

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

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

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: _____

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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. _____

9/19/08 9/22/08 10/22/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 045-21404-00-00
County: Douglas
C SW SW SE Sec. 1 Twp. 15 S. R. 20 ☒ East ☐ West
330 feet from S / N (circle one) Line of Section
2310 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SB NW SW
Lease Name: Lester Kalb Well #: I-17

Field Name: Baldwin

Producing Formation: Squirrel

Elevation: Ground: NA Kelly Eushing: NA

Total Depth: 900' Plug Back Total Depth: _____

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 40'

feet depth to surface w/ 10 sx cmt.

Alt 2-Dlg-3/30/09

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

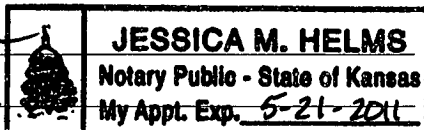
Title: Agent Date: 11/10/08

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-17
 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 ☐ Yes ☒ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

Gamma Ray/Neutron/CCL

☒ Log Formation (Top), Depth and Datum ☐ Sample

Name Top Datum

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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"		40'	Portland	10	
Completion	5 5/8"	2 7/8"		872'	Portland	113	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	842.0-852.0 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

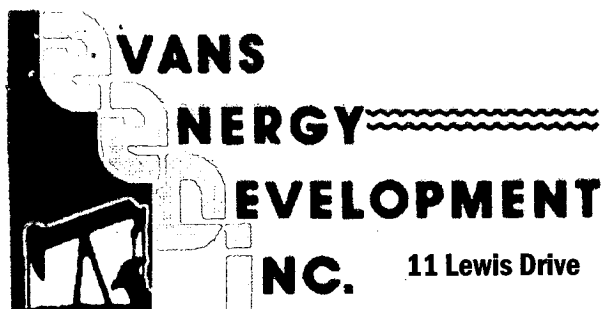
Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
 (If vented, Submit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____



Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation

11 Lewis Drive

Paola, KS 66071

Phone: 913-557-9083

Fax: 913-557-9084

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WELL LOG

R.T. Enterprises of Kansas, Inc.

Lester Kalb #I-17

API #15-045-21,404

September 19 - September 22, 2008

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
6	soil & clay	6
12	shale	18
73	sandstone	91
102	shale	193
22	lime	215
15	shale	230
4	lime	234
7	shale	241
2	lime	243
3	shale	246
14	lime	260
33	shale	293
5	lime	298
10	shale	308
2	lime	310
74	shale	384
3	lime	387
2	shale	389
2	lime	391
5	shale	396
12	lime	408
14	shale	422
11	lime	433
32	shale	465
9	lime	474
11	shale	485
5	lime	490
3	shale	493
2	lime	495
12	shale	507
10	lime	517
9	shale	526
21	lime	547
193	shale	740
15	lime	755
9	shale	764
11	lime	775
9	shale	784

2	limestone	786
29	shale	815
6	limestone	821
5	shale	826
3	limestone	829
11	shale	840
4	sand	844
6	broken sand	850 light oil show
1	silty shale	851
5	broken sand	856 light oil show, 30% bleeding sand, 70% silty shale
3	silty shale	859
41	shale	900 TD

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Drilled a 9 7/8" Hole to 40'

Drilled a 5 5/8" hole to 900'.

Set 40' of used 7" surface casing cemented with 10 sacks of cement.

Set 873' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp



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 # 225887

Invoice Date: 09/24/2008 Terms:

Page 1

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

KALB I-17
1-15-20
19717
09/22/08

Part Number	Description	Qty	Unit Price	Total
1107A	PHENOSEAL (M) 40# BAG)	32.00	1.1500	36.80
1110A	KOL SEAL (50# BAG)	635.00	.4200	266.70
1111	GRANULATED SALT (50 #)	267.00	.3300	88.11
1118B	PREMIUM GEL / BENTONITE	313.00	.1700	53.21
1124	50/50 POZ CEMENT MIX	113.00	9.7500	1101.75
4402	2 1/2" RUBBER PLUG	1.00	23.0000	23.00

Description	Hours	Unit Price	Total
237 TON MILEAGE DELIVERY	1.00	157.50	157.50
368 CEMENT PUMP	1.00	925.00	925.00
368 EQUIPMENT MILEAGE (ONE WAY)	.00	3.65	.00
368 CASING FOOTAGE	872.00	.00	.00
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	100.00	200.00

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Parts:	1569.57	Freight:	.00	Tax:	98.88	AR	2950.95
Labor:	.00	Misc:	.00	Total:	2950.95		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

CONSOLIDATED
Oil Well Services, U.S.

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 19717
LOCATION Ottawa
FOREMAN Alan Mader

FIELD TICKET & TREATMENT REPORT CEMENT

DATE		CUSTOMER #		WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
9-22-08		7010		Kalt I-17		1	15	20	Dg
CUSTOMER									
B.T. Enterprises						TRUCK #		DRIVER	
MAILING ADDRESS						516		Alann	
1207 N 1st						368		Bill Z	
CITY				STATE		370		Ken Van	
Louisburg				KS		237		Arden Mc	
				ZIP CODE					
				66053					

JOB TYPE <u>long string</u>	HOLE SIZE <u>5 7/8</u>	HOLE DEPTH <u>900</u>	CASING SIZE & WEIGHT <u>2 7/8</u>
CASING DEPTH <u>872</u>	DRILL PIPE _____	TUBING _____	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING <u>yes</u>
DISPLACEMENT _____	DISPLACEMENT PSI _____	MIX PSI _____	RATE <u>4 bpm</u>

REMARKS: Checked casing depth. Mixed & pumped 100# gel followed by 127 sa 50/50 poz, 5# Kol-seal, 5% salt, 2% gel, 1/4# pheno seal. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. closed valve.

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Evans fig

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Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	925.00
5406	-	MILEAGE	368	-
5402	872'	casing footage	368	-
5407A	1/2 min	ten mileage	237	157.50
5502C	2	80 vac.	370	200.00
1107A	3 2#	Pheno Seal		36.80
1110 A	635 #	Kel-Seal		266.70
1111	267#	salt		88.11
1118B	313#	gel		53.21
1124	1135 x	50150 poz		1101.75
4402	1	2 1/2 plug		23.00
			Sub	2852.00
			SALES TAX	98.88

Bayin 3737

AUTHORIZTION

TITLE

SALES TAX	48.88
ESTIMATED TOTAL	2950.95
DATE	1/14