

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

RECEIVED
SEP 20 2004
KCC WICHITA
ORIGINAL
Form ACO-1
September 1999
Form Must Be Typed

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. _____

<u>4-29-04</u>	<u>5-4-04</u>	<u>5-10-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-25787-00-00
 County: Wilson
W2 SE SE NW Sec. 26 Twp. 30 S. R. 15 East West
3075' FSL feet from S / N (circle one) Line of Section
3200' 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: Almond et al Well #: B2-26A
 Field Name: Cherokee Basin Coal Gas Area
 Producing Formation: Penn Coals
 Elevation: Ground: 975' Kelly Bushing: _____
 Total Depth: 1188' Plug Back Total Depth: 1185'
 Amount of Surface Pipe Set and Cemented at 22' 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 *Cell II KGR 2/6/08*
 (Data must be collected from the Reserve Pit)
 Chloride content NA ppm Fluid volume 60 bbls
 Dewatering method used empty w/ vac trk and air dry
 Location of fluid disposal if hauled offsite: _____
 Operator Name: Dart Cherokee Basin Operating
 Lease Name: Orr A1-28 SWD License No.: 33074
 Quarter NW Sec. 28 Twp. 30 S. R. 15 East West
 County: Wilson Docket No.: D-28282

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: 9.16.04
 Subscribed and sworn to before me this 16th day of September,
2004
 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: Almond et al Well #: B2-26A
 Sec. 26 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 ✓ No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes ✓ No Cores Taken Yes ✓ No Electric Log Run ✓ Yes No <i>(Submit Copy)</i> List All E. Logs Run: High Resolution Compensated Density Neutron & Dual Induction	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Log</td> <td style="width:33%;">Formation (Top), Depth and Datum</td> <td style="width:33%;">✓ Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td colspan="3" style="text-align: center;">See Attached</td> </tr> </table>	Log	Formation (Top), Depth and Datum	✓ Sample	Name	Top	Datum	See Attached		
Log	Formation (Top), Depth and Datum	✓ Sample								
Name	Top	Datum								
See Attached										

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"		22'	Class A	6	
Prod	6 3/4"	4 1/2"	10.5#	1185'	50/50 Poz	155	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	1135'-1136.5'	300 gal 10% HCl, 2345# sd, 240 BBL fl	
4	1080.5'-1081.5'	300 gal 10% HCl, 1835# sd, 245 BBL fl	
4	979'-980.5'	300 gal 10% HCl	
4	916'-918.5'	300 gal 10% HCl, 5070# sd, 375 BBL fl	
4	800.5'-801.5'	300 gal 10% HCl, 1810# sd, 245 BBL fl	

TUBING RECORD	Size 2 3/8	Set At 1170'	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. 5-27-04	Producing Method Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <input type="checkbox"/>
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Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 0	Water Bbls. 33	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
AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 23769

LOCATION Barthesville

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
5-5-04	2368	Almond Etal B2-26A		26	30S	15E	Wilson	
CHARGE TO <u>Dart</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE Production Casings		675.00
	0			
	0			
1105	4 sks	Cottonseed Hulls		51.80
1107	3 sks	Fla Seal		113.25
1110	16 sks	Gilsonite		310.40
1111	400 lb	Granulated Salt		100.00
1118	2 sks	Premium Gel		82.60
1123	8000 gal	City Water		90.00
4904	1	1/8 Rubber Plug		35.00
	0			
	0			
1205	2 gal	Supersweet		45.00
		BLENDING & HANDLING		
5401	min	TON-MILES		190.00
		STAND BY TIME		
		MILEAGE		
5501C	2 trucks x 4 hrs	WATER TRANSPORTS		640.00
		VACUUM TRUCKS		
		FRAC SAND		
1124	155 sks	CEMENT		1023.00
			Wilson Co. 6.3% SALES TAX	118.58

Ravin 2790

ESTIMATED TOTAL **3438.63**

CUSTOMER or AGENTS SIGNATURE Willie Bantz CIS FOREMAN Tracy L. Williams

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

190075

