

1/05/11

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

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 JAN 05 2009
 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>9-16-08</u>	<u>9-23-08</u>	<u>9-29-08</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-205-27672-00-00
 County: Wilson
 _____ NE _____ NW _____ Sec. 19 Twp. 30 S. R. 15 East West
5140' FSL _____ feet from S / N (circle one) Line of Section
4427' 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&D Schultz Well #: A1-19 SWD
 Field Name: Cherokee Basin Coal Gas Area
 Producing Formation: Penn Coals
 Elevation: Ground: 948' Kelly Bushing: _____
 Total Depth: 1835' Plug Back Total Depth: 1835'
 Amount of Surface Pipe Set and Cemented at 47 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 SWD NJ 22009
 (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: 1-5-09
 Subscribed and sworn to before me this 5 day of January, 2009
 Notary Public: Brandy R. Allcock
 Date Commission Expires: 3-5-2011
 acting in engham

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 (RS 1/09)

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: J&D Schultz Well #: A1-19 SWD
 Sec. 19 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 <div style="text-align: center;"> RECEIVED KANSAS CORPORATION COMMISSION JAN 08 2009 CONSERVATION DIVISION WICHITA, KS </div>
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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#	47'	Class A	25	See Attached
Prod	6 3/4"	4 1/2"	10.5#	1630'	Thick Set	225	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
Open Hole	1650' - 1835'	60 BBL 28% HCl, 320 BBL fl	
		CONFIDENTIAL JAN 05 2009	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 7/8"	1606'	1602'	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NA	NA	NA	NA	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
Oil Well Services, LLC

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

U ENTERED

TICKET NUMBER 19384

LOCATION Europe

FOREMAN Troy Stricker

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-16-08	2368	Schultz A1-19 SWD				Wilson
CUSTOMER Dart Cherokee Basin						
MAILING ADDRESS 211 W. Myrtle			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Independence			520	Cliff		
STATE Ks			441	David		
ZIP CODE 67801						

JOB TYPE S/P HOLE SIZE 11" HOLE DEPTH 48' CASING SIZE & WEIGHT 8 1/2"
 CASING DEPTH 47' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15# SLURRY VOL 6861 WATER gal/sk 650 CEMENT LEFT In CASING 10'
 DISPLACEMENT 2861 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 8 1/2" casing. Break circulation w/ water.
Mixed 25sks Class A Cement w/ 2% Gel, + 2% Cact @ 15#/gal.
Displace w/ 2861 water. Shut casing in w/ Good Cement to surface.

Job Complete.

RECEIVED
KANSAS CORPORATION COMMISSION

JAN 08 2009

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICE or PRODUCT	UNIT PRICE	TOTAL
5401S	1	PUMP CHARGE	725.00	725.00
5406	40	MILEAGE	3.65	146.00
1101S	25sks	Class A Cement	13.50	337.50
1102	70#	Cact 3%	.25#	52.50
1118A	50#	Gel 2%	.17#	8.50
1107	6#	Flocc 1/2"	2.10	12.60
5407	1.17	Ton-mileage	mk	315.00
			Sub Total	1597.10
			SALES TAX	25.90
			ESTIMATED TOTAL	1623.00

Thank You!

Flav'n 3737

AUTHORIZATION Called by Eric

TITLE Co-Rep

DATE _____

