

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 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. _____
9-30-04 10-4-04 10-28-04
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 125-30649-00-00
County: Montgomery 34 ~~KCC~~ ~~100~~
C SE SW Sec. 30 Twp. 32 S. R. 15 East West
660' FSL feet from S / N (circle one) Line of Section
3300' 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: Owens Well #: D2-30
Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Penn Coals
Elevation: Ground: 944' Kelly Bushing: _____
Total Depth: 1688' Plug Back Total Depth: 1686'
Amount of Surface Pipe Set and Cemented at 150 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 AH II NCR 7-25-08
(Data must be collected from the Reserve Pit)
Chloride content NA ppm Fluid volume 1000 bbls
Dewatering method used empty w/ vac trk and air dry
Location of fluid disposal if hauled offsite:
Operator Name: Dart Cherokee Basin Operating Co LLC
Lease Name: Reitz B4-35 SWD License No.: 33074
Quarter NE Sec. 35 Twp. 32 S. R. 14 East West
County: Montgomery Docket No.: D-28391

RECEIVED
MAY 23 2005
KCC WICHITA

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: 5-19-05
Subscribed and sworn to before me this 19th day of May, 2005
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: Owens Well #: D2-30
 Sec. 30 Twp. 32 S. R. 15 ✓ 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 <input type="checkbox"/> Yes ✓ No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> 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
---	---

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#	150'	Class A	50	See Attached
Prod	6 3/4"	4 1/2"	9.5#	1686'	50/50 Poz	210	See Attached

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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	1477.5'-1479.5'	750 gal 15% HCl, 240 BBL fl	
		RECEIVED MAY 23 2005 KCC WICHITA	

TUBING RECORD		Size 2 3/8"	Set At 1666'	Packer At NA	Liner Run Yes ✓ No
Date of First, Resumed Production, SWD or Enhr. 12-10-04		Producing Method Flowing ✓ Pumping Gas Lift Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 0	Water Bbls. 14	Gas-Oil Ratio NA	Gravity NA

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

TICKET NUMBER 1146
 LOCATION Battlesville
 FOREMAN CICCO Johnson

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-4-04	2368	OWENS A2-30	30	34	15	MMT
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			289	Kirk		
CITY			174	Bruce		
STATE	ZIP CODE		255	5050R		
			448	Rick		

JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 1688' CASING SIZE & WEIGHT 4 1/2 @ .50
 CASING DEPTH 1688 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.7 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0
 DISPLACEMENT 273 DISPLACEMENT PSI _____ MIX PSI _____ RATE 43

REMARKS: Run 2 5x GFL with hulls 10 Bbls mud flush followed by 2 1/2 5x 50/50 Poz cement @ 156 PPA with hulls washed behind plug pumped plug to bottom set shoe switch circulated 9 Bbls slurry to pit

1146-00
 02510
 09510

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Longstring		710.00
5406	100	MILEAGE		70.50
5407	Min	Bulk delivery		225.00
1124	210 5x	50/50 cement	RECEIVED	1419.00
1105	27 5x	Hulls	MAY 23 2005	13.60
1107	52 5x	Flo seal	KCC WICHITA	80.00
1110	2K 5x	Gilsonite		427.35
1111	500	SALT		150.00
1118	6 5x	GEL		74.40
1123	6700 gal	City water		77.05
4404	1	4 1/2 Rubber Plug		35.00
5501C	3 hr.	Transport		252.00
5502L	3 hr.	80 VAC		234.00
			SALES TAX	121.18
			ESTIMATED TOTAL	3899.08

AUTHORIZATION [Signature] TITLE 192463 DATE _____