

A REC'D IN PROD.
DEPT. 12/18/08 from UK.
(SB N.)
Form ACO-1
September 1999
Form Must Be Typed

Handwritten signature/initials

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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: _____
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>9/19/08</u>	<u>9/22/08</u>	<u>10/22/08</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 045-21402-00-00
County: Douglas
C W/2 SW SE Sec. 1 Twp. 15 S. R. 20 East West
660 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 SE NW SW
Lease Name: Lester Kalb Well #: I-15
Field Name: Baldwin
Producing Formation: Squirrel
Elevation: Ground: NA Kelly Bushing: NA
Total Depth: 900' 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 sq cmt.

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.: _____

Handwritten: AH2-Dlg - 3/30/09

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.

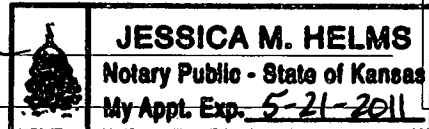
Signature: Lori Driskell

Title: Agent Date: 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-15
 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: Gamma Ray/Neutron/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED DEC 15 2008 KCC WICHITA </div>
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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"		42'	Portland	6	
Completion	5 5/8"	2 7/8"		880'	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	837.0-847.0 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 _____

Production Interval Other (Specify) _____



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 # 225886

Invoice Date: 09/24/2008 Terms:

Page 1

R.T. ENTERPRISES
1207 N. FIRST ST.
LOUISBURG KS 66053
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L KALB I-15
1-15-20
19716
09/22/08

RECEIVED
DEC 15 2008

KCC WICHITA

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)	20.00	3.65	73.00
368 CASING FOOTAGE	876.00	.00	.00
370 80 BBL VACUUM TRUCK (CEMENT)	2.00	100.00	200.00

Parts: 1569.57 Freight: .00 Tax: 98.88 AR
 Labor: .00 Misc: .00 Total: 3023.95
 Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____

BARTLESVILLE, OK 918/338-0808 ELDORADO, 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 620/920-2000 WORLAND, WY

