

2/13/11

ORIGINAL
AMENDED

Form ACO-1
September 1999
Form Must Be Typed

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY IDENTIFICATION OF WELL & LEASE

CONFIDENTIAL

8/17/09

FEB 18 2009

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 DRILLING
License: 5675

KCC

RECEIVED

AUG 17 2009

KCC WICHITA

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. _____

11-18-08 11-19-08 3/19/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 205-27739-00-00

County: Wilson

S2 SW SW Sec. 28 Twp. 29 S. R. 14 East West

560' FSL _____ feet from S / N (circle one) Line of Section

4620' 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: D&L Beard Well #: D1-28

Field Name: Cherokee Basin Coal Gas Area

Producing Formation: Penn Coals

Elevation: Ground: 880' Kelly Bushing: _____

Total Depth: 1334' Plug Back Total Depth: 1327'

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 _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AH I NO 9-2809
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled on site _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

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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: Beth Oswald

Title: Engr Support Supvr Date: 8-13-09

Subscribed and sworn to before me this 13th day of August

20 09

Notary Public Pat Holmes

Date Commission Expires: _____

PAT HOLMES
Notary Public, State of Michigan
County of Jackson
My Commission Expires Dec. 29, 2014
Acting in the County of Logan

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

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FEB 13 2009

Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: D&L Beard Well #: D1-28
 Sec. 28 Twp. 29 S. R. 14 ✓ East West County: Wilson **KCC**

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: High Resolution Compensated Density Neutron & Dual Induction	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">Log</td> <td style="width:40%;">Formation (Top), Depth and Datum</td> <td style="width:30%;">✓ Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> </table> <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED AUG 17 2009 KCC WICHITA </div>	Log	Formation (Top), Depth and Datum	✓ Sample	Name	Top	Datum
Log	Formation (Top), Depth and Datum	✓ Sample					
Name	Top	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"	24#	43'	Class A	40	
Prod	6 3/4"	4 1/2"	10.5#	1327'	Thick Set	140	

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				CONFIDENTIAL

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	1143' - 1146'	5645# sd & 160 BBL fl	
6/6	968.5' - 971' / 953.5' - 955'	100 gal 15% HCl, 10000# sd and 320 BBL fl	

TUBING RECORD	Size 2 3/8"	Set At 1256'	Packer At NA	Liner Run Yes ✓ No
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Date of First, Resumed Production, SWD or Enhr. 3/21/09	Producing Method Flowing ✓ Pumping Gas Lift Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 0	Water Bbls. 24	Gas-Oil Ratio NA	Gravity NA
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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) _____