

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
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 **RECEIVED**
Phone: (517) 244-8716
Contractor: Name: McPherson **JUN 21 2004**
License: 5675 **KCC WICHITA**
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. _____
3-4-04 3-8-04 3-13-04
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

API No. 15 - 125-30463-00-00
County: Montgomery
SE SE NW Sec. 8 Twp. 31 S. R. 15 East West
3050' FSL feet from S / N (circle one) Line of Section
3050' 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: Springer Well #: B2-8
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Penn Coals
Elevation: Ground: 977' Kelly Bushing: _____
Total Depth: 1527' Plug Back Total Depth: 1520'
Amount of Surface Pipe Set and Cemented at 21 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 6/01/07
(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: 6.18.04
Subscribed and sworn to before me this 18th day of June,
2004
Notary Public: Karen L. Welton
Date Commission Expires: _____

KAREN L. WELTON
Notary Public - Michigan
Ingham County
My Commission Expires Mar 3, 2007
Acting in the County of Ingham

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

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: Springer Well #: B2-8
 Sec. 8 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
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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"		21'	Class A	5	
Prod	6 3/4"	4 12"	9.5#	1520'	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
	RECEIVED See Attached		
	JUN 21 2004		
	KCC WICHITA		

TUBING RECORD		Size 2 3/8"	Set At 1475'	Packer At NA	Liner Run Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date of First, Resumed Production, SWD or Enhr. 5-4-04		Producing Method 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. NA	Gas Mcf 0	Water Bbls. 9	Gas-Oil Ratio NA	Gravity 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) _____

Dart Cherokee Basin Operating Co LLC #33074
 Springer B2-8 API #15-125-30463-00-00
 SE SE NW Sec 8 T31S-R15E
 Attachment to ACO-1 Well Completion Form

Shots Per Foot	Perforation Record	Acid, Fracture, Shot, Cement Squeeze Record	Depth
4	1373.5'-1374.5'		
4	1352'-1353'/1336.5'-1338'	300 gal 10% HCl, 2290# sd, 215 BBL fl	
4	1186.5'-1188'	300 gal 10% HCl, 2150# sd, 295 BBL fl	
4	1115'-1117'	300 gal 10% HCl, 1695# sd, 220 BBL fl	
4	1053'-1054'	300 gal 10% HCl, 1750# sd, 250 BBL fl	
4	1016'-1018.5'	300 gal 10% HCl, 5040# sd, 360 BBL fl	
4	885'-886'	300 gal 10% HCl, 1170# sd, 150 BBL fl	

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 JUN 21 2004
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CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

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

TICKET NUMBER **23904**

LOCATION Bartlesville

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
3-9-04	2368	Springer B2-8		8	315	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 Hulls		38.85
1107	3sks	Flg Seal		113.25
1110	20sks	Gilsonite		388.00
1111	500#	Granulated Salt		125.00
1118	6sks	Premium Gel		70.80
1123	2,500gal	City Water		84.38
4404	1	4 1/2" Rubber Plug		22.00
1205	1 1/2 gal	Supersweet		33.25
1238	1 gal	Mud Flush		30.00
		BLENDING & HANDLING		
5407	min	TON-MILES		190.00
		STAND BY TIME	RECEIVED	
		MILEAGE	JUN 21 2004	
5501	4hrs	WATER TRANSPORTS		320.00
5502	4hrs	VACUUM TRUCKS	KCC WICHITA	300.00
		FRAC SAND		
1124	200sks	CEMENT		1320.00
			Montgomery Co. SALES TAX	114.87
ESTIMATED TOTAL				3680.90

Ravin 2790

CUSTOMER or AGENTS SIGNATURE William Bank CIS FOREMAN Tracy Williams

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

189234

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

TICKET NUMBER **30036**
 LOCATION Bartlesville
 FOREMAN Tracy Williams

TREATMENT REPORT

DATE	CUSTOMER #	WELL NAME	FORMATION
3-9-04	2368	Sprinkler B3	8
SECTION	TOWNSHIP	RANGE	COUNTY
8	31S	15E	Montgomery
CUSTOMER <u>Dart</u>			
MAILING ADDRESS			
CITY			
STATE		ZIP CODE	
TIME ARRIVED ON LOCATION			

TRUCK #	DRIVER	TRUCK #	DRIVER
418	Tim		
202	Travis		
428	Danny		
400	Mac		

WELL DATA	
HOLE SIZE	PACKER DEPTH
6 3/4	
TOTAL DEPTH	PERFORATIONS
1389	
	SHOTS/FT
CASING SIZE	OPEN HOLE
4 1/2	
CASING DEPTH	
1520	
CASING WEIGHT	TUBING SIZE
9.5	
CASING CONDITION	TUBING DEPTH
2469	TUBING WEIGHT
661	
	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 Washed 20' casing, then ran 2k of gel + 1sk hills, 15 bbl mud flush
Ran 200 sks of 50/50 poz mix with 5# gelsonite, 52 sk of 22 gel + 1sk @ 13.5 spg. Shut down, washed
up behind plug, pumped plug to bottom of set shoe. Shut in. Circulated 20 bbl cement slurry to pi

AUTHORIZATION TO PROCEED Tracy Williams TITLE _____ DATE _____

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

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