

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

ORIGINAL

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>12-6-04</u>	<u>12-13-04</u>	<u>12-20-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-25933-00-00
County: Wilson
N2 SE SE Sec. 21 Twp. 30 S. R. 15 East West
950' FSL feet from S / N (circle one) Line of Section
660' FEL feet from E / W (circle one) Line of Section

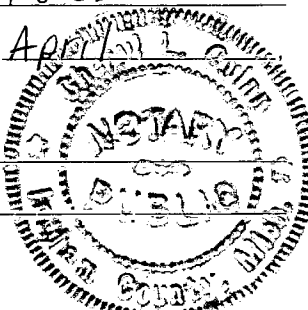
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Kebert Trust Well #: D4-21
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Penn Coals
Elevation: Ground: 1018' Kelly Bushing: _____
Total Depth: 1486' Plug Back Total Depth: 1482'
Amount of Surface 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 Alt II NCR 7-22-08
(Data must be collected from the Reserve Pit)
Chloride content 0 ppm Fluid volume 0 bbls
Dewatering method used no fl in pit
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: 4-8-05
Subscribed and sworn to before me this 8th day of April
2005
Notary Public: Cheryl L. Quinn
Date Commission Expires: 10-20-05



KCC Office Use ONLY
NO Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

✓

X

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: Kebert Trust Well #: D4-21
 Sec. 21 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 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#	22'	Class A	4	
Prod	6 3/4"	4 1/2"	9.5#	1482'	50/50 Poz	200	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	1094.5'-1096'	300 gal 10% HCl, 2325# sd, 245 BBL fl	
4	1056'-1057.5'	300 gal 10% HCl, 2315# sd, 240 BBL fl	
4	1035.5'-1036.5'	300 gal 10% HCl, 1700# sd, 230 BBL fl	
4	987'-989.5'	300 gal 10% HCl, 5030# sd, 360 BBL fl	
4	873.5'-874.5'	300 gal 10% HCl, 850# sd, 185 BBL fl	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8"	1434'	NA	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Date of First, Resumed Production, SWD or Enhr.	Producing Method			
1-10-05	Flowing <input type="checkbox"/>	Pumping <input checked="" type="checkbox"/>	Gas Lift <input type="checkbox"/>	Other (Explain) <input type="checkbox"/>

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NA	0	51	NA	NA

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

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

Production Interval _____

(If vented, Sumit ACO-18.)

McPherson Drilling LLC Drillers Log

Rig Number: 1	S. 21 T. 31 R. 15 E
API No. 15- 205-25933	County: WL
Elev. 1018'	Location:

Operator: Dart Cherokee Basin Operating Co. LLC
Address: 3541 CR 5400 Independence, KS 67301
Well No: D4-21 Lease Name: Kebert Trust
Footage Location: 950 ft. from the South Line 660 ft. from the East Line
Drilling Contractor: McPherson Drilling LLC
Spud date: 12/7/2004 Geologist:
Date Completed: 12/13/2004 Total Depth: 1486'

Gas Tests:
ORIGINAL
Comments:
start injecting water @ 72

Casing Record			Rig Time:
	Surface	Production	
Size Hole:	11"	6 3/4"	Driller: Andy Coats
Size Casing:	8 5/8"		
Weight:	20#		
Setting Depth:	22'	McPherson	
Type Cement:	Portland		
Sacks:	4	McPherson	

Well Log										
Formation	Top	Btm.		Formation	Top	Btm.		Formation	Top	Btm.
soil	0	2		shale	1005	1031				
lime	2	150 wet		coal	1031	1033				
sand shale	150	222		shale	1033	1052				
shale	222	415		coal	1052	1054				
lime	415	432 wet		shale	1054	1093				
shale	432	450		coal	1093	1095				
lime	450	507		shale	1095	1159				
shale	507	557		coal	1159	1163				
lime	557	589		sand shale	1163	1334				
shale	589	626		coal	1334	1336				
sand shale	626	685		shale	1336	1340				
lime	685	702		Mississippian	1340	1486				
shale	702	795								
sand shale	795	825								
shale	825	868								
coal	868	869								
shale	869	874								
pink lime	874	895								
shale	895	941								
Oswego	941	967								
Summit	967	975								
2nd Oswego	975	994								
Mulky	994	1003								
3rd Oswego	1003	1005								

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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 3071

LOCATION Eureka

FOREMAN Kevin McCoy

TREATMENT REPORT & FIELD TICKET
CEMENT

ORIGINAL

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-14-04	2908	Robert Trust # D 4-21	21	30S	15E	Wilson
CUSTOMER						
PART Cherokee BASIN			C & C Well Service			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
3541 Com Rd 5400			445	Troy		
CITY			439	Justin		
STATE			434	Steve		
ZIP CODE			452	Jim		
Independence						
KS						
67301						

JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 1486' CASING SIZE & WEIGHT 4 1/2 9.5#
 CASING DEPTH 1482' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.5# SLURRY VOL 49 BBL WATER gal/sk _____ CEMENT LEFT in CASING 0'
 DISPLACEMENT 24 BBL DISPLACEMENT PSI 700 MIX PSI 1200 Bump Plug RATE _____

REMARKS: SAFETY Meeting. Rig up to 4 1/2 casing. BREAK Circulation w/ 45 BBL Fresh water. Pump 2 sks Gel flush w/ Hulls, 10 BBL Foamer, 10 BBL Fresh water spacer. Mixed 1200 sks 50/50 Pozmix Cement w/ 5# Gilsomite per/sk 5% SALT 2% Gel 1/4" Flocele per/sk & Hulls @ 13.5# per/gal, yield 1.36. Wash out Pump & Lines. Shut down. Release Plug. Displace w/ 24.0' BBL Fresh water. Final Pumping Pressure 700 psi. Bump Plug to 1200 psi. wait 2 minutes. Release Pressure. Float Held. Shut casing in @ 0 psi. Good Cement Returns to Surface = 7 BBL Slurry. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	710.00	710.00
5406	36	MILEAGE	2.35	84.60
1124	200 sks	50/50 Pozmix Cement	6.90	1380.00
1110	20 sks	Gilsomite 5# per/sk	20.35	407.00
1111	300#	SALT 5%	.26#	130.00
1118	4 sks	Gel 2%	12.40	49.60
1107	2 sks	Flocele 1/4" per/sk	40.00	80.00
1118	2 sks	Gel flush	12.40	24.80
1105	2 sks	Cotton Seed Hulls	13.60	27.20
5407	8.40 TONS	Ton Mileage	M/c	225.00
4404	1	4 1/2 Top Rubber Plug	35.00	35.00
1238	1 gal	SOAP	31.50	31.50
1205	1 1/2 gals	Bi-side (mixed w/ water)	23.65	35.47
1123	6720 gals	City water	11.50 per 1000	77.28
5501	4 hrs	TRANSPORT	84.00	336.00
5502	4 hrs	80 BBL VAC TRUCK	78.00	312.00
			Sub total	3945.45
		Thank you	SALES TAX	207.13
		5.3%	ESTIMATED TOTAL	4052.58

AUTHORIZATION [Signature] TITLE [Signature] DATE 4/08/05