

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL
AMENDED

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33297
Name: Rockin Bar Nothin Ranch Inc.
Address: 2339 Co. RD. 2800
City/State/Zip: Independence, KS. 67301
Purchaser: CMI
Operator Contact Person: Brandon Owens
Phone: (620) 289-4782
Contractor: Name: Finney Drilling Company
License: 5989
Wellsite Geologist: Brandon Owens
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW 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. _____
2-14-2006 2-16-06 2-16-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 125-30943-0000
County: Montgomery
NE SE/4 SW/2 _____ Sec. 14 Twp. 34 S. R. 14 East West
1140 feet from S N (circle one) Line of Section
3105 feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Smothermon Well #: 23
Field Name: Wayside/Havana
Producing Formation: Wayside
Elevation: Ground: 765 ? Kelly Bushing: _____
Total Depth: 670 Plug Back Total Depth: n/a
Amount of Surface Pipe Set and Cemented at 22.50 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 665
feet depth to surface w/ 87 _____ sx cmt.
ALT II WITH 6-23-06
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume 250 bbls
Dewatering method used evaporation
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: Brandon W. Owens
Title: President Date: 8-17-06
Subscribed and sworn to before me this 17th day of August,
2006.
Notary Public: Leslie D. Littlepage
Date Commission Expires: 2-15-09

NOTARY PUBLIC - State of Kansas
LESLIE D. LITTLEPAGE
My Appt. Expires 2-15-09

KCC Office Use ONLY
____ Letter of Confidentiality Received
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution
RECEIVED
AUG 21 2006

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Operator Name: Rockin Bar Nothin Ranch Inc. Lease Name: Smothermon Well #: 23
 Sec. 14 Twp. 34 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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

List All E. Logs Run:

Radioactivity Log
 Driller's Log

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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
Surface	12 1/4	7	19	22.50	Portland	10	Service Company
Production	5 5/8	2 7/8	6.5	665.00	Special	87	Service Company

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
17	2" DML-RTG 17 Shots at 624' - 632'	acid 300 gal 15% HLC	
		KCL 252 bbls 20# 2%	
		12/20 129 sks	

TUBING RECORD		Size	Set At	Packer At	Liner Run
SLIM HOLE					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 3/2/06		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

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DRILLERS LOG

API NO. 15-125-30943-0000

S. 14 T. 34 R. 14E

OPERATOR: Rockin Bar Nothin Ranch, Inc.

LOCATION: NE SE1/4 SW1/2

ADDRESS: 2339 Co. Road 2800 Independence, KS 67301

COUNTY: MONTGOMERY

WELL #: 23

LEASE NAME: SMOTHERMAN

FOOTAGE LOCATION: 1140 FEET FROM SOUTH LINE & 3105 FEET FROM EAST LINE

CONTRACTOR: FINNEY DRILLING COMPANY

GEOLOGIST: BRANDON OWENS

SPUD DATE: 2-14-06

TOTAL DEPTH: 670

DATE COMPLETED: 2-16-06

OIL PURCHASER: CMI

CASING RECORD

PURPOSE OF STRING	SIZE OF HOLE	SIZE OF CASING	WEIGHT LBS/FT	SETTING DEPTH	TYPE CEMENT	SACKS	TYPE AND % ADDITIVES
SURFACE:	12 1/4	7	19	22.50	PORTLAND	10	SERVICE COMPANY
PRODUCTION:	5 5/8	2 7/8	6.5	665.00	PORTLAND	87	SERVICE COMPANY

WELL LOG

CORES: 625 TO 638

RAN:

<u>FORMATION</u>	<u>TOP</u>	<u>BOTTOM</u>
TOP SOIL	0	2
LIME	2	10
CLAY	10	14
SHALE	14	128
LIME	128	133
SHALE	133	150
SAND	150	226
LIME	226	228
SHALE	228	269
SAND	269	279
LIME	279	281
SAND	281	361
LIME	361	363
SHALE	363	421
LIME	421	429
SHALE	429	597
LIME	597	599
SHALE	599	612
LIME	612	624
SAND	624	635
SAND & SHALE	635	670 T.D.

<u>FORMATION</u>	<u>TOP</u>	<u>BOTTOM</u>
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REMIT TO
 Consolidated Oil Well Services, Inc.
 Dept. 1228
 Denver, CO 80256

MAIN OFFICE
 P.O. Box 884
 Chanute, KS 66720
 620/431-9210 • 1-800/467-8676
 FAX 620/431-0012

INVOICE

Invoice # 203176

Invoice Date: 02/28/2006 Terms: Page 1

ROCKIN BAR NOTHIN RANCH INC 2339 COUNTY ROAD 2800 INDEPENDENCE KS 67301 (620)289-4782	RBN #23 1127 2/17/06 14-34-14
--	--

Part Number	Description	Qty	Unit Price	Total
1102	CALCIUM CHLORIDE (50#)	2.40	32.0000	76.80
1104	CLASS "A" CEMENT	70.00	10.2500	717.50
1107	FLO-SEAL (25#)	1.00	44.9000	44.90
1110	GILSONITE (50#)	7.00	22.9500	160.65
1118B	PREMIUM GEL / BENTONITE	7.00	7.0000	49.00
1123	CITY WATER	3500.00	.0128	44.80
4402	2 1/2" RUBBER PLUG	1.00	18.0000	18.00

Description	Hours	Unit Price	Total
174 MIN. BULK DELIVERY	1.00	275.00	275.00
T-61 WATER TRANSPORT	3.00	98.00	294.00
467 CEMENT PUMP	1.00	800.00	800.00
467 EQUIPMENT MILEAGE (ONE WAY)	35.00	3.15	110.25
467 CASING FOOTAGE	665.00	.17	113.05

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Parts:	1111.65	Freight:	.00	Tax:	58.91	AR	2762.86
Labor:	.00	Misc:	.00	Total:	2762.86		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK EUREKA, KS OTTAWA, KS GILLETTE, WY THAYER, KS

276251
 CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 1127
 LOCATION Bartlesville
 FOREMAN Tracy L. Williams

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-17-06		RBU #23	14	34S	14E	MG
CUSTOMER <u>Rockin B Dathin</u>						
MAILING ADDRESS						
CITY		STATE	ZIP CODE			

TRUCK #	DRIVER	TRUCK #	DRIVER
462	Kink		
174	Dusty		
412 T67	Bobby		

OB TYPE LS HOLE SIZE 5 7/8 HOLE DEPTH 660 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 660 DRILL PIPE _____ TUBING _____ OTHER _____
 CARRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Ran 20 sks of gel + broke circulation, ran 10 sks of thick set cement + shut down to wash up behind plug. Pumped plug to bottom + released pressure. Shut in.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
401	1	PUMP CHARGE		
406	35	Production Casing		800.00
402	665	MILEAGE		110.25
407	min	Bulk Delivery		113.05
501	3 hrs	Transport		225.00
402	10 sks	Calcium Chloride	x	294.00
104	10 sks	Cement	x	917.50
107	1 sk	Flo Seal	x	44.90
110	2 sks	Gilsonite	x	160.65
118	2 sks	Premium Gel	x	49.00
1123	3500 gal	City Water	x	44.80
1402	1	2 1/2" Rubber Plug	x	18.00
Paid in Full				total: \$2710.25
CK #				
Less Discount				-165.75
SALES TAX				58.92
ESTIMATED TOTAL				2596.82

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CONSOLIDATED
OIL WELL
SERVICES, INC.
 AN INFINITY COMPANY

REMIT TO
 Consolidated Oil Well Services, Inc.
 Dept. 1228
 Denver, CO 80256

MAIN OFFICE
 P.O. Box 884
 Chanute, KS 66720
 620/431-9210 • 1-800/467-8676
 FAX 620/431-0012

INVOICE

Invoice # 203479

Invoice Date: 03/14/2006 Terms:

Page 1

ROCKIN BAR NOTHIN RANCH INC
 2339 COUNTY ROAD 2800
 INDEPENDENCE KS 67301
 (620)289-4782

RBN #23
 27964
 3/1/06
 14-34-14

Part Number	Description	Qty	Unit Price	Total
3107	15% HCL	300.00	1.3000	390.00
4326	7/8" RUBBER BALL SEALERS	12.00	2.2600	27.12
1208	BREAKER LEB4-ESA 14-GB10	.25	164.2500	41.06
1215	KCL SUB (ESA-55) MB6875	25.00	24.7500	618.75
1231	FRAC GEL	250.00	4.3000	1075.00
1219	NON-IONIC NON EMUL	.50	29.1500	14.58
1123	CITY WATER	12600.00	.0128	161.28
2102	12/20 BRADY	12900.00	.1600	2064.00

Description	Hours	Unit Price	Total
176 BULK SAND DELVIERY	1.00	275.00	275.00
T-35 WATER TRANSPORT (FRAC)	3.00	98.00	294.00
T-79 MINIMUM PUMP CHARGE 2000 HP UNIT	1.00	1500.00	1500.00
423 FRAC VAN	1.00	550.00	550.00
424 ACID DELIVERY	2.00	152.00	304.00
T-87 WATER TRANSPORT (FRAC)	3.00	98.00	294.00
VALVE FRAC VALVES (2" OR 3")	1.00	68.00	68.00
BALLI BALL INJECTOR	1.00	90.00	90.00
474 BLENDER TRUCK	1.00	800.00	800.00
T-97 WATER TRANSPORT (FRAC)	3.00	98.00	294.00

P & OK # 3370

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Parts:	4391.79	Freight:	.00	Tax:	9.99	AR	8870.78
Labor:	.00	Misc:	.00	Total:	8870.78		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE OK

ELIENKA KS

OTTAWA KS

GUILFTE WY

THAYER KS



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

1530 S. SANTA FE, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 27964

LOCATION Barthesville

FIELD TICKET

DATE 3-1-06	CUSTOMER ACCT #	WELL NAME RBN #23	QTR/QTR	SECTION 14	TWP 34S	RGE 14E	COUNTY MG	FORMATION Waxsledge
CHARGE TO Rockin Bar Notthin Inc.				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5102	3 rd well	PUMP CHARGE Frac Pump		1500. ⁰⁰
5106		Blender		800. ⁰⁰
5111		Frac Van		550. ⁰⁰
5610	2 hrs	Acid Delivery		304. ⁰⁰
3167	300 Gal	15% HCL Acid		390. ⁰⁰
5115	1	Ball Injector		90. ⁰⁰
4326	12 ea	7/8" Ball Sealers		27. ¹²
5604	1	3" Frac Valve		68. ⁰⁰
1208	114 Gal	Breaker		41. ⁰⁰
1215	25 Gal	KCl		618. ⁷⁵
1231	250 lbs	Frac Gal		1075. ⁰⁰
1219	1/2 Gal	Non Emulsifier		14. ⁵⁸
1123	12,600 Gal	City Water		161. ⁸⁰
Paid LK # 3370				
5109	mi/h	BLENDING & HANDLING TON-MILES 1 Truck		275. ⁰⁰
5501 F	9 hrs	STAND BY TIME		
2102	12900 lbs	MILEAGE		
	129 SKS	WATER TRANSPORTS 3x 2 3hrs	882	755. ⁰⁰
		VACUUM TRUCKS		
		FRAC SAND 1790		2064. ⁰⁰
		CEMENT		
			MG 5.3% SALES TAX	9. ⁹⁹
			8870.18	8723. ⁷⁸
				872. ³⁸
			ESTIMATED TOTAL	7851. ⁴⁰

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203479

CUSTOMER or AGENTS SIGNATURE _____ CIS FOREMAN Gerald C. Williams

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

CONSOLIDATED OIL WELL SERVICES, INC.
211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 35515
FIELD TICKET REF # 27964
LOCATION Bartlesville
FOREMAN Gerold

3rd well

TREATMENT REPORT
FRAC & ACID

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-1-06		ABN #23	14	345	14E	M6
CUSTOMER			TRUCK #			
Rockin Dor Mathia Inc			DRIVER			
MAILING ADDRESS			TRUCK #			
CITY			DRIVER			
STATE			TRUCK #			
ZIP CODE			DRIVER			
			422-T79 Shane			
			479 Ryan			
			424 John			
			176 Dusty			
			408-T87 Donnic			
			403-T97 Tom			

WELL DATA	
CASING SIZE	TOTAL DEPTH
2 7/8	
CASING WEIGHT	PLUG DEPTH
TUBING SIZE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
Worside 624-32	17 holes

TYPE OF TREATMENT
Acid & Balls & Sand Frac

CHEMICALS	

STAGE	EBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
Orate 120'	100 Gal	15% HCL Acid	on balls			BREAKDOWN 1201
200 Gal	15% HCL Acid		12 Balls	50'	510-620	START PRESSURE 1290
Flowed Balls off						END PRESSURE 1100
pad	60	4-20			50' 1290	BALL OFF PRESS
1 3/8"	25	20	1/4	300	1290, 1455, 1430	ROCK SALT PRESS
1 3/8"	15	20	1/2	400	1430	ISIP 500
1 3/8"	15	20	1	700	1430-1350	5 MIN 433
1 3/8"	25	20	1-2	2000	1350-1275	10 MIN
1 3/8"	90	20	2-3	9500	1275-1100	15 MIN
Flushed	19	20			1100	MIN RATE 1
						MAX RATE 20
						DISPLACEMENT 3

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REMARKS: 300 Gal 15% HCL Acid 12 Balls 21 bb/s
252 bb/s 20% 2% KCL
129 5's 1260

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AUTHORIZATION _____ TITLE _____ DATE _____

CORNISH WIRELINE SERVICES, INC.

P.O. DRAWER H • CHANUTE, KANSAS 66720

620-431-9308

INVOICE

*pd
ck #3391
3-9-06*

SOLD TO:

ROCKIN BAR NOTHIN RANCH
2339 COUNTY ROAD 2800
INDEPENDENCE, KANSAS 67301

Date of Invoice 2-17-06

Invoice # 10853

PLEASE RETURN ONE COPY OF
INVOICE WITH PAYMENT.

DATE OF SERVICE	TYPE OF SERVICE	AMOUNT
2-20-06	SMOTHERMON NO. 23 MONTGOMERY COUNTY, KANSAS GAMMA RAY/NEUTRON PERFORATE WITH 2" DML-RTG 17 SHOTS 624'-632' 17 SHOTS \$22.00 EACH	\$ 300.00 580.00 <hr/> 374.00
	AMOUNT THIS INVOICE <u>-0-</u>	\$ 1254.00
THANK YOU. WE APPRECIATE YOUR BUSINESS!!		
TERMS: All invoices are due in full 30 days after invoice date. A FINANCE CHARGE of 1 ³ / ₄ % (21% per annum) will be assessed after 30 days.		

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