

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: Dart Cherokee Basin Operating Co LLC
 Well Name: Scott Trust A3-4
 Original Comp. Date: 8-21-03 Original Total Depth: 1303'
 ___ Deepening ___ Re-perf. ___ Conv. to Enhr./SWD
 Plug Back CIBP set @ 1200' Plug Back Total Depth
 ___ Commingled Docket No. _____
 ___ Dual Completion Docket No. _____
 ___ Other (SWD or Enhr.?) Docket No. _____

<u>1-12-05</u>	<u>8-15-03</u>	<u>1-13-05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-30384-00-01
 County: Montgomery
 ___ NW ___ NE Sec. 4 Twp. 31 S. R. 15 East West
4620' FSL feet from S / N (circle one) Line of Section
1980' 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: Scott Trust Well #: A3-4
 Field Name: Jefferson-Sycamore
 Producing Formation: Penn Coals
 Elevation: Ground: 858' Kelly Bushing: _____
 Total Depth: 1303' Plug Back Total Depth: 1300'
 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 WO-2 NCR 7-22-08
 (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: Beth Oswald
 Title: Admn Engr Asst Date: 4-13-05
 Subscribed and sworn to before me this 13th day of April
~~5005~~
 Notary Public: Karen L. Welton
 Date Commission Expires: _____

KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 ___ Wireline Log Received
 ___ Geologist Report Received
 ___ UIC Distribution

KAREN L. WELTON
 Notary Public - Michigan
 Ingham County
 My Commission Expires Mar 3, 2007
 Acting in the County of Ingham

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: Scott Trust Well #: A3-4
 Sec. 4 Twp. 31 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 <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:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">Log Name</td> <td style="width:40%;">Formation (Top), Depth and Datum</td> <td style="width:30%;">✓ Sample Datum</td> </tr> </table>	Log Name	Formation (Top), Depth and Datum	✓ Sample Datum
Log Name	Formation (Top), Depth and Datum	✓ Sample Datum		

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	4	
Prod	6 3/4"	4 1/2"	10.5	1300'	50/50 Poz	160	

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 (Amount and Kind of Material Used)	Depth
6 existing	1221'-1222', set CIBP @ 1200'		
6 existing		947.5'-950'	
6 existing		888-889'	
6 existing		849'-853'	
6 existing		722.5'-723.5'	

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 KCC WICHITA

TUBING RECORD		Size 2 3/8"	Set At 1102'	Packer At NA	Liner Run	Yes	✓ No
Date of First, Resumed Production, SWD or Enhr. 1-13-05			Producing Method				
			Flowing	✓ Pumping	Gas Lift	Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 24	Water Bbls. 11	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) _____