

CONFIDENTIAL

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

*Full
Dm
10/14/08*

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

10/10/08

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. _____

6-27-08 7-1-08 8-6-08

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 205-27565-00-00

County: Wilson

S2 NW NE Sec. 20 Twp. 30 S. R. 15 East West

4390' 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: B&B Potter Well #: A3-20

Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Penn Coals

Elevation: Ground: 958' Kelly Bushing: _____

Total Depth: 1475' Plug Back Total Depth: 1308'

Amount of Surface Pipe Set and Cemented at 40 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-11-NH 12/16-08
(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume 210 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: Porter et al D1-9 SWD License No.: 33074

Quarter SW Sec. 9 Twp. 30 S. R. 15 East West

County: Wilson Docket No.: D-28773

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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: Eng'g Clerk Date: 10-10-08

Subscribed and sworn to before me this 10 day of October

20 08

Notary Public: Brandy R. Allcock

Date Commission Expires: 3-5-2011

Acting in Lenham

BRANDY R. ALLCOCK
Notary Public - Michigan
Jackson County
My Commission Expires
March 05, 2011

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: B&B Potter Well #: A3-20
 Sec. 20 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 <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: High Resolution Compensated Density Neutron & Dual Induction	Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> 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#	40'	Class A	8	
Prod	6 3/4"	4 1/2"	10.5#	1468'	Thick Set	150	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				

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Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
6	1148' - 1152.5'		6440# sd, 200 BBL fl	
6	1025' - 1026'		100 gal 15% HCl, 1705# sd, 85 BBL fl	
6	974' - 977'		100 gal 15% HCl, 6010# sd, 170 BBL fl	
6	864.5' - 866.5'		100 gal 15% HCl, 3060# sd, 105 BBL fl	
6	639' - 640.5'		200 gal 15% HCl, 3015# sd, 125 BBL fl	

TUBING RECORD	Size 2 3/8"	Set At 1253'	Packer At NA	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 8-9-08	Producing Method
	Flowing <input type="checkbox"/> <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 11	Water Bbls. 45	Gas-Oil Ratio NA	Gravity NA
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Disposition of Gas Vented Sold Used on Lease Open Hole Other (Specify) _____

METHOD OF COMPLETION Other (Specify) _____

Production Interval Commingled _____

(If vented, Sumit ACO-18.)

Rig Number: 2		S. 20 T. 30 R. 15	
API No. 15-215-27565-0000		County: Wilson	
Elev. 958		Location:	

Gas Tests:

Operator: Dart Cherokee Basin Operating Co LLC	
Address: 211 w myrtle Independence KS 67301	
Well No: A3-20	Lease Name: B+B Potter
Footage Location: 4390	ft. from the (N) (S) Line
1980	ft. from the (E) (W) Line
Drilling Contractor: McPherson Drilling LLC	
Spud date: 6-27-08	Geologist:
Date Completed: 7-1-08	Total Depth: 1475

Casing Record		Rig Time:
Surface	Production	
Size Hole: 11	6 3/4	
Size Casing: 8 7/8		
Weight: 20#		
Setting Depth: 40	mcp	
Type Cement: port		
Sacks: 8	mcp	Nick Hilyard

Started injection @ 300

Well Log								
Formation	Top	Btm.	Formation	Top	Btm.	Formation	Top	Btm.
Ss. 1	0	3	Summit	955	963			
lime	3	17	line	963	972			
Shale	17	21	mulky	972	978			
lime	21	57	lime	978	982			
Shale	57	69	Shale	982	1025			
lime	69	133	Coal	1025	1027			
semishale	133	242	Shale	1027	1044			
Sand	242	279	Coal	1044	1045			
lime	279	374	Shale	1045	1084			
Shale	374	424	Coal	1084	1086			
lime	424	529	Shale	1086	1098			
Shale	529	557	Coal	1098	1099			
lime	557	585	Shale	1099	1117			
Shale	585	687	Coal	1117	1118			
lime	687	742	shale	1118	1135			
Shale	742	786	Coal	1135	1136			
lime	786	801	Shale	1136	1148			
Shale	801	863	Coal	1148	1149			
Coal	863	864	Shale	1149	1273			
Shale	864	871	Coal	1273	1275			
Pink	871	889	Shale	1275	1310			
blackshale	889	893	Coal	1310	1311			
Shale	893	932	Shale	1311	1323			
Quartz	932	955	miss	1323	1475			

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CONSOLIDATED
Oil Well Services, LLC

W. Jones
10/15/08

ENTERED

TICKET NUMBER 18690
LOCATION EUREKA
FOREMAN KEVIN MCCOY

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-1-08	2368	Potter B & B A3-20				Wilson
CUSTOMER DART Cherokee BASIN			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 211 W. Myrtle			445	Justin		
CITY Independence			502	CHRIS		
STATE KS		ZIP CODE 67301	Gus Jones Rig 1			

JOB TYPE Longstain HOLE SIZE 6 3/4 HOLE DEPTH 1475' CASING SIZE & WEIGHT 4 1/2 10.5* New
CASING DEPTH 1468' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 13.2* SLURRY VOL 46 BBL WATER gal/sk 8.0 CEMENT LEFT in CASING 155' ±
DISPLACEMENT 21.2 BBL DISPLACEMENT PSI 2300 MIX PSI _____ RATE _____

REMARKS: Safety meeting: Rig up to 4 1/2 casing w/ wash head. Break circulation w/ 30 BBL fresh water. wash down 3' casing. Pump 6 sks Gel flush w/ HULLS, 10 BBL FERRIC, 10 BBL water spacer. Mixed 150 sks Thick Set Cement w/ 8" Kol-Seal /sk @ 13.2*/gal. Yield 1.73. (While mixing ~ last 75 sks of cement we had poor fluid returns to surface) wash out pump & lines. Shut down. Release Plug. Start Displacement @ 400 PSI @ 3.5 BPM, w/ poor fluid returns to surface. Had 19 BBL displaced w/ no returns to surface. 21.2 BBL displaced @ 1/2 BPM @ 2300 PSI. Shut down. Release Pressure. float held. Shut casing in @ 0 PSI. Good cement returns to surface = 4 BBL slurry to pt.

Note: Rubber Plug @ ~ 1313' Below G.L. = 155' Cement inside 4 1/2. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	0	MILEAGE 2 nd well of 2	0	0
1126 A	150 sks	THICK Set Cement	17.00	2550.00
1110 A	1200 *	KOL-SEAL 8" /SK	.42	504.00
1118 A	300 *	Gel flush	.17 *	51.00
1105	50 *	HULLS	.39 *	19.50
5407	8.25 TONS	Tow Mileage BULK TRUCK	M/C	315.00
4404	1	4 1/2 Top Rubber Plug	45.00	45.00
1143	1 gal	Soap	38.50	38.50
1140	2 gal	Brocide	29.00	58.00
			Sub Total	4506.00
			SALES TAX	199.68
			ESTIMATED TOTAL	4705.68

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THANK YOU
223348

Ravin 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____