

**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1  
September 1999  
Form Must Be Typed

**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>3-23-04</u>	<u>3-25-04</u>	<u>NA</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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API No. 15 - 125-30456-00-00  
 County: Montgomery  
E2 SE NW Sec. 2 Twp. 32S S. R. 14  East  West  
3300' FSL \_\_\_\_\_ feet from S / N (circle one) Line of Section  
3300' FEL 3000 feet from E / W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE NW SW  
 Lease Name: Southwinds Buffalo Ranch Well #: B2-2  
 Field Name: Cherokee Basin Coal Gas Area  
 Producing Formation: Penn Coals  
 Elevation: Ground: 881' Kelly Bushing: \_\_\_\_\_  
 Total Depth: 1545' Plug Back Total Depth: 1541'  
 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 KGR 6/12/07  
 (Data must be collected from the Reserve Pit)  
 Chloride content NA ppm Fluid volume 800 bbls  
 Dewatering method used empty w/ vac trk and air dry  
 Location of fluid disposal if hauled offsite:  
 Operator Name: J&M OIL  
 Lease Name: Sheeps A-1 License No.: 17648  
 Quarter NE Sec. 11 Twp. 28 S. R. 13  East  West  
 County: Washington County OK Docket No.: NA

**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: 7-20-04  
 Subscribed and sworn to before me this 20th day of July,  
 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: Southwinds Buffalo Ranch Well #: B2-2  
 Sec. 2 Twp. 32S 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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  <i>(Submit Copy)</i></p> <p>List All E. Logs Run:</p> <p>High Resolution Compensated Density Neutron &amp; Dual Induction</p>	<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></td> <td style="text-align: center;">Top Datum</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: center;">See Attached</td> </tr> </table>	Log Name	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample		Top Datum		See Attached		
Log Name	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample								
	Top Datum									
See Attached										

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	8	
Prod	6 3/4"	4 1/2"	9.5#	1541'	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
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TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	No
				NA			<input checked="" type="checkbox"/>
Date of First, Resumed Production, SWD or Enhr.		Producing Method					
not yet completed		Flowing		<input checked="" type="checkbox"/> Pumping	Gas Lift	Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		
	NA			NA	NA		

Disposition of Gas  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

TICKET NUMBER **23683**  
LOCATION B'ville

**FIELD TICKET**

*Southwinds Buffalo.*

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
3-26-04	2368	Ranch B2-2		2	34	14	MG	
CHARGE TO <b>DART</b>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1 1541'	PUMP CHARGE LONG STRING		525.00
1110	20 SX	GILSONITE	*	388.00
1111	450 #	SALT	*	112.50
1118	5 SX	GEL	*	59.00
1107	4 SX	FLO SEAL	*	151.00
1105	4 SX	HULLS	*	51.80
4404	1 ea.	4 1/2 Rubber plug	*	27.00
1123	6300 GAL	CITY H2O	*	70.88
1238	1 GAL	SOAP	*	30.00
1205	1 1/2 GAL	BI-CIDE	*	33.75
5407	MIN	BLENDING & HANDLING TON-MILES STAND BY TIME MILEAGE		190.00
5501	4 HR	WATER TRANSPORTS		320.00
5502	4 HR	VACUUM TRUCKS FRAC SAND		300.00
1124	200 SX	CEMENT 50/50	*	1320.00
			* SALES TAX	115.55

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Ravin 2790

ESTIMATED TOTAL **3694.48**

CUSTOMER or AGENTS SIGNATURE *William Bates*

CIS FOREMAN *Jeff Gehan*

CUSTOMER or AGENT (PLEASE PRINT)

DATE

129516

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

TICKET NUMBER **31064**  
 LOCATION Buffalo  
 FOREMAN [Signature]

**TREATMENT REPORT**

*Southwind  
Buffalo*

DATE <b>3-26-04</b>	CUSTOMER # <b>2368</b>	WELL NAME <b>RANCH B2-2</b>	FORMATION
SECTION <b>2</b>	TOWNSHIP <b>34</b>	RANGE <b>14</b>	COUNTY <b>MG</b>
CUSTOMER <b>DART</b>			
MAILING ADDRESS			
CITY			
STATE		ZIP CODE	
TIME ARRIVED ON LOCATION			

TRUCK #	DRIVER	TRUCK #	DRIVER
418	TIM		
412	<del>Donnie</del>		
235	MARK		
226	Donnie		

**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"/>

*PPG - 200*

**PRESSURE LIMITATIONS**

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

**WELL DATA**

HOLE SIZE <b>6 3/4</b>	PACKER DEPTH
TOTAL DEPTH <b>1545</b>	PERFORATIONS
	SHOTS/FT
CASING SIZE <b>4 1/2</b>	OPEN HOLE
CASING DEPTH <b>1541</b>	
CASING WEIGHT	TUBING SIZE
CASING CONDITION	TUBING DEPTH
	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

*est. circ. - ran 2 st gel/halls ahead of 10 BBL foamer followed by 10 BBL clean H<sub>2</sub>O - pumped 200 st DART mix @ 13.5 PPG - shut down - washed out lines & pump - dropped plug - displaced to bottom & set shoe - shut in*

AUTHORIZATION TO PROCEED

TITLE

DATE

*Circ. cont. to surface*

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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*199-16*