

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 30458
Name: R.J.M. Oil Company, Inc.
Address: P.O. Box 256
City/State/Zip: Clafin, Kansas 67525
Purchaser: _____
Operator Contact Person: Chris Hoffman
Phone: (620) 786-8744
Contractor: Name: Royal Drilling, Inc.
License: 33905
Wellsite Geologist: _____

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. _____

5/7/2008 5/12/2008 5/12/2008
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 009-25181-0000
County: Barton
E/2 SW NE NW Sec. 8 Twp. 17 S. R. 11 East West
920 feet from S (N) (circle one) Line of Section
1850 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Wondra B Well #: 7
Field Name: Kraft-Prusa

Producing Formation: _____
Elevation: Ground: 1882' Kelly Bushing: 1887'
Total Depth: 3366 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 392 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ sx cmt.

PA-Dlg-7/13/08
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 47,000 ppm Fluid volume 1000 bbls
Dewatering method used Allow to dry and 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: *Lawrence B. Miller*
Title: President Date: 6-16-08
Subscribed and sworn to before me this 17th day of JUNE
2008
Notary Public: *Bonnie Jeffrey*
Date Commission Expires: _____

Bonnie Jeffrey
State of Kansas
Notary Public
My Commission Expires
9/12/2010

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Report RECEIVED
 Geologist Report RECEIVED
KANSAS CORPORATION COMMISSION
UIC Distribution
JUN 18 2008
JUN 18 2008
CONSERVATION DIVISION
CONSERVATION DIVISION
WICHITA, KS

JAN 10 1980

Side Two

Operator Name: R.J.M. Oil Company, Inc. Lease Name: Wondra B Well #: 7
Sec. 8 Twp. 17 S. R. 11 East West County: Barton

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input 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			
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E. Logs Run:				

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	20	392	775 Common	175	3% ca 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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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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)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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)

QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 1952

Date	Sec.	Twp.	Range	Called Out	On Location	Job Start	Finish
Lease	Well No.		Location		County	State	
Contractor				Owner			
Type Job				To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Hole Size	T.D.	Depth		Charge To			
Csg.	Depth		Street				
Tbg. Size	Depth		City State				
Drill Pipe	Depth		The above was done to satisfaction and supervision of owner agent or contractor.				
Tool	Depth						
Cement Left in Csg.	Shoe Joint						
Press Max.	Minimum						
Meas Line	Displace		CEMENT				
Perf.							
EQUIPMENT				Amount Ordered			
Pumptrk	No.	Cementer		Consisting of			
		Helper					
Bulktrk	No.	Driver		Common			
		Driver					
Bulktrk	No.	Driver		Poz. Mix			
		Driver					
JOB SERVICES & REMARKS				Gel.			
Pumptrk Charge				Chloride			
Mileage				Hulls			
Footage				Salt			
Total				Flowseal			
Remarks:							
				Sales Tax			
				Handling			
				Mileage			
				Sub Total			
				Total			
				Floating Equipment & Plugs			
				Squeeze Manifold			
				Rotating Head			
RECEIVED							
KANSAS CORPORATION COMMISSION							
JUN 18 2008							
CONSERVATION DIVISION WICHITA, KS							
X Signature				Tax			
				Discount			
				Total Charge			

