

3/6/09

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32116
Name: R.T. Enterprises of Kansas, Inc.
Address: P.O. Box 339
City/State/Zip: Louisburg, KS. 66053
Purchaser: Pacer
Operator Contact Person: Lori Driskell
Phone: (913) 837-8400
Contractor: Name: Town Oilfield Service, Inc.
License: 33715

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. _____
1/15/09 1/19/09 2/5/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-059-25411-00-00
County: Franklin
SW NE NE NW Sec. 4 Twp. 16 S. R. 21 East West
4755 feet from S / N (circle one) Line of Section
3040 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Lidikay Well #: 23
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 1018' Kelly Bushing: Not used
Total Depth: 798' Plug Back Total Depth: 18'
Amount of Surface Pipe Set and Cemented at _____ 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/ 4 1/2 sx cmt.

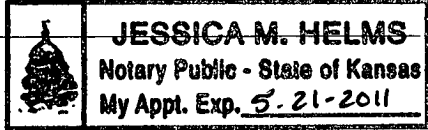
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 1500-3000 ppm Fluid volume 80 bbls
Dewatering method used on lease
Location of fluid disposal if hauled offsite:
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

Att-2-Dlg-4/6/09

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: 3/6/09
Subscribed and sworn to before me this 6 day of March
20 09.
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
RECEIVED
KANSAS CORPORATION COMMISSION
MAR 09 2009

CONSERVATION DIVISION
WICHITA KS

Operator Name: R.T. Enterprises of Kansas, Inc. Lease Name: Lidikay Well #: 23
 Sec. 4 Twp. 16 S. R. 21 East West County: Franklin

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 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	SEE ATTACHED		
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:	6/10/09 [Signature]			
Gamma Ray/ Neutron/CCL				

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	4	
Completion	5 5/8"	2 7/8"		780'	Portland	107	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 <i>(Amount and Kind of Material Used)</i>	Depth
2	712.0-722.0 21 PERFS		

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 WICHITA KS

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 # 228472
=====

Invoice Date: 01/21/2009 Terms: Page 1

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

LIDIKAY 23
4-16-21
19962
01/19/09

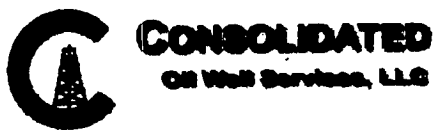
Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	107.00	9.2500	989.75
1118B	PREMIUM GEL / BENTONITE	302.00	.1600	48.32
1111	GRANULATED SALT (50 #)	252.00	.3100	78.12
1110A	KOL SEAL (50# BAG)	600.00	.3900	234.00
1107A	PHENOSEAL (M) 40# BAG)	30.00	1.0800	32.40
4402	2 1/2" RUBBER PLUG	1.00	22.0000	22.00

Description	Hours	Unit Price	Total
495 CEMENT PUMP	1.00	870.00	870.00
495 EQUIPMENT MILEAGE (ONE WAY)	10.00	3.45	34.50
548 TON MILEAGE DELIVERY	1.00	148.00	148.00

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WICHITA, KS

Parts: 1404.59 Freight: .00 Tax: 95.51 AR 2552.60
Labor: .00 Misc: .00 Total: 2552.60
Sublt: .00 Supplies: .00 Change: .00

signed _____ Date _____



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

TICKET NUMBER 19962
LOCATION Ottawa KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1/19/09	7010	Lidikay #23	4	16	21	FR
CUSTOMER RT Enterprises			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 1207 N. First			506	Fred		
CITY	STATE	ZIP CODE	495	Casey		
Louisburg	KS	66053	548	Chuck		

JOB TYPE Long String HOLE SIZE 5 7/8 HOLE DEPTH 795' CASING SIZE & WEIGHT 2 7/8" EVE
CASING DEPTH 780' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
DISPLACEMENT 4.5B DISPLACEMENT PSI _____ MIX PSI _____ RATE 4BPM

REMARKS: Chd casing depth w/wireline. Mix & Pump 100# Premium Gel Flush. Mix & Pump 120 sks 50/50 Poz Mix Cement w/ 2% Gel 5% Salt 5# Kol Seal & 1/4# Pheno seal per sack. Cement to surface. Flush pump & lines clean. Displace 2 1/2" Rubber plug to casing TD w/ 4.5 BBL Fresh water. Pressure to 780+ PSI. Release pressure to set float valve. Shut in casing

Fred Mader

Customer Supplied H₂O

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1 of 2	PUMP CHARGE Cement Pump		870 ⁰⁰
5406	1/2 of 20mi	MILEAGE Pump Truck		34 ⁰⁰
5407A	1/2 of Minimum	Ton Mileage		148 ⁰⁰
1124	107 SKS	50/50 Poz Mix Cement		989 ⁷⁵
1118B	302#	Premium Gel		48 ³³
1111	252#	Granulated Salt		78 ¹²
1110A	600#	Kol Seal		234 ⁰⁰
1107A	30#	Pheno Seal		32 ⁴⁰
4402	1	2 1/2" Rubber Plug		22 ⁰⁰
		Sub Total		2457 ⁰⁹
		Tax @ 6.8%		95.51
		SALES TAX ESTIMATE TOTAL		2552. ⁶⁰

Ravin 9737

AUTHORIZATION

Lance

TITLE

228472

DATE

1/19/09