

CONFIDENTIAL

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 # 3911
 Name: Rama Operating Co., Inc. **KCC**
 Address: P.O. Box 159
 City/State/Zip: Stafford, KS. 67578 **MAR 23 2007**
 Purchaser: **CONFIDENTIAL**
 Operator Contact Person: Robin L. Austin
 Phone: (620) 234-5191
 Contractor: Name: Sterling Drilling Company
 License: 5142
 Wellsite Geologist: Josh Austin
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

02-01-2007	02-10-2007	02-26-2007
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 185-23,423-0000
 County: Stafford
 _____ Nw Sw Nw Sec. 11 Twp. 24 S. R. 14 East West
1,650 feet from S / **(N)** (circle one) Line of Section
330 feet from E / **(W)** (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE **(NW)** SW
 Lease Name: Bookstore Well #: 5-11
 Field Name: Rattlesnake West
 Producing Formation: Mississippi
 Elevation: Ground: 1955 Kelly Bushing: 1964
 Total Depth: 4,125 Plug Back Total Depth: 4,099
 Amount of Surface Pipe Set and Cemented at 308 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 API NH 6-2708
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume 160 bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: _____
 Operator Name: Gee Oil Service
 Lease Name: Rogers License No.: 32482
 Quarter _____ Sec. 34 Twp. 23 S. R. 13 East West
 County: Stafford Docket No.: D-23,350

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: [Signature]
 Title: UP Date: 3-23-2007
 Subscribed and sworn to before me this 23rd day of MARCH
10-2007
 Notary Public: [Signature]
 Date Commission Expires: 4-11-10

KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
MAR 26 2007



KCC WICHITA

JAN 19 1960

Side Two

Operator Name: Rama Operating Co., Inc. Lease Name: Bookstore Well #: 5-11
 Sec. 11 Twp. 24 S. R. 14 East West County: Stafford

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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Howard	3,091 -1,127
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner	3,498 -1534
List All E. Logs Run:		Lansing	3,655 -1691
		Mississippi	4,026 -2,062
		RTD	4,125 -2,161

Dual Induction, Comp. Porosity and Sonic

CASING RECORD <input checked="" 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	# Sacs Used	Type and Percent Additives
Surface	12 1/4	8 5/8	24	308	common	280	2% gel, 3% CC
Production	7 7/8	5 1/2	14	4,121	60/40 poz	125	500 gal mud flush

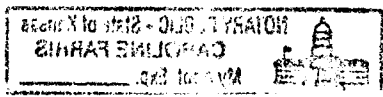
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

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	4026-4040	1,500 10% HCL acid & 43,000 gal. Profrac and 46,500# of sand	

TUBING RECORD	Size 2 7/8	Set At 3,825	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 3-02-07	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. 35	Gas Mcf	Water Bbls. 10	Gas-Oil Ratio Gravity

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify)



RAMA Operating Co., Inc.
P.O. Box 159
Stafford, KS. 67578
(620) 234-5191

DRILL STEM TESTS
Bookstore 5-11
Nw-Sw-Nw of Sec. 11-24s-14w
Stafford County, Kansas
API No.: 15-185-23,423-000

KCC
MAR 23 2007
CONFIDENTIAL

DST #1: 4,004-4,044' / 30-45-30-90: Weak Blow; Recovery: 30' Mud, no shows.
IFP: 49-55#
ISIP: 222#
FFP: 63-70#
FSIP: 176#

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MAR 26 2007
KCC WICHITA

ALLIED CEMENTING CO., INC.

26383

ATTN: P.O. BOX 31
RUSSELL, KANSAS 67665

MAR 23 2007

SERVICE POINT: Great Bend

CONFIDENTIAL

DATE <u>2-2-07</u>	SEC. <u>11</u>	TWP. <u>24S</u>	RANGE <u>14W</u>	CALLED OUT <u>—</u>	ON LOCATION <u>1:30 AM</u>	JOB START <u>3:30 AM</u>	JOB FINISH <u>4:30 AM</u>
LEASE <u>Book Store</u>	WELL # <u>1</u>	LOCATION <u>281 + 50 5th SW 1/2 N</u>			COUNTY <u>Stafford</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			E/Info				

CONTRACTOR Stirling #1

TYPE OF JOB Surface

HOLE SIZE 12 1/4" T.D. 308'

CASING SIZE 8 5/8" DEPTH 307'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 200# PSI MINIMUM —

MEAS. LINE _____ SHOE JOINT 15'

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 18 1/2 BBLs of freshwater

OWNER Rama Operating

CEMENT AMOUNT ORDERED 280 St Common 3% CC, 2% Gel

EQUIPMENT

PUMP TRUCK # 181 CEMENTER Rick H.
HELPER Randy P. / Tim D.

BULK TRUCK # 357 DRIVER David J.

BULK TRUCK # _____ DRIVER _____

COMMON	<u>280</u>	@	<u>10.65</u>	<u>2982.00</u>
POZMIX		@		
GEL	<u>6</u>	@	<u>16.65</u>	<u>99.90</u>
CHLORIDE	<u>8</u>	@	<u>46.60</u>	<u>372.80</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>294</u>	@	<u>1.90</u>	<u>558.60</u>
MILEAGE	<u>30.9</u>	@	<u>2.94</u>	<u>793.80</u>
			TOTAL	<u>4807.10</u>

REMARKS:

pipe on bottom ~~90~~ broke circulation
mixed 280 St Common 3% CC, 2% Gel
Shot down released plug displaced w/18 1/2
BBLs of freshwater and shut in.

Cement did Circulate

SERVICE

DEPTH OF JOB	<u>307'</u>			
PUMP TRUCK CHARGE				<u>815.00</u>
EXTRA FOOTAGE	<u>7</u>	@	<u>.65</u>	<u>4.55</u>
MILEAGE	<u>30</u>	@	<u>6.00</u>	<u>180.00</u>
MANIFOLD		@		
	<u>Head rent</u>	@		<u>100.00</u>
			TOTAL	<u>1099.55</u>

CHARGE TO: Rama Operating

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

1 - Wooden plug 60.00

RECEIVED _____

@ _____

MAR 26 2007 _____

@ _____

KCC WICHITA _____

Customer <i>Rama Operating</i>		Lease No.		Date	
Lease <i>Bookstore</i>		Well # <i>5-11</i>		Date <i>2-9-07</i>	
Field Order # <i>15001</i>	Station <i>Pratt</i>	Casing <i>5 1/2</i>	Depth	County <i>Stafford</i>	State <i>Ks.</i>
Type Job <i>5 1/2 L.S. N.W.</i>			Formation	Legal Description <i>11-245-74W</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>5 1/2</i>	Tubing Size	Shots/Ft	<i>Cont. -</i>	Acid <i>125 gal. AA2</i>	RATE	PRESS	ISIP	
Depth <i>4123</i>	Depth	From	To	Pre Pad <i>1.36 ft³</i>	Max	KCC	5 Min.	
Volume <i>100.5</i>	Volume	From	To	Pad	Min	MAR 23 2007	10 Min.	
Max Press <i>1500</i>	Max Press	From	To	Frac	Avg	CONFIDENTIAL	15 Min.	
Well Connection <i>P.C.</i>	Annulus Vol.	From	To		HHP Used	CONFIDENTIAL	Annulus Pressure	
Plug Depth <i>4110</i>	Packer Depth	From	To	Flush <i>100 bbl.</i>	Gas Volume		Total Load	

Customer Representative <i>Rabia Austin</i>			Station Manager <i>Dave Scott</i>			Treater <i>Bobby Drake</i>		
Service Units <i>123</i>	<i>228</i>	<i>342</i>	<i>501</i>					
Driver Names <i>Drake</i>	<i>Sullivan</i>	<i>Boles</i>						

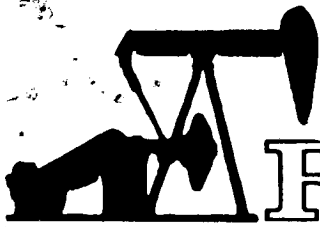
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>0745</i>					<i>On location - Safety Meeting</i>
<i>0845</i>					<i>Run Csg. - Cont. on 2-4-8-10</i>
<i>0130</i>					<i>Csg. on Bottom</i>
<i>0140</i>					<i>Hook up to Csg. - Break Circ. w/ Pig</i>
<i>0200</i>	<i>300</i>		<i>20</i>	<i>4.5</i>	<i>20% KCL. Ahead</i>
<i>0206</i>	<i>300</i>		<i>12</i>	<i>4.5</i>	<i>Mud Flush</i>
<i>0209</i>	<i>300</i>		<i>5</i>	<i>4.5</i>	<i>Had Spacers</i>
<i>0210</i>	<i>400</i>		<i>33</i>	<i>5.5</i>	<i>Mix Cont. @ 15.4#/gal</i>
<i>0221</i>					<i>Release Plug - Clear Pump + Lines</i>
<i>0222</i>	<i>100</i>			<i>6.0</i>	<i>Start Disp.</i>
<i>0231</i>	<i>300</i>		<i>75</i>	<i>5.5</i>	<i>Lift Pressure</i>
<i>0237</i>	<i>1500</i>		<i>100</i>		<i>Plug Down</i>
<i>0240</i>			<i>4</i>		<i>Plug Rpt Hole</i>
<i>0100</i>					<i>circulate csg. down x 2</i>
					<i>Circulation Three Job</i>
					<i>Job Complete</i>

Thanks, Bobby

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MAR 26 2007

KCC WICHITA



RAMA OPERATING CO., INC.

3/23/08

P. O. Box 159 Stafford, Kansas 67578 (620) 234-5191

March 23, 2007

Kansas Corporation Commission
Finney State Office Building
130 S. Market, Room 2078
Wichita, KS. 67202-3802

KCC
MAR 23 2007
CONFIDENTIAL

RE: Bookstore #5-11
 Nw-Sw-Nw of Sec. 11-24s-14w
 Stafford Co., Kansas
 API # 15-185-23,423-0000

RAMA Operating Co., Inc. is requesting the information on side two of the ACO-1 be held confidential for a period of 12 months on the above mentioned well.

If you have questions concerning this request, please contact me at (620) 234-5191.

Yours truly,

Robin L. Austin
RAMA Operating Co., Inc.

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MAR 26 2007
KCC WICHITA





CORPORATION COMMISSION

Kathleen Sebelius, Governor Thomas E. Wright, Chairman Michael C. Moffet, Commissioner Joseph F. Harkins, Commissioner

June 20, 2008

RAMA OPERATING CO., INC.
101 S MAIN ST
STAFFORD, KS 67578-1429

RE: API Well No. 15-185-23423-00-00
BOOKSTORE 5-11
NWSWNW, 11-24S-14W
STAFFORD County, Kansas

Dear Operator:

An affidavit of completion form (ACO-1) on the above referenced well was received on March 26, 2007. Technical review finds that the ACO-1 is incomplete. The information requested below, or an amended/corrected ACO-1, must be submitted by July 11, 2008. Only the current ACO-1 form will be accepted (Form ACO-1, Rev. 9-99), and only the lines marked below apply.

- | | |
|---|---|
| <input type="checkbox"/> All drilling and completion information. No ACO-1 has been received as of this date. | <input type="checkbox"/> TD and Completion date. (Month, Day, Year) |
| <input type="checkbox"/> Must be notarized and signed. | <input type="checkbox"/> Must have Footages from nearest outside corner of section. |
| <input type="checkbox"/> Must have the ORIGINAL HARD COPY of ACO-1. We do not accept fax copies. | <input type="checkbox"/> Side two on back of ACO-1 must be completed. |
| <input type="checkbox"/> Must be put on new form and typed. | <input checked="" type="checkbox"/> Must have final copies of DST's/Charts. |
| <input type="checkbox"/> API # or date when original well was first drilled. | <input type="checkbox"/> All original complete open and cased hole wireline logs run. |
| <input type="checkbox"/> Contractor License #. | <input type="checkbox"/> A copy of geological reports compiled by wellsite geologist. |
| <input type="checkbox"/> Designate type of Well Completion. | <input type="checkbox"/> A copy of all cement job logs showing type, amounts and additives used to cement casing strings, squeeze and/or to plug and abandon. (Note: Cement tickets must be from company providing the cement, not necessarily the contractor.) |
| <input type="checkbox"/> If Workover/Re-entry, need old well information, including original completion date. | <input type="checkbox"/> Any commingling information; File on the ACO-4 form. |
| <input type="checkbox"/> Spud date. (Month, Day, Year) | <input type="checkbox"/> Anything HIGHLIGHTED on ACO-1. |
| <input type="checkbox"/> Other: | |

K.C.C. regulation 82-3-107 provides confidentiality, upon written request, for a period of one year from the date of such letter request. Confidentiality rights are waived if the ACO-1 remains incomplete, or is not timely filed (within 120 days from the well's spud date) including: electric logs, geologist's wellsite reports, driller's logs, and Kansas Geological Survey requested samples.

Do not hesitate to call the Kansas Corporation Commission, Conservation Division, at (316) 337-6200 if there are any questions. PLEASE RETURN THIS FORM AND ANY ENCLOSURES WITH YOUR REPLY. Note: If the intent is incorrect, you need to file a corrected intent.

Sincerely,

Naomi Hollon
Production Department