

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. _____

10-14-04	10-18-04	10-22-04
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-30647-00-00
County: Montgomery
N2 SE NW Sec. 11 Twp. 35 S. R. 14 East West
3500' FSL feet from S N (circle one) Line of Section
3300' 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: C&T Perkins Well #: B2-11
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Penn Coals
Elevation: Ground: 937' Kelly Bushing: _____
Total Depth: 1748' Plug Back Total Depth: 1745'
Amount of Surface Pipe Set and Cemented at 149 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 6/21/07
(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.

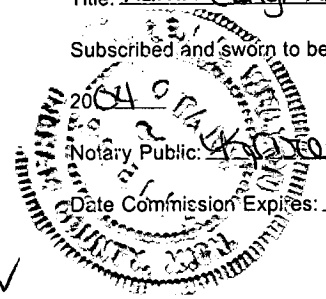
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Beth Oswald
Title: Admn & Engr Asst Date: 12-1-04
Subscribed and sworn to before me this 1st day of December

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: C&T Perkins Well #: B2-11
 Sec. 11 Twp. 35 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.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) 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
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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"		149'	Class A	60	See Attached
Prod	6 3/4"	4 1/2"	9.5#	1745'	50/50 Poz	240	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	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
4	1332'-1333'	1332'-1333'	300 gal 10% HCl, 1695# sd, 255 BBL fl	
4	1259'-1261'	1259'-1261'	300 gal 10% HCl, 1672# sd, 245 BBL fl	
4	1198'-1201'	1198'-1201'	300 gal 10% HCl, 4505# sd, 330 BBL fl	
4	1170.5'-1171.5'	1170.5'-1171.5'	300 gal 10% HCl, 1665# sd, 250 BBL fl	
4	1144'-1145'	1144'-1145'	300 gal 10% HCl, 5095# sd, 370 BBL fl	

TUBING RECORD	Size 2 3/8"	Set At 1518'	Packer At NA	Liner Run Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Date of First, Resumed Production, SWD or Enhr. 11-10-04	Producing Method			
	Flowing	✓ Pumping	Gas Lift	Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 0	Water Bbls. 42	Gas-Oil Ratio NA	Gravity NA
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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, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER - 1842
 LOCATION Bville
 FOREMAN Jeff Graham

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-14-04	2368	PERKINS B2-11	11	35	14	MG
CUSTOMER		MAILING ADDRESS				
DART						
CITY	STATE	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
			289	KIRK		
			428	Justin Bobby		
			202	Justin		
JOB TYPE	HOLE SIZE	HOLE DEPTH	CASING SIZE & WEIGHT			
Surface	11	155	8 5/8 24"			
CASING DEPTH	DRILL PIPE	TUBING	OTHER			
149						
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING			
14.5			15'			
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	RATE			
8.6						
REMARKS:	Ram 1 sks gel/hulls ahead of H ₂ O + est. circ - pumped 50 sk 3% calcium cement w/hulls @ 14.5 PP6 - displaced to 1 w/ <u>BBB</u> - shut in - <u>15' - 1000</u> <u>10' - 0</u> <u>5' - 0</u> <u>0' - 0</u> <u>0' - 0</u> <u>0' - 0</u> - Circ. cmt. to surface -					

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE <i>Surface</i>		550.00
5406	28 m	MILEAGE		65.80
5407	1 MIN	BULK TRK		225.00
5502C	0.2 HR	80 VAC		156.00
1104	50 SK	Cement	*	445.00
1102	2 SK	CALCIUM	*	71.40
1118	1 SK	GEL	*	12.40
1105	1 SK	HULLS	*	13.60
1123	2100 GAL	CITY H ₂ O	*	24.15
			*	SALES TAX 30.03
				ESTIMATED TOTAL 1593.38

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AUTHORIZATION [Signature] TITLE 193534 DATE _____

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

TICKET NUMBER 1866
 LOCATION B-ville
 FOREMAN Coop

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-18-04		C+T Perkins B2-11	11	35	14E	Mont.
CUSTOMER Dart			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			418	Tim		
CITY			391	Chris		
STATE			403	Tom		
ZIP CODE			119	Justin		

JOB TYPE Long String HOLE SIZE 6 3/4 HOLE DEPTH 1748 CASING SIZE & WEIGHT 4 1/2 9.5
 CASING DEPTH 1745 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING -0-
 DISPLACEMENT 28.3 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Est. circulation pumped 2 sks gel u-bulls pumped 10 RBK scrap ahead
car 240 lbs cement shut down flushed pump lines displaced plug to bottom
set shoe, circulation.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Long String		710.00
5406	35	MILEAGE		82.25
5402	1745'	Casing Footage		261.75
5407	1 min	Bulk Truck		225.00
5501	3hr	Transport		252.00
5502	3hr	80 Vac		234.00
1131	240sks	60/40 Poz		1752.00
1105	1sk	Cotton seed hulls		13.60
1107	2sks	Flo Seal		80.00
1110	24sks	Gilscrite		488.40
1111	10sks	Salt		130.00
1118	6sks	12el		74.40
1123	6000 gal	City Water		69.00
1234	1 gal	Soap		29.90
1205	1.5 gal	bicide		35.47
4404	1	4 1/2 Rubber Plug		35.00
			SALES TAX	140.04
			ESTIMATED TOTAL	4462.71

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AUTHORIZATION [Signature] TITLE _____ DATE _____