

**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

*KCC
me
7/22/08*

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. _____

<u>5/16/2008</u>	<u>5/20/2008</u>	<u>5/21/2008</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 207-27373-00-00
County: Woodson
SE NW NE Sec. 24 Twp. 23 S. R. 16 East West
4529 feet from S N (circle one) Line of Section
1361 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 #: 17-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/ 110 sx cmt.

Drilling Fluid Management Plan Air 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: Robert Christenson
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

NOTARY PUBLIC - State of Kansas
PATRICIA J. SCHUSTER
My Appt. Exp. 12/31/09

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received **RECEIVED**
 Geologist Report Received **KANSAS CORPORATION COMMISSION**
 UIC Distribution **JUL 11 2008**

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Ron-Bob Oil LLC Lease Name: Wolfe Well #: 17-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 <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray / Neutron	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Datum squirrel Top Datum
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CASING RECORD <input type="checkbox"/> New <input checked="" 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"	7"	17#	40'	Portland	10	
production	5 5/8"	2 7/8"	6.7#	992'	Quick Set	110	

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
2	926' - 936' (20 shots)	100 gal 15% HCL, 4000# sand	

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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. 6/27/2008			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 Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

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

Production Interval _____

FED ID# 48-1214033
 MC ID # 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
 02430

DATE 5-21-08

COUNTY Woodson CITY _____

CHARGE TO Ron & Bob Oil

ADDRESS _____ CITY _____ ST _____ ZIP _____

LEASE & WELL NO. Wolfe # 17-B CONTRACTOR Nick Brown

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

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
110 sks	QuickSet cement		1,584.00
200 lbs	Gel Flush		40.00
	BULK CHARGE		
6 Tons	BULK TRK. MILES		231.00
35	PUMP TRK. MILES		105.00
3 hrs	Water Truck #193		225.00
2	PLUGS 2 7/8" Top Rubber		30.00
		6.32 SALES TAX	104.20
		TOTAL	3,019.20

T.D. 994'
 SIZE HOLE 5 5/8"
 MAX. PRESS. _____
 PLUG DEPTH _____
 PLUG USED _____

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

REMARKS: Rig up to 2 7/8" Tubing, Break circulation w/ 5 Bbls water, 10 Bbl. Gel Flush, followed with 20 Bbl. water, Mixed 110 sks. QuickSet cement, shut down washout Pump lines
Release Plugs - Displace Plugs with 5 3/4 Bbl. water, Final Pumping at 500 - Bumped Plug to 1200 PSI
Close Tubing in w/ 1200 PSI - Good cement returns to Surface w/ 5 1/2 Bbl. slurry
"Thank you"

EQUIPMENT USED

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

NAME Jerry #91, Keith #193 UNIT NO. _____
Witnessed by Ron
 OWNER'S REP.