

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

10/28/10

CONFIDENTIAL

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. _____

7-17-08 7-22-08 8-8-08

Spud Date or Date Reached TD Completion Date or Recompletion Date

Recompletion Date

API No. 15 - 125-31716-00-00

County: Montgomery

SE SE SE Sec. 21 Twp. 31 S. R. 14 East West

645' FSL _____ feet from S / N (circle one) Line of Section

510' 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: Springer Farms Well #: D4-21

Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Penn Coals

Elevation: Ground: 870' Kelly Bushing: _____

Total Depth: 1550' Plug Back Total Depth: 1536'

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

(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: [Signature]

Title: Engr Clerk Date: 10-28-08

Subscribed and sworn to before me this 28 day of October

2008

Notary Public: Brandy R. Allcock BRANDY R. ALLCOCK Notary Public - Michigan Jackson County Commission Expires March 05, 2011

Date Commission Expires: 3-5-2011 acting in Michigan

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISS
OCT 31 2008
CONSERVATION DIVISION
WICHITA, KS