

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>2-20-04</u>	<u>2-24-04</u>	<u>2-27-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-25708-00-00
County: Wilson
SE SE Sec. 17 Twp. 30 S. R. 15 East West
660' FSL _____ feet from S / N (circle one) Line of Section
660' 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 #: D4-17
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Penn Coals
Elevation: Ground: 978' Kelly Bushing: _____
Total Depth: 1425' Plug Back Total Depth: 1418'
Amount of Surface Pipe Set and Cemented at 24' 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 5/29/07
(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: 4-1-04
Subscribed and sworn to before me this 1st day of April,
2004.
Notary Public: Karen L. Welton
Date Commission Expires: _____
Notary Public, Ingham County, MI
My Comm. Expires Mar. 3, 2007

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

ORIGINAL

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: B Neill Well #: D4-17
 Sec. 17 Twp. 30 S. R. 15 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 & Dual Induction	Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum See Attached <div style="text-align: center;"> RECEIVED APR 05 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"		24'	Class A	5	
Prod	6 3/4"	4 1/2"	9.5#	1418'	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	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	
4	1272'-1273'	300 gal 10% HCl, 1635# sd, 250 BBL fl	
4	1087'-1089'	300 gal 10% HCl, 1690# sd, 220 BBL fl	
4	1024.5'-1025.5'	300 gal 10% HCl, 1690# sd, 220 BBL fl	
4	974'-977'	300 gal 10% HCl, 6050# sd, 410 BBL fl	
4	863.5'-864.5'	300 gal 10% HCl, 1690# sd, 220 BBL fl	

TUBING RECORD	Size <u>2 3/8"</u>	Set At <u>1393'</u>	Packer At <u>NA</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. <u>3-17-04</u>	Producing Method	Flowing <input type="checkbox"/> <input checked="" type="checkbox"/> Pumping	Gas Lift <input type="checkbox"/>	Other (Explain) <input type="checkbox"/>
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Estimated Production Per 24 Hours	Oil Bbls. <u>NA</u>	Gas Mcf <u>0</u>	Water Bbls. <u>45</u>	Gas-Oil Ratio <u>NA</u>	Gravity <u>NA</u>
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Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
(If vented, Sumit ACO-18.) Other (Specify) _____

McPherson Drilling LLC Drillers Log

Rig Number: 1	S. 17	T. 30	R. 15
API No. 15- 205-25708	County: WL		
Elev. 978'	Location:		

Operator:	Dart Cherokee Basin Operating Co. LLC		
Address:	3541 CR 5400 Independence, KS 67301		
Well No:	D4-17	Lease Name:	B. Neill
Footage Location:	660 ft. from the	South	Line
	660 ft. from the	East	Line
Drilling Contractor:	McPherson Drilling LLC		
Spud date:	2/20/2004	Geologist:	
Date Completed:	2/24/2004	Total Depth:	1425'

Casing Record			Rig Time:
	Surface	Production	
Size Hole:	11"	6 3/4"	
Size Casing:	8 5/8"		
Weight:	23#		
Setting Depth:	24'	McPherson	
Type Cement:	Portland		
Sacks:	4	McPherson	

ORIGINAL

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Gas Tests:

Comments:

Start injecting water @ 320'

Well Log										
Formation	Top	Btm.	Formation	Top	Btm.	Formation	Top	Btm.		
soil/clay	0	6	shale	886	926					
lime	6	58	lime Osw	926	953					
shale	58	69	Summit	953	963					
lime	69	130	lime	963	971					
shale	130	147	Mulky	971	977					
lime	147	155	lime	977	980					
shale	155	280	shale	980	1023					
lime	280	290	cgal	1023	1024					
shale	290	298	shale	1024	1044					
sand wet	298	357	blk shale wet	1044	1046					
shale	357	414	shale	1046	1086					
lime	414	420	coal	1086	1087					
sand wet	420	449	shale/sand	1087	1279					
shale	449	465	coal	1279	1280					
lime	465	528	shale	1280	1314					
shale	528	556	lime Miss	1314	1425 TD					
lime	556	586								
shale	586	725								
lime	725	735								
shale	735	860								
lime pink	860	861								
shale wet	861	867								
lime pink	867	884								
pink shale	884	886								



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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KCC WICHITA

ORIGINAL

TICKET NUMBER 23902

LOCATION Bartlesville

FIELD TICKET

DATE 2-25-04	CUSTOMER ACCT # 2368	WELL NAME B. Neill 04-17	QTR/QTR	SECTION 17	TWP 30S	RGE 15E	COUNTY Wilson	FORMATION
CHARGE TO Dart				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	3 sks	Cottonseed Hulls		38.85
1107	3 sks	Flo Seal		113.25
1110	18 sks	Gilsonite		349.20
1111	450#	Granulated Salt		112.50
1118	6 sks	Premium Gel		20.80
1123	6,500 gal	City Water		23.13
4404	1	4 1/2" Rubber Plug		22.00
1205	1 1/2 gal	Supersweet		33.15
1238	1 gal	Mud Flush		30.00
BLENDING & HANDLING				
5402	min	TON-MILES		190.00
STAND BY TIME				
MILEAGE				
5501	3 1/2 hrs	WATER TRANSPORTS		280.00
5502	3 1/2 hrs	VACUUM TRUCKS		262.50
FRAC SAND				
1124	180 sks	CEMENT		1188.00
				Wilson Co. 6.3% SALES TAX
				124.28
ESTIMATED TOTAL				3418.26

Ravin 2790

CUSTOMER or AGENTS SIGNATURE Willie Bartz

OIS FOREMAN Joseph Williams

CUSTOMER or AGENT (PLEASE PRINT)

DATE

129071

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

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TREATMENT REPORT

TICKET NUMBER **30034**
 LOCATION Barthesville
 FOREMAN Tracy Williams

ORIGINAL

DATE <u>2-25-04</u>	CUSTOMER # <u>2368</u>	WELL NAME <u>B.N. #104-17</u>	FORMATION
SECTION <u>12</u>	TOWNSHIP <u>30S</u>	RANGE <u>15E</u>	COUNTY <u>Wilson</u>
CUSTOMER <u>Dart</u>			
MAILING ADDRESS			
CITY			
STATE		ZIP CODE	
TIME ARRIVED ON LOCATION			

WELL DATA

HOLE SIZE <u>6 3/4</u>	PACKER DEPTH
TOTAL DEPTH <u>1425</u>	PERFORATIONS
	SHOTS/FT.
CASING SIZE <u>4 1/2</u>	OPEN HOLE
CASING DEPTH <u>1419</u>	
CASING WEIGHT <u>9.5</u>	TUBING SIZE
CASING CONDITION <u>23.6bl</u>	TUBING DEPTH
	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

TRUCK #	DRIVER	TRUCK #	DRIVER
<u>418</u>	<u>Tim</u>		
<u>409</u>	<u>Travis</u>		
<u>403</u>	<u>Tom</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 checked="" 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 checked="" 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 Run 2 sks of gel with hulls, 186bl dye water & mud flush to break circulation. Run 180 sks 5% po mix with 5% gilsonite, 5% salt, 2% gel & 1/4 #Flt @ 13.5 ppg. Shut down & washed up behind plug. Plugged plug to bottom & set shoe. Shut in. Circulated 56bl cement slurry to pit.

AUTHORIZATION TO PROCEED

TITLE

DATE

William Batts

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

12-25-71