

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

RECEIVED

APR 01 2004

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. _____

<u>1-21-04</u>	<u>1-23-04</u>	<u>1-24-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-30462-00-00
County: Montgomery
N2 SE NE Sec. 8 Twp. 31 S. R. 15 East West
3600' FSL _____ feet from S / N (circle one) Line of Section
681' 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: Sycamore Springs Ranch Well #: B4-8

Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Penn Coals

Elevation: Ground: 957' Kelly Bushing: _____

Total Depth: 1487' Plug Back Total Depth: 1479'

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 # RGR 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: 3-29-04

Subscribed and sworn to before me this 29th day of March, 2004.

Notary Public: Karen L. Welton

Date Commission Expires: 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: Sycamore Springs Ranch Well #: B4-8
 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	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 APR 01 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"		21'	Class A	5	
Prod	6 3/4"	4 1/2"	9.5"	1479'	50/50 Poz	180	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
4	1314.5'-1315.5'	300 gal 10% HCl, 1680# sd, 220 BBL fl	
4	1093.5'-1095.5'	300 gal 10% HCl, 1700# sd, 220 BBL fl	
4	1030.5'-1031.5'	300 gal 10% HCl, 1685# sd, 215 BBL fl	
4	992'-995'	300 gal 10% HCl, 6075# sd, 435 BBL fl	

TUBING RECORD		Size 2 3/8"	Set At 1444'	Packer At NA	Liner Run Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date of First, Resumed Production, SWD or Enhr. 2-21-04		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 4	Water Bbls. 8	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) _____



CONSOLIDATED

OIL WELL SERVICES
AN INFINITY COMPANY

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

RECEIVED
APR 01 2004
KCC WICHITA
FIELD TICKET

ORIGINAL
TICKET NUMBER 23892
LOCATION B'ville

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
1-24-04	2368	<u>Sycamore Springs</u> Ranch # B4-8		8	31	15	MG	
CHARGE TO				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 LONGSTRING		525.00
1110	18 SX	GILSONITE	*	349.20
1111	400 #	SALT	*	100.00
1118	5 SX	GEL	*	59.00
1107	3 SX	FLO SEAL	*	113.25
1105	2 SX	HULLS	*	25.90
4404	1 ea	4 1/2 rubber plug	*	27.00
1123	6300 GAL	CITY #20	*	70.88
1238	1 GAL	SOAP		30.00
1205	1 1/2 GAL	BI-CIDE		33.75
5407	MIN	BLENDING & HANDLING		
		TON-MILES		190.00
		STAND BY TIME		
		MILEAGE		
5501	4 HR	WATER TRANSPORTS		320.00
5502	4 HR	VACUUM TRUCKS		300.00
		FRAC SAND		
1124	180 SX	CEMENT 50/50	*	1188.00
			* SALES TAX	102.46
ESTIMATED TOTAL				3434.44

Ravin 2790

CUSTOMER or AGENTS SIGNATURE Wich Bates CIS FOREMAN Jeff Guban

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

188749

