

ORIGINAL

KE
3/17/09

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

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 SLOW 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. _____

12/29/08	12/30/08	1/24/09
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-25408-00-00
County: Franklin
NE NW NE NW Sec. 4 Twp. 16 S. R. 21 East West
210 feet from S (N) (circle one) Line of Section
3590 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 #: 20
Field Name: Paola-Rantoul

Producing Formation: Squirrel
Elevation: Ground: 1011' Kelly Bushing: Not used
Total Depth: 798' Plug Back Total Depth: 20'
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/ 5 ^{sq cm}

AH2-Dig 4/6/09

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.: _____

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
N
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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MAR 09 2009

CONSERVATION DIVISION
WICHITA KS

Operator Name: R.T. Enterprises of Kansas, Inc. Lease Name: Lidikay Well #: 20
 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) 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 (Submit Copy) List All E. Logs Run: Gamma Ray/ Neutron/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum SEE ATTD.
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Handwritten signature and date: 3/11/09

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	5	
Completion	5 5/8"	2 7/8"		778"	Portland	111	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	712.0-722.0 21 PERFS		

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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 Bbbs.	Gas Mcf	Water Bbbs.	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 _____

Franklin County, KS
Well: Lidikay # 20
Lease Owner: R.T.

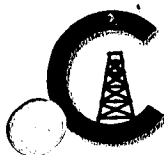
Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
12/29/08

WELL LOG

Thickness of Strata	Formation	Total Depth
3	Soil	3
28	Clay	31
22	Lime	53
7	Shale	60
11	Lime	71
3	Shale	74
21	Lime	95
29	Shale	124
1	Lime	125
15	Shale	140
21	Lime	161
72	Shale	233
22	Lime	255
28	Shale	283
7	Lime	290
58	Shale	348
24	Lime	372-Winterset
4	Shale	376
21	Lime	397-Bethany Falls
5	Shale	402
5	Lime	407-KC
2	Shale	409
7	Lime/Hertha	416-Hertha
125	Shale	541
6	Sand	547-Oil, Some Bleed
40	Shale	587
10	Lime	597
60	Shale	653
10	Lime	663
43	Shale	696
2	Lime, Oil Sand	698- Gas Cap
18	Sand, Oil	716-Good Oil Show, Gas Odor
2	Oil Sand	718- Broken
12	Oil Sand	730-Little Show
8	Shale	738
60	Shale	798- TD

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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 # 228251

Invoice Date: 01/08/2009 Terms: Page 1

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

LIDIKAY 20
4-16-21
19919
01/05/09

Part Number	Description	Qty	Unit Price	Total
L124	50/50 POZ CEMENT MIX	111.00	9.7500	1082.25
L118B	PREMIUM GEL / BENTONITE	308.00	.1700	52.36
L111	GRANULATED SALT (50 #)	261.00	.3300	86.13
L110A	KOL SEAL (50# BAG)	620.00	.4200	260.40
L107A	PHENOSEAL (M) 40# BAG)	31.00	1.1500	35.65
4402	2 1/2" RUBBER PLUG	1.00	23.0000	23.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	925.00	925.00
368 EQUIPMENT MILEAGE (ONE WAY)	10.00	3.65	36.50
548 MIN. BULK DELIVERY	.50	315.00	157.50

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Parts:	1539.79	Freight:	.00	Tax:	104.70	AR	2763.49
Labor:	.00	Misc:	.00	Total:	2763.49		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 19919
LOCATION Ottawa KS
FOREMAN Fred Mader

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/5/09	7010	Lid: kay # 20	4	16	21	FR
CUSTOMER RT Enterprises			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 1207 N 1st			506	FM		
CITY Louisburg			368	BZ		
STATE KS			548	AMC		
ZIP CODE 66053						

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 792' CASING SIZE & WEIGHT 2 3/8 EVE
CASING DEPTH 728' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
DISPLACEMENT 4.5 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4BPM

REMARKS: Check casing depth w/wiveline. Mix + Pump 100# Premium
Gel Flush. Mix + Pump 124 sks 50/50 Por Mix Cement 2%
Gel 5% Salt 5# Kol Seal 1/4# Phenol seal per sack. Cement
to surface. Flush pump + lines clean. Displace 2 1/2" Rubber
Plug to casing TD. w/4.5 BBLs Fresh water. Pressure to 700# PSI
Release pressure to set Float Valve. Shut in casing

Customer supplied water.

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1 of 2	PUMP CHARGE Cement Pump		925.00
5406	1/2 of 20 mi	MILEAGE Pump Truck		36.50
5407	1/2 of minimum	Ton Mileage.		157.50
1124	111 sks	50/50 Por Mix Cement		1082.25
1118B	308#	Premium Gel		52.36
1111	261#	Granulated Salt		86.13
1110A	620#	Kol Seal		260.40
1107A	31#	Phenol Seal		35.65
4402	1	2 1/2" Rubber Plug		23.00
		Sub Total		2658.79
		Tax @ 6.8%		104.70
		SALES TAX		
		ESTIMATED TOTAL		2763.49

Ravin 3737

AUTHORIZATION Lance

TITLE 228251

DATE

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WICHITA KS