

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 **RECEIVED**  
 Phone: (517) 244-8716 **JUL 22 2004**  
 Contractor: Name: McPherson **KCC WICHITA**  
 License: 5675  
 Wellsite Geologist: Bill Barks  
 Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  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>3-29-04</u>                    | <u>4-1-04</u>   | <u>NA</u>                               |
| Spud Date or<br>Recompletion Date | Date Reached TD | Completion Date or<br>Recompletion Date |

API No. 15 - 205-25751-00-00  
 County: Wilson  
NE NW NW Sec. 22 Twp. 30 S. R. 14  East  West  
4941' FSL feet from S / N (circle one) Line of Section  
4515' 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: R&A Huser Well #: A1-22  
 Field Name: Cherokee Basin Coal Gas Area  
 Producing Formation: Penn Coals  
 Elevation: Ground: 929' Kelly Bushing: \_\_\_\_\_  
 Total Depth: 1407' Plug Back Total Depth: 1401'  
 Amount of Surface Pipe Set and Cemented at 41' 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 300 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: Adee B1-8 SWD License No.: 33074  
 Quarter NW Sec. 8 Twp. 31 S. R. 16  East  West  
 County: Montgomery Docket No.: D-28237

**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: R&A Huser Well #: A1-22  
 Sec. 22 Twp. 30 S. R. 14  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.

|  |  |
|--|--|
| <p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br/> <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<br/> <i>(Submit Copy)</i></p> <p>List All E. Logs Run:</p> <p><b>High Resolution Compensated Density Neutron &amp; Dual Induction</b></p> | <p>Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample</p> <p>Name Top Datum</p> <p>See Attached</p> |
|--|--|

| 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"                    |                   | 41'           | Class A        | 10           |                            |
| Prod  | 6 3/4"            | 4 1/2"                    | 9.5#              | 1401'         | 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<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><input type="checkbox"/> Plug Off Zone |                  |                |             |                            |
|  |                  |                |             |                            |

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------|
|                |   |  |       |
|                |   |  |       |
|                |   |  |       |
|                |   |  |       |

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|   |           |                                  |   |  |
|---|-----------|----------------------------------|---|--|
| TUBING RECORD                                   | Size      | Set At                           | Packer At                                   | Liner Run  |
|   |           |                                  | NA  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>        |
| Date of First, Resumed Production, SWD or Enhr. |           | Producing Method                 |   |  |
| not yet completed                               |           | 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. | Gas Mcf                          | Water Bbls.                                 | Gas-Oil Ratio  |
|   | NA        |                                  |   | NA   |
|   |           |                                  |   | Gravity  |
|   |           |                                  |   | NA   |

Disposition of Gas  Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

(If vented, Sumit ACO-18.)





**CONSOLIDATED**  
OIL WELL  
SERVICES  
AN INFINITY COMPANY

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

TICKET NUMBER 23698

LOCATION Bartlesville

**FIELD TICKET**

|                   |                        |                              |         |               |            |            |                   |           |
|-------------------|------------------------|------------------------------|---------|---------------|------------|------------|-------------------|-----------|
| DATE<br>3-30-04   | CUSTOMER ACCT#<br>2368 | WELL NAME<br>R+A Huser A1-00 | QTR/QTR | SECTION<br>22 | TWP<br>30S | RGE<br>14E | COUNTY<br>W, 150N | FORMATION |
| CHARGE TO<br>Oart |                        |                              |         | OWNER         |            |            |                   |           |
| MAILING ADDRESS   |                        |                              |         | OPERATOR      |            |            |                   |           |
| CITY & STATE      |                        |                              |         | CONTRACTOR    |            |            |                   |           |

| ACCOUNT CODE | QUANTITY or UNITS            | DESCRIPTION OF SERVICES OR PRODUCT                           | UNIT PRICE                | TOTAL AMOUNT |
|--------------|------------------------------|--|---------------------------|--------------|
| 5401         | 10<br>015700-0050<br>4/16/04 | PUMP CHARGE Surface Casing                                   |                           | 525.00       |
| 1102         | 111<br>111-111               | Calcium Chloride   |                           | 34.00        |
| 1123         | 111<br>111-111 gal           | City Water   |                           | 16.88        |
| 1205         | 1/2 gal                      | Supersweet   |                           | 11.25        |
| 5401         | min                          | BLENDING & HANDLING<br>TON-MILES<br>STAND BY TIME<br>MILEAGE |                           | 190.00       |
| 5502         | 3 1/2 hrs                    | WATER TRANSPORTS<br>VACUUM TRUCKS<br>FRAC SAND               |                           | 062.50       |
| 1104         | 20 cks                       | CEMENT   |                           | 170.00       |
|              |                              |  | Wilson Co. 6.3% SALES TAX | 13.92        |

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Rev'n 2790

ESTIMATED TOTAL 1223.55

CUSTOMER or AGENTS SIGNATURE William F. Barks

CIS FOREMAN Tracy Williams

CUSTOMER or AGENT (PLEASE PRINT)

DATE

129564

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

TICKET NUMBER **31068**  
 LOCATION Bartholomew  
 FOREMAN Tracy Williams

**TREATMENT REPORT**

|                          |                           |                                     |                         |
|--------------------------|---------------------------|-------------------------------------|-------------------------|
| DATE<br><b>3-30-04</b>   | CUSTOMER #<br><b>2368</b> | WELL NAME<br><b>RtA Huser A1-22</b> | FORMATION               |
| SECTION<br><b>2Q</b>     | TOWNSHIP<br><b>30S</b>    | RANGE<br><b>14E</b>                 | COUNTY<br><b>Wilson</b> |
| CUSTOMER<br><b>Dart</b>  |                           |                                     |                         |
| MAILING ADDRESS          |                           |                                     |                         |
| CITY                     |                           |                                     |                         |
| STATE                    |                           | ZIP CODE                            |                         |
| TIME ARRIVED ON LOCATION |                           |                                     |                         |

|                              |                  |
|------------------------------|------------------|
| WELL DATA                    |                  |
| HOLE SIZE<br><b>11" O.K.</b> | PACKER DEPTH     |
| TOTAL DEPTH<br><b>416'</b>   | PERFORATIONS     |
|                              | SHOTS/FT.        |
| CASING SIZE<br><b>8 7/8"</b> | OPEN HOLE        |
| CASING DEPTH<br><b>41'</b>   |                  |
| CASING WEIGHT                | TUBING SIZE      |
| CASING CONDITION             | TUBING DEPTH     |
|                              | TUBING WEIGHT    |
|                              | TUBING CONDITION |
| TREATMENT VIA                |                  |

| TRUCK #    | DRIVER        | TRUCK # | DRIVER |
|------------|---------------|---------|--------|
| <b>418</b> | <b>Tim</b>    |         |        |
| <b>202</b> | <b>Donnie</b> |         |        |
| <b>428</b> | <b>Danny</b>  |         |        |
|            |               |         |        |
|            |               |         |        |
|            |               |         |        |
|            |               |         |        |

**TYPE OF TREATMENT**

|  |   |
|--|---|
| <input checked="" type="checkbox"/> SURFACE PIPE | <input type="checkbox"/> ACID BREAKDOWN   |
| <input 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**

|                     | THEORETICAL | INSTRUCTED |
|---------------------|-------------|------------|
| SURFACE PIPE        |             |            |
| ANNULUS LONG STRING |             |            |
| TUBING              |             |            |

INSTRUCTION PRIOR TO JOB Break circulation + ran 20 bbls of cement + displaced to 30' Shut in. Circulated 3 bbl cement slurry to pit

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 <b>5</b>      |
|            |       |              |          |              |              |     | 15 MIN.            |
|            |       |              |          |              |              |     | MAX RATE           |
|            |       |              |          |              |              |     | MIN RATE           |

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OIL WELL  
SERVICES  
AN INFINITY COMPANY

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

TICKET NUMBER 23661

LOCATION Bartholomew

**FIELD TICKET**

|                   |                         |                            |         |               |            |            |                  |           |
|-------------------|-------------------------|----------------------------|---------|---------------|------------|------------|------------------|-----------|
| DATE<br>4-2-04    | CUSTOMER ACCT #<br>2368 | WELL NAME<br>RFA Huce A-22 | QTR/QTR | SECTION<br>22 | TWP<br>30S | RGE<br>14E | COUNTY<br>Wilson | FORMATION |
| CHARGE TO<br>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  |                 | 349.00           |
| 1111         | 450 #             | Granulated Salt  |                 | 112.50           |
| 1118         | 6 sks             | Premium Gel  |                 | 20.80            |
| 1123         | 6500 gal          | City Water   |                 | 23.13            |
| 4404         | 1                 | 4/8 Rubber Plug  |                 | 21.00            |
| 1205         | 1/2 gal           | Supersweet   |                 | 33.15            |
| 1238         | 1 gal             | Mud Flush  |                 | 30.00            |
| 5407         | min               | BLENDING & HANDLING<br>TON-MILES<br>STAND BY TIME<br>MILEAGE |                 | 190.00           |
| 5501         | 4 hrs             | WATER TRANSPORTS   |                 | 300.00           |
| 5502         | 4 hrs             | VACUUM TRUCKS<br>FRAC SAND                                   |                 | 300.00           |
| 1124         | 180 sks           | CEMENT   |                 | 1188.00          |
|              |                   |  | Wilson Co. 6.3% | SALES TAX 124.88 |

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Ravin 2780

ESTIMATED TOTAL 3495.16

CUSTOMER or AGENTS SIGNATURE Willie Batts CIS FOREMAN Jacques Williams

CUSTOMER or AGENT (PLEASE PRINT) \_\_\_\_\_ DATE \_\_\_\_\_

189640

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

TICKET NUMBER **30075**  
 LOCATION **Bathel, Mo**  
 FOREMAN **Tracy L. Williams**

**TREATMENT REPORT**

|                          |              |                  |           |
|--------------------------|--------------|------------------|-----------|
| DATE                     | CUSTOMER #   | WELL NAME        | FORMATION |
| 4-2-04                   | 2368         | Rth. Huser A-22  |           |
| SECTION                  | TOWNSHIP     | RANGE            | COUNTY    |
| 22                       | 30S          | 14E              | WAGON     |
| CUSTOMER                 |              |                  |           |
| Dart                     |              |                  |           |
| MAILING ADDRESS          |              |                  |           |
| CITY                     |              |                  |           |
| STATE                    |              | ZIP CODE         |           |
| TIME ARRIVED ON LOCATION |              |                  |           |
| WELL DATA                |              |                  |           |
| HOLE SIZE                | PACKER DEPTH |                  |           |
| 6 3/4                    |              |                  |           |
| TOTAL DEPTH              | PERFORATIONS |                  |           |
| 1409                     |              |                  |           |
| CASING SIZE              |              | OPEN HOLE        |           |
| 4 1/2                    |              |                  |           |
| CASING DEPTH             |              |                  |           |
| 1401                     |              |                  |           |
| CASING WEIGHT            |              | TUBING SIZE      |           |
| 9.5                      | WARRAN       |                  |           |
| CASING CONDITION         |              | TUBING DEPTH     |           |
| 22.26                    |              |                  |           |
|                          |              | TUBING WEIGHT    |           |
|                          |              | TUBING CONDITION |           |
| TREATMENT VIA            |              |                  |           |

| TRUCK # | DRIVER | TRUCK # | DRIVER |
|---------|--------|---------|--------|
| 416     | Jim    |         |        |
| 415     | Jeff H |         |        |
| 202     | Travis |         |        |
| 113     | Danny  |         |        |

**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**

|                     | THEORETICAL | INSTRUCTED |
|---------------------|-------------|------------|
| SURFACE PIPE        |             |            |
| ANNULUS LONG STRING |             |            |
| TUBING              |             |            |

INSTRUCTION PRIOR TO JOB: Ran 10 bbl water, 2 sks gel with 1/4 lb 5 bbl water, 1/5 bbl mud flush, on while breaking circ. Ran 180 sks 50/50 pmix with 5# gilsonite, 52 salt 27 gal, 1/4" flo. @ 13.5 ppg. Shut down & washed up behind plug. Pumped plug to bottom & set sks in. Circulated 8 bbl cement slurry to pit.

AUTHORIZATION TO PROCEED: *[Signature]* TITLE: DATE:

| TIME | 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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187640