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**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: Thornton
License: 4815
Wellsite Geologist: Bill Barks

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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>8-2-06</u>	<u>8-3-06</u>	<u>10-19-06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-31151-00-00
County: Montgomery
NE NW NE Sec. 28 Twp. 33 S. R. 14 East West
4700' 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: D&D Armitage Well #: A3-28
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Penn Coals
Elevation: Ground: 890' Kelly Bushing: _____
Total Depth: 1590' Plug Back Total Depth: 1605'
Amount of Surface Pipe Set and Cemented at 44 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) *ALT DWITH 1-28-08*
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: 11-27-06
Subscribed and sworn to before me this 27th day of November,
2006
Notary Public: [Signature]
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

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Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: D&D Armitage Well #: A3-28
 Sec. 28 Twp. 33 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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

High Resolution Compensated Density Neutron & Dual Induction

Log Formation (Top), Depth and Datum 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"	24#	44'	Class A	8	
Prod	6 3/4"	4 1/2"	9.5#	1609'	Thick Set	160	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	1404.5' - 1406'		300 gal 15% HCl, 3010# sd, 210 BBL fl	
4	1157' - 1158'		300 gal 15% HCl, 1000# sd, 165 BBL fl	
4	1110' - 1112.5'		300 gal 15% HCl, 4025# sd, 200 BBL fl	
4	1066.5' - 1069.5'		300 gal 15% HCl, 6005# sd, 230 BBL fl	

TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	<input checked="" type="checkbox"/> No
		2 3/8"	1589'	NA			
Date of First, Resumed Production, SWD or Enhr.			Producing Method				
10-25-06			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	0	28	NA	NA		

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

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Office Phone
918-626-4100

Thornton Drilling Company
P.O. BOX 811
POCOLA, OK 74902

Fax
918-626-4105

Operator:		Well No.	Lease	Loc.	1/4	1/4	1/4	Sec.	Twp.	Rge.
DART CHEROKEE BASIN		A3-28	D&D ARMITAGE					28	33	14E
County:		State:	Type/Well	Depth:	Hours:	Date Started:		Date Completed:		
MONTGOMERY		KS		1615'		08-02-06		08-03-06		
Driller:		Driller:	Driller:	Casing Used:		Cement Used:		Rig No.		
MIKE WEIR		NICK WEIR		OPERATOR				17		
From	To	Formation	From	To	Formation	From	To	Formation		
0	12	SOIL	12	88	SHALE	88	93	LIME		
93	241	SHALE	241	350	SAND - WET	350	354	SHALE		
354	355	LIME	355	360	SHALE	360	364	SAND & SHALE		
364	369	SAND	369	400	SHALE	400	410	SAND		
410	525	SHALE	525	531	LIME	531	536	SHALE		
536	558	SAND - MORE WATER	558	685	SHALE	685	700	LIME		
700	704	SANDY SHALE	704	753	SHALE	753	786	LIME		
786	790	SANDY SHALE	790	893	SHALE	893	918	LIME - PINK		
918	1002	SHALE	1002	1029	LIME - OSWEGO	1029	1036	SHALE - SUMMIT		
1036	1060	LIME	1060	1067	SHALE - MULKY	1067	1075	LIME		
1075	1085	SHALE	105	1086	COAL - IRONPOST	1086	1111	SHALE		
1111	1112	COAL	1112	1118	SHALE	1118	1124	LIME		
1124	1137	SAND	1137	1151	SHALE	1151	1152	COAL - MINERAL		
1152	1223	SANDY SHALE	1223	1411	SHALE	1411	1412	COAL - ROWE		
1412	1448	SHALE	1448	1449	COAL - RIVERTON	1449	1453	SHALE		
1453	1463	SHALE & LIME	1463	1615	LIME & MISSISSIPPI CHAT	1615	TD			

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CONSOLIDATED OIL WELL SERVICES, INC.
P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 10402
LOCATION EUREKA
FOREMAN Kevin McCoy

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-4-06	2368	D.D. ARMITAGE A3-28	28	335	14E	M6
CUSTOMER <u>Dart Cherokee Basin</u>			HURRICANE Well Service			
MAILING ADDRESS <u>211 W. Myrtle</u>			TRUCK # <u>445</u>	DRIVER <u>Rick</u>	TRUCK # <u>KCC</u>	DRIVER <u>KCC</u>
CITY <u>Independence</u>	STATE <u>Ks</u>	ZIP CODE <u>67301</u>	<u>441</u>	<u>John</u>	<u>NOV 27 2006</u>	<u>KCC</u>
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JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 1615' CASING SIZE & WEIGHT 4 1/2 9.5* new
CASING DEPTH 1608' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 13.2* SLURRY VOL 49 BBL WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
DISPLACEMENT 26.0 BBL DISPLACEMENT PSI 700 PSI 1200 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2 casing. Break Circulation w/ 30 BBL Fresh water. Pump 4 sks Gel Flush w/ HULLS, 10 BBL Foamer, 10 BBL water Spacer. Mixed 160 sks THICK Set Cement w/ 8* Kol-Seal per/sk @ 13.2* per/gal yield 1.73. Wash out Pump & Lines. Shut down. Release Plug. Displace w/ 26.0 BBL Fresh water. Final Pumping Pressure 700 PSI. Bump Plug to 1200 PSI. Wait 5 minutes. Release Pressure. Float Held. Shut casing in @ 0 PSI. Good Cement Returns to Surface = 9 BBL slurry. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
5406	0	MILEAGE <u>2nd</u> well of 3	0	0
1126 A	160 sks	THICK Set Cement	14.65	2344.00
1110 A	1200 *	Kol-Seal 8* per/sk	.36 *	432.00
1118 A	200 *	Gel Flush	.14 *	28.00
1105	50 *	HULLS	.34 *	17.00
5407	8.8 TONS	TON Mileage BULK TRUCK	MIC	275.00
4404	1	4 1/2 Top Rubber Plug	40.00	40.00
1238	1 GAL	Soap	33.75	33.75
1205	2 GAL	B1-Cide	25.35	50.70
			Sub Total	4020.45
			SALES TAX 5.3%	151.63
			ESTIMATED TOTAL	4172.08

AUTHORIZATION Called By ALTON

TITLE Co. Rep.

DATE _____

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