

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 33268
 Name: RL Investment, LLC
 Address: 217 Saint Peter St
 City/State/Zip: Morland, KS 67650
 Purchaser: _____ **RECEIVED**
 Operator Contact Person: Leon Pfeifer
 Phone: (785) 627-5711 **JAN 20 2005**
 Contractor: Name: Anderson Drilling **KCC WICHITA**
 License: 33237
 Wellsite Geologist: Pat Deenihan
 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. _____

<u>10-14-04</u>	<u>10-22-04</u>	<u>10-22-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23007-00-00
 County: Graham
SW NW SE NW Sec. 5 Twp. 9 S. R. 25 East West
1825 feet from S / N (circle one) Line of Section
1360 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Johnson Well #: 3
 Field Name: Knoll N W
 Producing Formation: _____
 Elevation: Ground: 2546 Kelly Bushing: 2551
 Total Depth: 4058 Plug Back Total Depth: Surface
 Amount of Surface Pipe Set and Cemented at 223' w/ 150 sacks 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 *ACT I with*
 (Data must be collected from the Reserve Pit) *8-16-07*
 Chloride content _____ ppm Fluid volume 2800 bbls
 Dewatering method used Evaporation & backfill
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

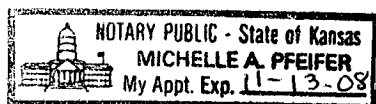
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: X Leon Pfeifer
 Title: Member Date: 01-07-05
 Subscribed and sworn to before me this 7th day of January,
2005.
 Notary Public: Michelle A. Pfeifer
 Date Commission Expires: 11-13-08

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



Operator Name: RL Investment, LLC Lease Name: Johnson Well #: 3
 Sec. 5 Twp. 9 S. R. 25 East West County: Graham

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 checked="" type="checkbox"/> Yes <input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Any</td> <td>2254</td> <td>+297</td> </tr> <tr> <td>Heebner</td> <td>3770</td> <td>-1239</td> </tr> <tr> <td>Toronto</td> <td>3810</td> <td>-1259</td> </tr> <tr> <td>Lansing</td> <td>3825</td> <td>-1274</td> </tr> <tr> <td>BKC</td> <td colspan="2">Not Reached</td> </tr> <tr> <td>T.D.</td> <td>4058</td> <td>-1507</td> </tr> </table>	Name	Top	Datum	Any	2254	+297	Heebner	3770	-1239	Toronto	3810	-1259	Lansing	3825	-1274	BKC	Not Reached		T.D.	4058	-1507
Name	Top	Datum																				
Any	2254	+297																				
Heebner	3770	-1239																				
Toronto	3810	-1259																				
Lansing	3825	-1274																				
BKC	Not Reached																					
T.D.	4058	-1507																				

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"	8 5/8"		228	COM	150	3% CC 2% Gel

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 <i>(Amount and Kind of Material Used)</i>	Depth
		<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;"> RECEIVED JAN 20 2005 KCC WICHITA </div>	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Date of First, Resumerd Production, SWD or Enhr.			Producing Method					
			<input type="checkbox"/> Flowing <input 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

ALLIED CEMENTING CO., INC. 13824

Federal Tax I.D.

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
OAKLEY, KS

DATE <u>10-14-04</u>	SEC. <u>5</u>	TWP. <u>9</u>	RANGE <u>25</u>	CALLED OUT <u>4:30pm</u>	ON LOCATION <u>7:30pm</u>	JOB START <u>8:30am</u>	JOB FINISH <u>9:00am</u>
LEASE <u>Johnson</u>		WELL # <u>#3</u>		LOCATION <u>Hwy 23 + Redline Rd</u>		COUNTY <u>Graham</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)			<u>16 E. 4 N - E1W</u>				

CONTRACTOR A & A Drlg #1

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 235'

CASING SIZE 8 5/8 20# DEPTH 233'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 14.2

EQUIPMENT

PUMP TRUCK CEMENTER Fuzzy

191 HELPER Wayne

BULK TRUCK

377 DRIVER Mike

BULK TRUCK

_____ DRIVER _____

OWNER Same

CEMENT

AMOUNT ORDERED 150 com

3070 cc 2070 gel

COMMON	<u>150</u>	@ <u>9.10</u>	<u>1365.00</u>
POZMIX		@	
GEL	<u>3</u>	@ <u>11.00</u>	<u>33.00</u>
CHLORIDE	<u>6</u>	@ <u>33.00</u>	<u>198.00</u>
		@	
		@	
		@	
		@	
		@	
		@	
		@ <u>35</u>	<u>65</u>
HANDLING	<u>159</u>	@ <u>1</u>	<u>214.65</u>
MILEAGE	<u>159</u>	<u>4.05 x 50</u>	<u>397.50</u>

TOTAL 2208.15

0300-70032-500-51

REMARKS:

Cement 8 5/8 csg to a depth of 233'
with 150 sks com 3070 cc
2070 gel

Displace plus to within 15'
of bottom

Cement did circulate
Plus down @

SERVICE

DEPTH OF JOB 235'

PUMP TRUCK CHARGE _____ 570.00

EXTRA FOOTAGE @ _____

MILEAGE 50 @ 4.00 200.00

PLUG @ _____

TOTAL 770.00

Thanks
Fuzzy

CHARGE TO: RL Investment

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

1-8 5/8 plug @ _____ 55.00

@ _____

@ _____

@ _____

@ _____

TOTAL 55.00

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE ~~2208.15~~

DISCOUNT ~~397.50~~ IF PAID IN 30 DAYS

SIGNATURE Dave L

PRINTED NAME _____

RECEIVED
KANSAS CORPORATION COMMISSION

AUG 10 2007

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., INC.

19171

Federal Tax I.D.

TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Oakley

DATE <u>10-22-07</u>	SEC. <u>5</u>	TWP. <u>9</u>	RANGE <u>25</u>	CALLED OUT	ON LOCATION <u>3:45 PM</u>	JOB START <u>4:00 PM</u>	JOB FINISH <u>7:30 PM</u>
LEASE <u>Johnson</u>		WELL # <u>3</u>		LOCATION <u> Hwy 23 + Redline 16E 4N E/S</u>		COUNTY <u>Graham</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR <u>A+A Drilling</u>	OWNER
TYPE OF JOB <u>PTA</u>	
HOLE SIZE <u>7 7/8</u>	T.D. <u>40.58</u>
CASING SIZE	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH <u>2275</u>
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	

CEMENT	AMOUNT ORDERED	
	<u>190 SKS 60/40 POZ 670 Grel 40# PDS</u>	
COMMON	<u>114 SKS @ 9.10</u>	<u>1037.40</u>
POZ MIX	<u>76 SKS @ 4.10</u>	<u>311.60</u>
GEL	<u>10 SKS @ 11.00</u>	<u>110.00</u>
CHLORIDE	@	
ASC	@	
	@	
<u>P/O Seg 1 48 #</u>	@ <u>1.40</u>	<u>67.20</u>
	@	
	@	
	@	
	@	
	@	
HANDLING	<u>20 / SKS @ 1.35</u>	<u>27.00</u>
MILEAGE	<u>5.9 / SK / mile</u>	<u>502.50</u>
TOTAL		<u>2299.60</u>

EQUIPMENT

PUMP TRUCK CEMENTER <u>#373-281 Dean</u>	HELPER <u>Andrew</u>
BULK TRUCK <u>#377</u>	DRIVER <u>Tarrad</u>
BULK TRUCK <u>#</u>	DRIVER

REMARKS:

1st Plug 2275' w/25 SKS
2nd Plug 1425' w/100 SKS
3rd Plug 280' w/40 SKS
4th Plug 40' w/10 SKS
15 SKS in Rat Hole

Thank you

CHARGE TO: R L Investment
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB		
PUMP TRUCK CHARGE		<u>700.00</u>
EXTRA FOOTAGE	@	
MILEAGE	<u>50 Miles @ 4.00</u>	<u>200.00</u>
MANIFOLD	@	
	@	
	@	
TOTAL		<u>900.00</u>

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL _____

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

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SIGNATURE Dave

RECEIVED
KANSAS CORPORATION COMMISSION

PRINTED NAME AUG 10 2007