

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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: 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>1-10-06</u>	<u>1-11-06</u>	<u>3-7-06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-26247-00-00
County: Wilson
SW SW NE NE Sec. 14 Twp. 30 S. R. 15 East West
4065' FSL feet from (S) N (circle one) Line of Section
1150' 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: J&G Bauman Well #: A4-14
Field Name: Cherokee Basin Coal Gas Area
Producing Formation: Penn Coals
Elevation: Ground: 809' Kelly Bushing: _____
Total Depth: 1244' Plug Back Total Depth: 1238'
Amount of Surface Pipe Set and Cemented at 43 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1240
feet depth to 0 ^{w/} 130 sx cm.
ALT 2 - Dig H/7/08

Drilling Fluid Management Plan
(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: [Signature]
Title: Engr. Clerk Date: 6/14/06
Subscribed and sworn to before me this 14th day of June
20 06
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
RECEIVED
JUN 19 2006

KCC WICHITA

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: J&G Bauman Well #: A4-14
 Sec. 14 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 (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
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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#	43'	Class A	30	See Attached
Prod	6 3/4"	4 1/2"	9.5#	1240'	Thick Set	130	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 (Amount and Kind of Material Used)	Depth
Jet Cut	1083.5' - 1085.5'	672 gal 15% HCl, 1800# sd, 885 BBL fl	
4	893.5' - 896'	300 gal 15% HCL, 5070# sd, 365 BBL fl	
4	828' - 830'	300 gal 15% HCL, 3040# sd, 270 BBL fl	
4	717' - 720' / 701' - 703'	600 gal 15% HCL, 10285# sd, 25 bio-balls, 800 BBL fl	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8"	1228'	NA	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date of First, Resumed Production, SWD or Enhr.	Producing Method			
3-11-06	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
	NA	0	17	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) _____

RECEIVED
 JUN 19 2006
 KCC WICHITA

CONSOLIDATED OIL WELL SERVICES, INC.

P.O. BOX 884, CHANUTE, KS 66720

320-431-9210 OR 800-467-8676

TICKET NUMBER 08098

LOCATION Eureka

FOREMAN Troy Strickler

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY												
1-10-06	2368	J + G Bauman A4-14	14	30	15E	Wilson												
CUSTOMER <u>Dart Cherokee Basin</u>			<table border="1"> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> <tr> <td>463</td> <td>Alan</td> <td></td> <td></td> </tr> <tr> <td>439</td> <td>Justin</td> <td></td> <td></td> </tr> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	463	Alan			439	Justin		
TRUCK #	DRIVER	TRUCK #	DRIVER															
463	Alan																	
439	Justin																	
MAILING ADDRESS <u>3541 Co. Rd. 5400</u>																		
CITY <u>Independence</u>		STATE <u>Ks</u>	ZIP CODE <u>67301</u>															

JOB TYPE Surface HOLE SIZE 11' HOLE DEPTH _____ CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8" SLURRY VOL 7.2 Bbl WATER gal/sk 65" CEMENT LEFT in CASING 10'
 DISPLACEMENT 2 Bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 8 5/8 casing. Break circulation. Mixed 30 sks Regular Class "A" Cement w/ 2% Gel + 2% CaO @ 14.8 wfl. Displaced w/ 2 Bbl water. Shut casing in. Good Cement To Surface.
Job Complete.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401S	1	PUMP CHARGE		
5406	36	MILEAGE	620.00	620.00
			3.15	113.40
1104	30 sks	Class "A" Cement		
1102	56 #	Cacl ₂ 27%	10.25	307.50
1118A	1 sks	Gel 27%	.64	35.84
			7.00	7.00
5407		Ton-Mileage Bulk Truck	m/c	275.00
RECEIVED				
JUN 19 2006				
KCC WICHITA				
Thank You!				
			Sub Total	1358.74
			6.3% SALES TAX	22.07
			ESTIMATED TOTAL	1380.81

AUTHORIZATION 

TITLE 2000065

DATE _____

CONSOLIDATED OIL WELL SERVICES, INC.

P.O. BOX 884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER 08134

LOCATION EUREKA

FOREMAN KEVIN McCoy

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
1-12-06	2368	J & G BAUMAN A4-14	14	30S	15E	Wilson	
CUSTOMER Dart Cherokee Basin			Gus Jones Rig 2	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 3541 Co. Rd. 5400				445	RICK L.		
CITY Independence				479	CALIN		
STATE KS							
ZIP CODE 67301							

JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 1244' CASING SIZE & WEIGHT 4 1/2 9.5" New
 CASING DEPTH 1240' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.2" SLURRY VOL 40 BBL WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 20 BBL DISPLACEMENT PSI 500 ~~MAX~~ PSI 1000 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 130 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/ 20 BBL Fresh water. Final Pumping Pressure 500 psi. Bump Plug to 1000 psi. wait 5 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 or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
5406	36	MILEAGE	3.15	113.40
1126 A	130 SKS	Thick Set Cement	13.65	1774.50
1110 A	21 SKS	KOL-SEAL 8" per/sk	17.75	372.75
1118 A	4 SKS	Gel Flush	7.00	28.00
1105	1 SK	HULLS	15.25	15.25
5407	7.15 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
			RECEIVED	
			JUN 19 2006	
			KCC WICHITA	
			Sub Total	3503.35
			SALES TAX	140.54
			ESTIMATED TOTAL	3643.89

THANK YOU 6.3%
 AUTHORIZATION [Signature] TITLE _____ DATE _____
 202103