

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED
OCT 19 2004
KCC WICHITA

Operator: License # 32912
Name: Carroll Energy, LLC
Address: 2198 Valley High Dr
City/State/Zip: Independence, KS 67301
Purchaser: Dart Energy
Operator Contact Person: Terry Carroll
Phone: (620) 331-7166
Contractor: Name: James D. Lorenz
License: 9313
Wellsite Geologist: _____
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>2/24/04</u>	<u>2/26/04</u>	<u>3/12/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-25739-0000
County: Wilson
n/2 ne sw Sec. 33 Twp. 29 S. R. 15 East West
2239 feet from (S) / N (circle one) Line of Section
3366 feet from (E) / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Eisele Well #: C-1
Field Name: Fredonia
Producing Formation: Coals
Elevation: Ground: 900 Kelly Bushing: 888
Total Depth: 1312' Plug Back Total Depth: 1270
Amount of Surface Pipe Set and Cemented at _____ Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set N/A Feet
If Alternate II completion, cement circulated from 1270
feet depth to Surface w/ 205 sx cmt.

Drilling Fluid Management Plan ALT #2 KJR 7/02/07
(Data must be collected from the Reserve Pit)
Chloride content N/A ppm Fluid volume N/A bbls
Dewatering method used N/A
Location of fluid disposal if hauled offsite:
Operator Name: N/A
Lease Name: N/A License No.: N/A
Quarter N/A Sec. N/A Twp. N/A S. R. N/A East West
County: N/A Docket No.: N/A

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: _____
Title: Operating Manager Date: 10-11-04
Subscribed and sworn to before me this 11 day of October,
2004.
Notary Public: _____
Date Commission Expires: _____

 **TIM CARROLL**
Notary Public - State of Kansas
My Appt. Expires 9-20-2005

KCC Office Use ONLY

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

Operator Name: Carroll Energy, LLC Lease Name: Eisele Well #: C-1
 Sec. 33 Twp. 29 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: Radioactivity, Dual Induction, High Resolution Compensated Density	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Pink</td> <td>792</td> <td>Lime</td> </tr> <tr> <td>Oswego</td> <td>846</td> <td>Lime</td> </tr> <tr> <td>Mulky</td> <td>888</td> <td>Shale</td> </tr> <tr> <td>Mississippi</td> <td>1248</td> <td>Lime</td> </tr> </table>	Name	Top	Datum	Pink	792	Lime	Oswego	846	Lime	Mulky	888	Shale	Mississippi	1248	Lime
Name	Top	Datum														
Pink	792	Lime														
Oswego	846	Lime														
Mulky	888	Shale														
Mississippi	1248	Lime														

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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
Surface	11"	8 5/8	32	20'	Port	4	
Production	6 3/4	4 1/2	9.5	1270'	Port	205	OWC

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
4	3 1/8" Slick Tag Gun 872'-879'	5 sx 20/40 Frac Sand 35 sx 12/20 Frac Sand	872'-879'
4	3 1/8" Slick Tag Gun 890'-895'	5 sx 20/40 Frac Sand 40 sx 12/20 Frac Sand	890'-895'

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8	930	N/A	
Date of First, Resumerd Production, SWD or Enhr.		Producing Method		
3/20/04		<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
		20	50	

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	

James D. Lorenz KCC Lic. #9313
 543A 22000 ROAD
 CHERRYVALE, KANSAS 67335-8515
 620-328-4433 OFFICE

RECEIVED
 OCT 19 2004
 KCC WICHITA

TICKET NUMBER 030404
 LOCATION WL Co.
 FOREMAN JL, DH, BL

16

CEMENT TREATMENT REPORT

DATE <u>3/4</u>	CUSTOMER# <u>T.C</u>	WELL NAME <u>E12 B C-1</u>	
SECTION <u>33</u>	TOWNSHIP <u>09</u>	RANGE <u>15 E</u>	COUNTY <u>Wilson</u>
CUSTOMER <u>CANTROL ENERGY LLC</u>			
MAILING ADDRESS <u>2198 Valley High Drive</u>			
CITY <u>Independence</u>			
STATE <u>Kansas</u>		ZIP CODE <u>67301</u>	
TIME ARRIVED ON LOCATION			

HOLE	PIPE	ANNUAL VOLUME IN LINEAR FT./BL.	
6 3/4"	4 1/2"	40.5	
6 1/4"	4 1/2"	54.5	
6 1/4"	2 1/2"	33.5	
5 1/4"	2 1/2"	53.5	
5 1/4"	2"	47	
TUBING-LINEAR FT./BL.			
4 1/2"	9.5 lb.	61.7	
4 1/2"	10.5 lb.	63.1	<u>21</u>
4 1/2"	11.6 lb.	64.5	
2 1/2"		170	
2"		250	

32
 26

WELL DATA	
HOLE SIZE	<u>6 3/4"</u>
TOTAL DEPTH	<u>1270'</u>
CASING SIZE	<u>4 1/2"</u>
CASING DEPTH	<u>1310</u>
OPEN HOLE	
PACKER DEPTH	
WIRE LINE	READING BEFORE <u>1312</u>
WIRE LINE	READING AFTER
TREATMENT VIA	

TYPE OF TREATMENT

- SURFACE PIPE
- PRODUCTION CASING
- SQUEEZE CEMENT
- PLUG AND ABANDON
- PLUG BACK
- MISP. PUMP
- WASH DOWN
- OTHER

INSTRUCTIONS PRIOR TO JOB _____

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____

HOOKED ONTO 4 1/2" CASING ESTABLISHED CIRCULATION WITH 30 BARRELS OF WATER, RAN
6 SX GEL, 1 SX COTTONSEED HULLS, 1 SX METASILICATE AHEAD, THEN BLENDED
2.05 SACKS OF OWC CEMENT WHEN DROPPED RUBBER PLUG, THEN PUMPED
2.1 BARRELS OF WATER.

- PLUGGED BOTTOM
- SHUT IN PRESSURE
- LOST CIRCULATION
- GOOD CEMENT RETURN
- TOPPED OFF WELL WITH _____ SA

[Signature]
 (SIGNATURE)