

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form 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
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. _____
3-26-04 3-30-04 NA
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 205-25756-00-00
County: Wilson
SE SW NE Sec. 23 Twp. 30 S. R. 14 East West
2800' FSL feet from S / N (circle one) Line of Section
1800' 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 #: B3-23
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Penn Coals
Elevation: Ground: 903' Kelly Bushing: _____
Total Depth: 1415' Plug Back Total Depth: 1409'
Amount of Surface Pipe Set and Cemented at 43' 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 6/12/07
(Data must be collected from the Reserve Pit)
Chloride content NA ppm Fluid volume 900 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: Orr A1-28 SWD License No.: 33074
Quarter NW Sec. 28 Twp. 30 S. R. 15 East West
County: Wilson Docket No.: D-28282

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

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 #: B3-23
 Sec. 23 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 <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 & Dual Induction</p>	<p>Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample</p> <p>Name Top Datum</p> <p>See Attached</p>
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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"		43'	Class A	10	
Prod	6 3/4"	4 1/2"	9.5#	1409'	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
	RECEIVED		
	JUL 22 2004		
	KCC WICHITA		

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 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

TICKET NUMBER **23660**

LOCATION Barthesville

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
3-30-04	2368	RtA Huger B3-23		23	30S	14E	Wilson	
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
	DISPOS 4/10/04			
1105	3 sks	Cottonseed Hulls		38.85
1107	3 sks	Fla Seal		113.25
1110	18 sks	Gilsonite		349.20
1111	450 #	Granulated Salt		112.50
1118	5 sks	Premium Gel		59.00
1123	6,500 gal	City Water		23.13
4404	1 #	4 1/2" Rubber Plug		22.00
1205	1 1/2 gal	Supersweet		33.75
1238	1 gal	Mud Flush		30.00
		RECEIVED		
		JUL 22 2004		
		KCC WICHITA		
5407	min	BLENDING & HANDLING		190.00
		TON-MILES		
		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		123.54

Revin 2790

ESTIMATED TOTAL **3405.72**

CUSTOMER or AGENTS SIGNATURE

Willm Dart

CIS FOREMAN

Tracy Williams

CUSTOMER or AGENT (PLEASE PRINT)

DATE

198560

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

TICKET NUMBER **31056**

LOCATION Bartlesville
 FOREMAN Tracy Williams

TREATMENT REPORT

DATE <u>3-30-04</u>	CUSTOMER # <u>2368</u>	WELL NAME <u>ATA Huser B3-23</u>	FORMATION
SECTION <u>23</u>	TOWNSHIP <u>30 S</u>	RANGE <u>14 E</u>	COUNTY <u>Wilson</u>
CUSTOMER <u>Dart</u>			
MAILING ADDRESS:			
CITY			
STATE		ZIP CODE	
<u>OK</u>		<u>7505</u>	
TIME ARRIVED ON LOCATION			

WELL DATA	
HOLE SIZE <u>6 3/4</u>	PACKER DEPTH
TOTAL DEPTH <u>1415</u>	PERFORATIONS
	SHOTS/FT
CASING SIZE <u>4 1/2</u>	OPEN HOLE
CASING DEPTH <u>1409</u>	
CASING WEIGHT <u>9.5</u>	TUBING SIZE
CASING CONDITION	TUBING DEPTH
<u>22.89</u>	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

TRUCK #	DRIVER	TRUCK #	DRIVER
<u>4118</u>	<u>Tim</u>		
<u>239</u>	<u>Dan</u>		
<u>415</u>	<u>Travis</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 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: run 10 bbl water, 2 sks gel with 1 Hull, 5 bbl water, 1.5 bbl mud flush, 5 bbl water while breakin
circ. ran 180 sks 50/50 permix with 5# gilsonite 8% salt, 2% gel 1/4# flo. @ 13.5 ppg. Shut down & was
up behind plug. Pumped plug to bottom & set shoe. Shut in. Circulated 1/2 bbl cement slurry to p.t.

AUTHORIZATION TO PROCEED

TITLE

DATE

Tracy Williams

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

RECEIVED
JUL 22 2004
KCC WICHITA

139560