

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

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 34047
Name: Ron-Bob Oil LLC
Address: PO Box 41
City/State/Zip: Neosho Falls, KS 66758
Purchaser: CMT Transportation, INC.
Operator Contact Person: Robert Christenson
Phone: (620) 365-0919
Contractor: Name: Nicholas L Brown
License: 32642
Wellsite Geologist: none
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. _____
5/13/2008 5/15/2008 5/16/2008
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 207-27372-00-00
County: Woodson
SE NW NE Sec. 24 Twp. 23 S. R. 16 ☒ East ☐ West
4241 feet from (S) N (circle one) Line of Section
1506 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Wolfe Well #: 16-B
Field Name: Neosho Falls-Leroy
Producing Formation: Squirrel
Elevation: Ground: 962' Kelly Bushing: none
Total Depth: 996' Plug Back Total Depth: none
Amount of Surface Pipe Set and Cemented at 40' Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 992
feet depth to surface w/ 105 sx cmt.

Drilling Fluid Management Plan Alt II NCR 7-29-08
(Data must be collected from the Reserve Pit)
Chloride content fresh water ppm Fluid volume _____ 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: Patricia J. Schuster
Title: Partner Date: July 8th, 2008
Subscribed and sworn to before me this 8th day of July,
2008.
Notary Public: Patricia J. Schuster
Date Commission Expires: December 31st, 2009



KCC Office Use ONLY	
<input checked="" type="checkbox"/> Letter of Confidentiality Received	RECEIVED KANSAS CORPORATION COMMISSION JUL 11 2008
<input checked="" type="checkbox"/> Wireline Log Received	
<input checked="" type="checkbox"/> Geologist Report Received	
<input checked="" type="checkbox"/> UIC Distribution	
If Denied, Yes <input type="checkbox"/> Date: _____	

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Ron-Bob Oil LLC Lease Name: Wolfe Well #: 16-B
 Sec. 24 Twp. 23 S. R. 16 ☒ East ☐ West County: Woodson

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)

☒ Log Formation (Top), Depth and Datum ☐ Sample

Samples Sent to Geological Survey ☐ Yes ☒ No

Name Top Datum

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

Gamma Ray / Neutron

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
surface	12"	7"	17#	40'	Portland	10	
production	5 5/8"	2 7/8"	6.7#	992'	Quick Set	105	

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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
2	934' - 944' (20 shots)	75 gal 15% HCL, 4000# sand	
2	951' - 960' (19 shots)		

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TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 6/25/2008		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. .25	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
 (If vented, Submit ACO-18.)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____

48-1214033
165290
Shop # 620 437-2661
Cellular # 620 437-7582
Office # 316 685-5908
Office Fax # 316-685-5926
Shop Address: 3613A Y Road
Madison, KS 66860

Hurricane Services, Inc.
P.O. Box 782228
Wichita, KS 67278-2228

Cement, Acid or Tools
Service Ticket
02414

DATE 5-16-08

COUNTY Woodson CITY _____

CHARGE TO Row 1 Boh Oil

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Wolfe # 16-B CONTRACTOR Nick Brown

KIND OF JOB Long string SEC. 24 TWP. 23s RNG. 16E

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
105 sks	QuickSet cement		1512.00
200 lbs	Gel Flush		40.00
	BULK CHARGE		
5.77 Tons	BULK TRK. MILES		222.15
35	PUMP TRK. MILES		105.00
3 Hrs	Water Truck #193		225.00
2	PLUGS 2 7/8" Top Rubber		30.00
		6.3% SALES TAX	99.67
		TOTAL	2933.82

T.D. 996'
SIZE HOLE 5 5/8"
MAX. PRESS. _____
PLUG DEPTH _____
PLUG USED _____
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CONSERVATION DIVISION
WICHITA, KS

CSG. SET AT _____ VOLUME _____
TBG SET AT 992' VOLUME 5.7 Bbls
SIZE PIPE 2 7/8" - 8rd
PKER DEPTH _____
TIME FINISHED _____

REMARKS: Rig up to 2 7/8" Tubing, Break circulation w/ 5 Bbls water, 10 Bbl. Gel Flush, followed with 15 Bbl. water. Mixed 105 sks QuickSet cement. Shut down - washout pump lines - Release Plugs. Displace Plugs with 5 3/4 Bbls. water. Final Pumping at 500 PSI - Bumped Plug to 1200 PSI. Close Tubing in w/ 1200 PSI. Good cement returns to Surface w/ 5 Bbl. slurry.

"Thank You!"

EQUIPMENT USED

NAME Kelly Kimberlin UNIT NO. 185
Brad Butler
HSI REP.

NAME Rodger #91, Clayton #193 UNIT NO. _____
Witnessed by Brad
OWNER'S REP.