

CONFIDENTIAL

ORIGINAL

1/27/11

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

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: Erich Umlauf
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. _____
10-8-08 10-13-08 12-19-08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 125-31806-00-00
County: Montgomery
SE NW Sec. 34 Twp. 32 S. R. 14 East West
3178' FSL _____ feet from S / N (circle one) Line of Section
3092' 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 Clubine Well #: B2-34 SWD
Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Penn Coals
Elevation: Ground: 863' Kelly Bushing: _____
Total Depth: 1862' Plug Back Total Depth: 1849'
Amount of Surface Pipe Set and Cemented at 41 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 SWDN 347409
(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: Engr Support Supvr Date: 1-27-09
Subscribed and sworn to before me this 27 day of January
20 09
Notary Public: Brandy R. Allcock

Date Commission Expires: 3-5-2011
Acting in engram w.

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 (RK 703)

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: J Clubine Well #: B2-34 SWD
 Sec. 34 Twp. 32 S. R. 14 ✓ 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 <input checked="" type="checkbox"/> Yes ✓ No Electric Log Run <input checked="" type="checkbox"/> 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 <div style="text-align: center;"> KANSAS CORPORATION COMMISSION JAN 29 2009 RECEIVED </div> <div style="text-align: right;"> KCC JAN 27 2009 CONFIDENTIAL </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#	41'	Class A	30	See Attached
Prod	7 7/8"	5 1/2"	15.5#	1655'	60/40 Poz Mix	300	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	1687' - 1682'	60 BBL 28% HCl, 280 BBL fl	

TUBING RECORD		Size 2 7/8"	Set At 1617'	Packer At 1613'	Liner Run	Yes	✓ No
Date of First, Resumed Production, SWD or Enhr.		Producing Method		Flowing	✓ Pumping	Gas Lift	Other (Explain)
NA							
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		
	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

ENTERED

TICKET NUMBER 20685
LOCATION EURKA
FOREMAN Rick Lott

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																
12-3-08	2368	Clubine # 02-34 SWD				06																
CUSTOMER Dart Cherokee Basin			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>463</td> <td>Shannon</td> <td></td> <td></td> </tr> <tr> <td>543</td> <td>John</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	463	Shannon			543	John						
TRUCK #	DRIVER	TRUCK #					DRIVER															
463	Shannon																					
543	John																					
MAILING ADDRESS 211 W. Myrtle																						
CITY Independence	STATE KS	ZIP CODE 67301																				
GWS Saws																						

JOB TYPE logstring HOLE SIZE 2 3/4" HOLE DEPTH 1852' CASING SIZE & WEIGHT 5 1/2" 15"
 CASING DEPTH 1655' DRILL PIPE _____ TUBING 2 3/4" OTHER _____
 SLURRY WEIGHT 14" SLURRY VOL 79 Bbl WATER gal/sk 2.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 5 1/2 Bbl DISPLACEMENT PSI 900 MIX PSI _____ RATE _____

REMARKS: Safety meeting - Ran 1852' 5 1/2" casing / open hole process w/ part collar. Ran 2 3/4" tubing w/ opening + closing tool. Rig up to 2 3/4" tubing w/ washhead. Lost 5 1/2" casing w/ fresh water. Shut in annulus of tubing. open part collar. Break circulation w/ 10 Bbl fresh water. Pump to 500 gal-flush, 10 Bbl water spacer. Mixed 500 gal 60/40 Perm mix cement w/ 5" Kol-soal ^{perm} 470 gal + 270 coils @ 14" ^{perm} / gal. yield 1.48. Displace w/ 5 1/2 Bbl fresh water. Close part collar. pressure casing to 1200 PSI. Tool closed, open annulus of tubing. Backwash w/ 20 Bbl the short way. Backwash w/ 55 Bbl the long way casing clean, pull tubing. Good cement returns to surface = 8 Bbl slurry. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	1	MILEAGE 2 nd well of 2	n/c	n/c
1131	300 sbs	60/40 Perm mix cement	11.85	3485.00
1110A	1500 #	5" Kol-soal ^{perm}	.45	675.00
1118A	1030 #	470 gal	.17	175.10
1102	515 #	270 coils	.35	180.25
5407	12.9	con-mileage bill tax	n/c	345.00
1118A	300 #	gel-flush	.17	51.00
KANSAS CORPORATION COMMISSION JAN 27 2009 RECEIVED				
			5.32	5887.35
			SALES TAX	246.31
			ESTIMATED TOTAL	6133.66

Revin 3737

02/18/09

AUTHORIZATION Witnessed by Eric

TITLE Co. Rep.

DATE _____