

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

KCC
MW
7/15/08

Operator: License # 32116
Name: R.T. Enterprises of Kansas, Inc.
Address: 1207 N. 1st Street East
City/State/Zip: Louisburg, KS. 66053
Purchaser: CMT
Operator Contact Person: Lori Driskell
Phone: (913) 406-4236
Contractor: Name: Town Oilfield Service, Inc.
License: 33715
Wellsite Geologist: _____

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. _____
6/9/08 6/10/08 7/12/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 121-28598-00-00
County: Miami
E/2 NE NE SE Sec. 27 Twp. 17 S. R. 22 East West
2310 feet from S / N (circle one) Line of Section
247 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Terbrock Well #: W-1
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 342' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 21' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 21'
feet depth to Surface w/ 3 sx cmt.

Drilling Fluid Management Plan AH II NCR 7-30-08
(Data must be collected from the Reserve Pit)
Chloride content 1500-3000 ppm Fluid volume 80 bbls
Dewatering method used On lease
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: Lori Driskell
Title: Agent Date: 7/15/08
Subscribed and sworn to before me this 14 day of July
20 08
Notary Public: J. Helms
Date Commission Expires: 5-21-2011

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
RECEIVED
KANSAS CORPORATION COMMISSION
JUL 17 2008
JUL 17 2008
CONSERVATION DIVISION
WICHITA, KS
JIC Distribution
JESSICA M. HELMS
Notary Public - State of Kansas
My Appt. Exp. 5-21-2011

Operator Name: R. T. Enterprises of Kansas, Inc. Lease Name: Terbrock Well #: W-1
 Sec. 27 Twp. 17 S. R. 22 East West County: Miami

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:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	--

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	9	6 1/4"		21'	Portland	3	
Completion	5 5/8"	2 7/8"		315'	Portland	54	50/50 POZ

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	288.0-291.0 13 Perfs		
2	296.0-305.0 37 Perfs		

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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 _____

COPY

For KCC Use:
 Effective Date: 5-24-08
 District #: 3
 SGA? Yes No

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION

Form C-1
 October 2007
 Form must be Typed
 Form must be Signed
 All blanks must be Filled

NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date: _____
month day year

OPERATOR: License# 32116
 Name: R.T. Enterprises of Kansas, Inc.
 Address 1: 1207 N. 1st Street East
 Address 2: _____
 City: Louisburg State: KS Zip: 66053 + _____
 Contact Person: Lori Driskell
 Phone: 913-406-4236

CONTRACTOR: License# 33715
 Name: Town Oilfield Service, Inc.

Well Drilled For:	Well Class:	Type Equipment:
<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Enh Rec	<input type="checkbox"/> Mud Rotary
<input type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input checked="" type="checkbox"/> Air Rotary
	<input type="checkbox"/> Disposal	<input type="checkbox"/> Cable
<input type="checkbox"/> Seismic ; _____ # of Holes	<input type="checkbox"/> Pool Ext.	
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Wildcat	
	<input type="checkbox"/> Other	

If OWWO: old well information as follows:
 Operator: _____
 Well Name: _____
 Original Completion Date: _____ Original Total Depth: _____

Directional, Deviated or Horizontal wellbore? Yes No
 If Yes, true vertical depth: _____
 Bottom Hole Location: _____
 KCC DKT #: _____

Spot Description: N/2 of SE/4
E/2 - NE - NE - SE Sec. 27 Twp. 17 S. R. 22 E W
(a/a/a/a) 2,310 feet from N / S Line of Section
247 feet from E / W Line of Section

Is SECTION: Regular Irregular?

(Note: Locate well on the Section Plat on reverse side)

County: Miami
 Lease Name: Terbrock Well #: W-1
 Field Name: Paola-Rantoul

Is this a Prorated / Spaced Field? Yes No

Target Formation(s): Squirrel

Nearest Lease or unit boundary line (in footage): 165'

Ground Surface Elevation: _____ feet MSL

Water well within one-quarter mile: Yes No

Public water supply well within one mile: Yes No

Depth to bottom of fresh water: 100

Depth to bottom of usable water: 200

Surface Pipe by Alternate: I II

Length of Surface Pipe Planned to be set: 21'

Length of Conductor Pipe (if any): None

Projected Total Depth: 700'

Formation at Total Depth: Squirrel

Water Source for Drilling Operations:
 Well Farm Pond Other: _____

DWR Permit #: _____

(Note: Apply for Permit with DWR)

Will Cores be taken? Yes No

If Yes, proposed zone: _____

AFFIDAVIT

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The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.
 It is agreed that the following minimum requirements will be met:

JUL 17 2008 MAY 16 2008

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top of all cases surface pipe, **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 DAYS** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 5/13/08 Signature of Operator or Agent: Lori Driskell Title: Agent

For KCC Use ONLY
 API # 15 - 121-28598-0000
 Conductor pipe required None feet
 Minimum surface pipe required 20 feet per ALT. I II
 Approved by: RUA 57908
 This authorization expires: 57909
(This authorization void if drilling not started within 12 months of approval date.)
 Spud date: _____ Agent: _____

Remember to:

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed (within 60 days);
- Obtain written approval before disposing or injecting salt water.
- If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.

Well Not Drilled - Permit Expired Date: _____
 Signature of Operator or Agent: _____

27
17
22
 E
 W



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

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

Invoice # 222657

VOICE

Page 1

Invoice Date: 06/13/2008 Terms:

R.T. ENTERPRISES
1207 N. FIRST ST.
LOUISBURG KS 66053
() -

TURBROCK W-1
27-17-22
16070
06/11/08

Part Number	Description	Qty	Unit Price	Total
.124	50/50 POZ CEMENT MIX	54.00	9.7500	526.50
.118B	PREMIUM GEL / BENTONITE	201.00	.1700	34.17
L111	GRANULATED SALT (50 #)	150.00	.3300	49.50
L110A	KOL SEAL (50# BAG)	300.00	.4200	126.00
L107A	PHENOSEAL (M) 40# BAG)	15.00	1.1500	17.25
4402	2 1/2" RUBBER PLUG	1.00	23.0000	23.00

	Description	Hours	Unit Price	Total
164	CEMENT PUMP	1.00	925.00	925.00
164	EQUIPMENT MILEAGE (ONE WAY)	25.00	.00	.00
237	TON MILEAGE DELIVERY	1.00	157.50	157.50

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Parts:	776.42	Freight:	.00	Tax:	50.86	AR	1909.78
Labor:	.00	Misc:	.00	Total:	1909.78		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

McALESTER, OK
918/426-7667

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9216 OR 800-467-8676

TICKET NUMBER 16070
 LOCATION Ottawa KS
 FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6/11/08	7010	Tuxbrook # W-1	27	17	22	MI
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
R T Enterprises			506	Fred		
MAILING ADDRESS			164	Ken		
1207 N. First			237	Gerid		
CITY	STATE	ZIP CODE				
Louisburg	KS	66053				

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 330' CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 315' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 1.8 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Check casing depth w/wireline. Mix Pump 100# Premium Gel Flush. Mix Pump 60 sks 50/50 Poz Mix Cement w/2% gel 5% salt 5# Kal Seal 4# Phenoseal per sack. Cement to surface. Flush pump & lines clean. Displace 2 1/2" Rubber Plug to casing TD w/ 1.8 BBL Fresh water Pressure to 700# PSI. Hold Pressure for 30 minutes M.I.T. Shut in casing.
 NCC Rep: Taylor Herman
 Rig Supplied water. *Fred Mader*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump 164		925.00
5406	25mi	MILEAGE Pump Truck on lease 164		N/C
5407A	1/2 minimum	Ton Mileage 237		152.50
1124	54 sks	50/50 Poz Mix Cement		526.50
1118B	201 #	Premium Gel		34.50
1111	150 #	Consolidated Salt		49.50
1110A	300 #	Kal Seal		126.00
1107A	15 #	Phenoseal		17.25
4402	1	2 1/2" Rubber Plug		23.00
Sub Total				1858.75
Tax @ 6.5%				50.86
SALES TAX ESTIMATED TOTAL				1909.61

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CASING MECHANICAL INTEGRITY TEST

DOCKET # _____

Disposal Enhanced Recovery: NW.NP

NE NE SE, Sec 27, T 17 S, R 22 W

Repressuring

2310 Feet from South Section Line

Flood

247 Feet from East Section Line

Tertiary

Date injection started _____

Lease TERBOLK

Well # W-1

API #15 - 121 - 28598

County MIAMI

Operator: R.T. ENTERPRISES OF KANSAS, INC.

Operator License # 32116

Name &

Address 1207 N. 1st Street EAST

Contact Person LOUI DRISKEILL

LOUISBURG, KS 66053

Phone 913-406-4236

Max. Auth. Injection Press. _____ psi; Max. Inj. Rate _____ bbl/d;

If Dual Completion - Injection above production _____ Injection below production _____

Conductor	Surface	Production	Liner	Tubing
Size _____	<u>6 5/8"</u>	<u>2 7/8"</u>	_____	Size _____
Set at _____	<u>21'</u>	<u>320'</u>	_____	Set at _____
Cement Top _____	<u>0</u>	<u>0</u>	_____	Type _____
" Bottom _____	<u>21'</u>	<u>320'</u>	_____	_____
DV/Perf. _____	_____	_____	_____	_____
Packer type _____	_____	_____	_____	_____
Zone of injection _____ ft. to ft.	_____	_____	_____	_____

TD (and plug back) 350 ft. depth

Size _____ Set at _____

Perf. or open hole _____

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

Time: Start 10 Min. 20 Min. 30 Min.

Pressures: 700 700 700 Set up 1 | System Pressure during test
 Set up 2 | Annular Pres. during test
 Set up 3 | Fluid loss during test _____ bbls.

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Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with RUBBER PLUG

Test Date 6-10-08 Using CONSOLIDATED Company's Equipment

The operator hereby certifies that the zone between 0 feet and 315 feet

was the zone tested Fred Madu
 Signature _____ Title _____

The results were Satisfactory , Marginal _____, Not Satisfactory _____

State Agent Taylor C. Herman Title PRES IT Witness: Yes No _____

REMARKS: Pressured casing up to 700# well not perforated yet

Origin. Conservation Div.;

KDHE/T;

Dist. Office: 32