

ORIGINAL

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

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 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>8-31-04</u>	<u>9-2-04</u>	<u>9-8-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-25834-00-00
County: Wilson
N2 SE SW Sec. 9 Twp. 30 S. R. 15 East West
662' 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: Porter et al Well #: D2-9
Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Penn Coals
Elevation: Ground: 973' Kelly Bushing: _____
Total Depth: 1446' Plug Back Total Depth: 1442'
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 1442
feet depth to 0 wl 190 sx cmt.

Drilling Fluid Management Plan Well #2 KGR 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.

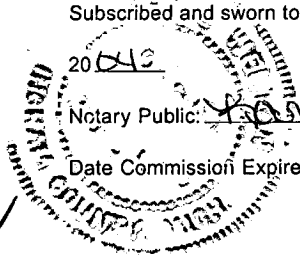
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

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: _____

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

KAREN L. WELTON
Notary Public - Michigan
Ingham County
My Commission Expires Mar 3, 2007
Acting in the County of Ingham



Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: Porter et al Well #: D2-9
 Sec. 9 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
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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"		21'	Class A	5	
Prod	6 3/4"	4 1/2"	9.5#	1442'	50/50 Poz	190	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
4	1238.5'-1240.5'	300 gal 10% HCl, 3045# sd, 315 BBL fl		
4	1057.5'-1059.5'	300 gal 10% HCl, 1090# sd, 355 BBL fl		
4	942'-945'	300 gal 10% HCl, 6045# sd, 390 BBL fl		
4	831.5'-832.5'	300 gal 10% HCl, 575# sd, 195 BBL fl		

TUBING RECORD		Size 2 3/8"	Set At 1407'	Packer At NA	Liner Run Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 10-10-04		Producing Method Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 19	Water Bbls. 75	Gas-Oil Ratio NA	Gravity NA

Disposition of Gas Vented Sold Used on Lease Other (Specify) _____

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled _____

Production Interval _____

McPherson Drilling LLC Drillers Log

Rig Number: 1	S. 9	T. 30	R. 15 E
API No. 15- 205-25834	County: Wilson		
Elev. 973'	Location:		

Operator:	Dart Cherokee Basin Operating Co. LLC		
Address:	3541 CR 5400 Independence, KS 67301		
Well No:	D 2-9	Lease Name:	Porter et al
Footage Location:	662 ft. from the	South	Line
	3300 ft. from the	East	Line
Drilling Contractor:	McPherson Drilling LLC		
Spud date:	8/31/2004	Geologist:	
Date Completed:	9/2/2004	Total Depth:	1446'

Casing Record			Rig Time:
	Surface	Production	
Size Hole:	11"	6 3/4"	
Size Casing:	8 5/8"		
Weight:	20#		
Setting Depth:	21'	McPherson	
Type Cement:	Port		
Sacks:	4	McPherson	Driller - Andy Coats

Gas Tests:
Comments:
strat injecting @ 440'

Well Log									
Formation	Top	Btm.	Formation	Top	Btm.	Formation	Top	Btm.	
soil	0	1	2nd Oswego	932	944				
lime	1	25	Mukly	944	947				
shale	25	149	3rd Oswego	947	953				
lime	149	252	shale	953	993				
shale	252	300	coal	993	995				
sand	300	345 wet	shale	995	1017				
shale	345	397	coal	1017	1019				
sand shale	397	451	shale	1019	1023				
lime	451	492	lime	1023	1032				
shale	492	523	sand shale	1032	1058				
lime	523	553	coal	1058	1060				
shale	553	653	sand shale	1060	1071				
lime	653	672	coal	1071	1073				
shale	672	687	sand shale	1073	1126				
lime	687	705	coal	1126	1127				
sand shale	705	765	shale	1127	1232				
sand	765	800	coal	1232	1233				
sand shale	800	831	shale	1233	1240				
coal	831	833	coal	1240	1244				
sand shale	833	839	shale	1244	1270				
pink lime	839	858	coal	1270	1273				
shale	858	900	shale	1273	1284				
1st Oswego	900	926	Mississippian	1284	1446				
Summit	926	932							

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

TICKET NUMBER 1713
 LOCATION Bartlesville
 FOREMAN Tracy L. Williams

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-2-04	2368	Porter C+AI D2-9	9	30S	15E	Wilson
CUSTOMER <u>Dart</u>						
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY			418	Tim		
STATE			401	Bobby		
ZIP CODE			428	Danny		
			400	Mack		

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH 1446 CASING SIZE & WEIGHT 4 1/2 9.5
 CASING DEPTH 1442 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL 1.368 WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 23.4 DISPLACEMENT PSI 600 MIX PSI 200 RATE 5

REMARKS: Ran 2 sks of gel with 1 sk of hulls, 15 bbl mud flush + broke circulation.
Ran 190 sks 50/50 Pozmix with 5# gilsonite, 5% salt & 2% gel + 1/4# flo. Shut down
+ washed up behind plug. Pumped plug to bottom + set shoe. Shut in. Circulated
10 bbls cement slurry to pit.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Production Casing		710.00
5406	60	MILEAGE		141.00
1105	2 sks	Cottonseed Hulls		22.20
1107	3 sks	Flo Seal		120.00
1110	19 sks	Gilsonite		386.65
1111	450#	Granulated Salt		117.00
1118	6 sks	Premium Gel		24.40
1123	6500 gal	City Water		24.75
4404	1	4 1/2" Rubber Plug		35.00
1124	190 sks	50/50 Pozmix		1311.00
1205	1 1/2 gal	Supersweet		35.48
1238	1 gal	Mud Flush		31.50
5501C	4 hrs	Transport		336.00
5502C	4 hrs	80 Vac		312.00
5407	min	Ton Mileage		225.00
			SALES TAX	135.20
			ESTIMATED TOTAL	4092.18

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AUTHORIZATION [Signature]

TITLE 192042

DATE _____