

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

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

Handwritten initials and date: 3/16/09

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. _____

<u>12/29/08</u>	<u>1/6/09</u>	<u>1/25/09</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-25409-00-00
 County: Franklin
 NW - NE - NE - NW Sec. 4 Twp. 16 S. R. 21 East West
210 feet from S (N) (circle one) Line of Section
3260 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 #: 21
 Field Name: Paola-Rantoul
 Producing Formation: Squirrel
 Elevation: Ground: 1018' Kelly Bushing: Not used
 Total Depth: 780' Plug Back Total Depth: 10'
 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 20'
 feet depth to surface w/ 4 ^{sq cmt.}
Alt 2 - Dig - 4/16/09

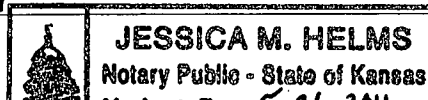
Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 1500-3000 ppm Fluid volume 80 bbls
 Dewatering method used on lease
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ 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
 Letter of Confidentiality Received
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
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 CONSERVATION DIVISION
 WICHITA KS



Operator Name: R.T. Enterprises of Kansas, Inc. Lease Name: Lidikay Well #: 21
 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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

List All E. Logs Run:

Gamma Ray/ Neutron/CCL

SEE ATTA

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 WICHITA, KS

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"		20'	Portland	4	
Completion	5 5/8"	2 7/8"		770'	Portland	110	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	718.0-728.0 21 PERFS		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

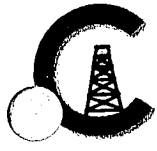
Date of First, Resumerd Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)

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 # 228249

Page 1

Invoice Date: 01/08/2009 Terms:

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

LIDIKAY 21
4-16-21
19918
01/05/09

Part Number	Description	Qty	Unit Price	Total
.124	50/50 POZ CEMENT MIX	110.00	9.7500	1072.50
.118B	PREMIUM GEL / BENTONITE	307.00	.1700	52.19
.111	GRANULATED SALT (50 #)	258.00	.3300	85.14
L110A	KOL SEAL (50# BAG)	615.00	.4200	258.30
L107A	PHENOSEAL (M) 40# BAG)	31.00	1.1500	35.65
1402	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:	1526.78	Freight:	.00	Tax:	103.81	AR	2749.59
Labor:	.00	Misc:	.00	Total:	2749.59		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK 918/338-0808 EL DORADO, KS 316/322-7022 EUREKA, KS 620/583-7664 GILLETTE, WY 307/686-4914 McALESTER, OK 918/426-7667 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 WORLAND, WY 307/347-4577



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 19918
LOCATION Ottawa KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1/5/09	7010	hidikay #21	4	16	21	FR
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
RT Enterprises			506	Fred		
MAILING ADDRESS			368	Bill		
1207 N First st			548	Arken		
CITY	STATE	ZIP CODE				
Louisburg	KS	66083				

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 778 CASING SIZE & WEIGHT 2 3/8 EUE
 CASING DEPTH 370' 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 48 BPM

REMARKS: check casing depth w/ wireline. Mix Pump 100# Premium
Gel Flush. Mix Pump 123 sks 50/50 Poz Mix Cement
2% Gel 5% Salt 5# Kal 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 BBLs Fresh water Pressure
to 750# 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		925.00
5406	1/2 of 20 mi	MILEAGE Pump Truck		36.50
5407	1/2 of Minimum	Ten Mileage		157.50
1124	110 SKS	50/50 Poz Mix Cement		1072.50
1118B	307#	Premium Gel		52.19
1111	258#	Granulated Salt		85.14
1110A	615#	Kal Seal		258.30
1107A	31#	Pheno Seal		35.65
4402	1	2 1/2" Rubber Plug		23.00
		Sub Total		2645.78
		Tax @ 6.8%		103.81
		SALES TAX ESTIMATED TOTAL		2749.59

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MAR 09 2009

CONSERVATION DIVISION
WICHITA KS

Ravin 3737

AUTHORIZATION hance

TITLE 228249

DATE _____