Granulated Salt		125.00
1118	6 sks	Premium Gel		70.80
1123	2,500 gal	City Water		84.38
4404	1	4 1/2" Rubber Plug		35.00
1205	2 gal	Supersweet		45.00
1238	1 gal	Mud Flush		30.00
5409	min	BLENDING & HANDLING TON-MILES STAND BY TIME MILEAGE		190.00
5501 C	5 hrs	WATER TRANSPORTS		400.00
5508 C	5 hrs	VACUUM TRUCKS FRAC SAND		325.00
1124	200 sks	CEMENT		1320.00
			SALES TAX	114.60
ESTIMATED TOTAL				3991.93

Form 2790

CUSTOMER or AGENTS SIGNATURE

Wick Datz

CIS FOREMAN

Joseph Williams

190263

CONSOLIDATED OIL WELL SERVICES, INC.

211 W. 14TH STREET, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER **31220**

LOCATION Bartlesville

FOREMAN Tracy Williams

TREATMENT REPORT

DATE <u>5-13-04</u>	CUSTOMER # <u>2368</u>	WELL NAME <u>Twin Valley Enterprises 6224</u>	FORMATION
SECTION <u>24</u>	TOWNSHIP <u>31S</u>	RANGE <u>14E</u>	COUNTY <u>Montgomery</u>
CUSTOMER <u>Dart</u>			
MAILING ADDRESS			
CITY			
STATE		ZIP CODE	
TIME ARRIVED ON LOCATION			

TRUCK #	DRIVER	TRUCK #	DRIVER
<u>419</u>	<u>Coop</u>		
<u>409</u>	<u>Brian E - Donnie</u>		
<u>403</u>	<u>Tom - Bobby</u>		
<u>428</u>	<u>Danny</u>		

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"/> MISF. PUMP	<input type="checkbox"/>
<input type="checkbox"/> OTHER	<input type="checkbox"/>

WELL DATA	
HOLE SIZE <u>6 3/4</u>	PACKER DEPTH
TOTAL DEPTH <u>1526</u>	PERFORATIONS
	SHOTS/FT.
CASING SIZE <u>4 1/2</u>	OPEN HOLE
CASING DEPTH <u>1523</u>	
CASING WEIGHT <u>10.5</u>	TUBING SIZE
CASING CONDITION	TUBING DEPTH
<u>24.29 displace</u>	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB Washed down 15' of pipe. Rigged up to cement. Ran 200 sks of gel with 1 hull then 5 bbl mud flush. Ran 200 sks of sol paper with 5 gal. 5% salt & 2 gal 1/4" Fla P/S spgs. Shut down & washed up mud plug to bottom & set shoe. Shut in & circulated 10 bbl cement slurry to pt.

AUTHORIZATION TO PROCEED

TITLE

DATE

with O&S

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

RECEIVED

JUN 28 2004

KCC WICHITA