

12/18/08

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

\* Rec'd in Prod. Dept.  
12/18/08 from UIC.  
(SB N.)  
Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

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) 837-8400  
Contractor: Name: Town Oilfield Service, Inc.  
License: 33715  
Wellsite Geologist: \_\_\_\_\_

API No. 15 - 045-21453-00-00  
County: Douglas  
\_\_\_\_ - NW - SE Sec. 1 Twp. 15 S. R. 20  East  West  
1980 feet from (S) N (circle one) Line of Section  
1980 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE (SE) NW SW  
Lease Name: Lester Kalb Well #: I-21  
Field Name: Baldwin  
Producing Formation: Squirrel  
Elevation: Ground: NA Kelly Bushing: NA  
Total Depth: 870' Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 42' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from 42'  
feet depth to surface w/ 6 sx cmt.  
Alt-2 - Dlg - 3/30/09

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

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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. \_\_\_\_\_

8/28/08 9/2/08 10/2/08  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit)  
Chloride content 1500-3000 ppm Fluid volume 100 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

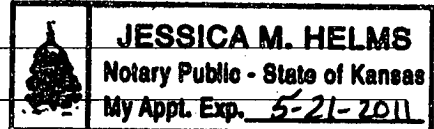
Title: Agent Date: 11/10/08

Subscribed and sworn to before me this 12th day of November

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  
 UIC Distribution

Operator Name: R.T. Enterprises of Kansas, Inc. Lease Name: Lester Kalb Well #: I-21  
 Sec. 1 Twp. 15 S. R. 20  East  West County: Douglas

**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
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**KCC WICHITA**

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"		42'	Portland	6	
Completion	5 5/8"	2 7/8"		866'	Portland	116	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	821.0-831.0 41 Perfs		

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 \_\_\_\_\_





**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

Invoice # 225585

Invoice Date: 09/12/2008 Terms:

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

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KALB I-21  
16386  
1-15-20  
09-10-08

KCC WICHITA

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	116.00	9.7500	1131.00
1118B	PREMIUM GEL / BENTONITE	319.00	.1700	54.23
1111	GRANULATED SALT (50 #)	273.00	.3300	90.09
1110A	KOL SEAL (50# BAG)	650.00	.4200	273.00
1107A	PHENOSEAL (M) 40# BAG)	33.00	1.1500	37.95
4401	2" RUBBER PLUG	1.00	23.0000	23.00

Description	Hours	Unit Price	Total
370 80 BBL VACUUM TRUCK (CEMENT)	1.50	100.00	150.00
495 CEMENT PUMP	1.00	925.00	925.00
495 EQUIPMENT MILEAGE (ONE WAY)	20.00	3.65	73.00
510 MIN. BULK DELIVERY	1.00	315.00	315.00

Parts: 1609.27 Freight: .00 Tax: 101.39 AR 3173.66  
 Labor: .00 Misc: .00 Total: 3173.66  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_ Date \_\_\_\_\_

VALIDATED OIL WELL SERVICES, INC.  
 BOX 884, CHANUTE, KS 66720  
 431-9210 OR 800-467-8676

TICKET NUMBER 16386  
 LOCATION Ottawa KS  
 FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET  
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/10/08	7010	L. Kalb # I-21	1	15	20	06
CUSTOMER <b>RT Enterprises</b>						
MAILING ADDRESS <b>1207 N First St</b>						
CITY <b>Louisburg</b>	STATE <b>KS</b>	ZIP CODE <b>66053</b>				
			TRUCK #	DRIVER	TRUCK #	DRIVER
			506	Fred		
			495	Brett		
			370	Ken		
			510	Gerid		

JOB TYPE Long string HOLE SIZE \_\_\_\_\_ HOLE DEPTH 880' CASING SIZE & WEIGHT 2 3/8 EVE  
 CASING DEPTH 868' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 CEMENT LEFT in CASING 2" Plug  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT RATE 4 BPM  
 DISPLACEMENT 3.47 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_

REMARKS: Check casing depth w/wireline. Circulate from pit to condition hole. Mix + Pump 100# Premium Gel Flush Mix + Pump 130 sks 50/50 Por Mix Cement 2% Gel 5% Salt 5# Kal Seal 4# Pheno Seal per sack. Flush pump + lines clean. Displace 2" Rubber plug to casing TD w/ 3.47 BBL Fresh water. Pressure to 750# PSI & Shut in casing

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump	495	925 <sup>00</sup>
5406	20 mi	MILEAGE Pump Truck	495	73 <sup>00</sup>
5407	Minimum	Ton Mileage	510	315 <sup>00</sup>
5502c	1 1/2 hrs	80 BBL Vac Truck	370	150 <sup>00</sup>
1124	116 sks	50/50 Por Mix Cement		113 <sup>00</sup>
1118B	319#	Premium Gel	RECEIVED	54 <sup>23</sup>
1111	273#	Granulated Salt	DEC 15 2008	90 <sup>09</sup>
1110A	650#	Kal Seal		273 <sup>00</sup>
1107A	33#	Pheno Seal	KCC WICHITA	37 <sup>95</sup>
4401	1	2" Rubber Plug		23 <sup>00</sup>
Sub Total				3072 <sup>37</sup>
Tax @ 6.3%				101.39
SALES TAX ESTIMATED TOTAL				3173.66

225585

CASING MECHANICAL INTEGRITY TEST

DOCKET # E-23,292

Disposal  Enhanced Recovery: NW, SE, Sec 1, T 15 S, R 20 E W  
 Repressuring   
 Flood   
 Tertiary

*UWOP*

1980 Feet from South Section Line  
1980 Feet from East Section Line

Date injection started \_\_\_\_\_  
 API #15- 045 - 2453 - 0000

Lease Lester Kalb Well # I-21  
 county Douglas

Operator Name & Address: R.T. Enterprises of Kansas, Inc.  
1207 N. 1st Street East  
Louisburg, KS. 66053  
 Operator License # 32116  
 Contact Person Lori Driskell  
 Phone 913. 401-4236

Max. Auth. Injection Press. \_\_\_\_\_ psi; Max. Inj. Rate \_\_\_\_\_ bbl/d;  
 If Dual Comp. - Injection above production \_\_\_\_\_ Injection below production \_\_\_\_\_  
 Conductor Surface Production Liner Size Tubing  
 Size \_\_\_\_\_ 6'4" 2 3/8" \_\_\_\_\_ Size \_\_\_\_\_  
 Set At \_\_\_\_\_ 42' 880 \_\_\_\_\_ Set At \_\_\_\_\_  
 Cement Top \_\_\_\_\_ 0 \_\_\_\_\_ Type \_\_\_\_\_  
 " Btm \_\_\_\_\_ 42' 880 \_\_\_\_\_  
 DV/Perf. \_\_\_\_\_ TD (and plug back) 900' ft. depth  
 Packer Type \_\_\_\_\_ size \_\_\_\_\_ Set At \_\_\_\_\_  
 Zone of Injection 821.0 ft. to ft. 831.0  Perf or open hole: 41 parts

Type MIT: Pressure  Radioactive Tracer Survey  Temperature Survey

F Time: Start 20 Min. 40 Min. 60 Min.  
 I Pressures: 185 180 170 Set up 1 System Pres. during test \_\_\_\_\_  
 L RECEIVED Set up 2 Annular Pres. during test \_\_\_\_\_  
 D DEC 15 2008 Set up 3 Fluid loss during test \_\_\_\_\_ bbls  
 D Tested: Csg  KCCWICHITA Tubing Annulus

The bottom of the tested zone is shut in with Fluid Depression Test  
 Test Date 10-28-08 Using Co. Tools Company's Equipment  
 The operator hereby certifies that the zone between 0 feet and 821 feet  
 was the zone tested Stacy P. Hernandez  
 Signature Title

The results were Satisfactory , Marginal \_\_\_\_\_, Not Satisfactory \_\_\_\_\_  
 State Agent Taylor C. Horan Title Per II Witness: Yes  No \_\_\_\_\_  
 REMARKS: Fluid level 400' from surface 821' - 400' = 421' x .43 = 181'

Origin. Conserv. Div. \_\_\_\_\_ KDHE/T \_\_\_\_\_ Dist. Off. \_\_\_\_\_ Computer Update \_\_\_\_\_

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