



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., 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 Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

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: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1069571

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> 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

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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GARNETT TRUE VALUE HOMECENTER

410 N Middle
GARNETT, KS 66032
(785) 448-7108 FAX (785) 448-7198

Merchant Copy
INVOICE
THE GARNETT TRADING COMPANY

Invoice: 10178340

Page: 1

Brand: 1808032
 Manufacturer: 02/18/11
 Invoice Date: 02/18/11
 Ship Date: 02/18/11
 Day Order: 02/08/11

Buy to: ROGAN KENT
 2828 N HOSHIO RD
 GARNETT, KS 66032

Buy to: ROGAN KENT
 (785) 448-8908 NOT FOR HOUSE USE

Customer #: 0000037 Customer PO: GARNETT, KS

ORDER	SHIP	U	UNIT	TRK	DESCRIPTION	AT PERCUSSION	PRICE	EXTENSION
880.00	840.00	P	840	CPFA	FLY ASH MIX 40 LBS PER BAG	6,000 BAG	8,000	840.00
-18.00	-18.00	P	PL	CPMP	HOUSHORN PALLAT	14,000 PL	14,000	-866.00
140.00	840.00	P	840	CPPO	CREWED FROM THROUGH 10171878 PORTLAND CEMENT-54	8,400 BAG	8,400	4854.00
FILLED BY: ORDERED BY: DATE SHIPPED: DRIVER: SHIP VIA: ANDERSON COUNTY RECEIVED COUNTY AND IN BOX COLUMN:						Balance Total: \$7788.00 Trade: 7788.00 Non-Trade: 0.00 Sales Tax: 622.88 TOTAL: 8381.88		

1 - Merchant Copy

GARNETT TRUE VALUE HOMECENTER

410 N Middle
GARNETT, KS 66032
(785) 448-7108 FAX (785) 448-7198

Merchant Copy
INVOICE
THE GARNETT TRADING COMPANY

Invoice: 10178782

Page: 1

Brand: 1807880
 Manufacturer: 02/28/11
 Invoice Date: 02/28/11
 Ship Date: 02/28/11
 Day Order: 02/20/11

Buy to: ROGAN KENT
 2828 N HOSHIO RD
 GARNETT, KS 66032

Buy to: GARNETT
 (785) 448-8908 NOT FOR HOUSE USE

Customer #: 0000037 Customer PO: GARNETT, KS

ORDER	SHIP	U	UNIT	TRK	DESCRIPTION	AT PERCUSSION	PRICE	EXTENSION
840.00	840.00	P	840	CPFA	FLY ASH MIX 40 LBS PER BAG	6,000 BAG	8,000	840.00
-4.00	-4.00	P	PL	CPMP	HOUSHORN PALLAT	14,000 PL	14,000	-70.00
840.00	840.00	P	840	CPPO	CREWED FROM THROUGH 10171878 PORTLAND CEMENT-54	8,400 BAG	8,400	4824.00
FILLED BY: ORDERED BY: DATE SHIPPED: DRIVER: SHIP VIA: ANDERSON COUNTY RECEIVED COUNTY AND IN BOX COLUMN:						Balance Total: 8788.00 Trade: 7828.00 Non-Trade: 0.00 Sales Tax: 916.16 TOTAL: 8744.16		

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**R.J. Enterprise
22082 NE Neosho RD
Garnett, KS 66032**

Kent # 24

Start 9-8-2011

Finish 9-13-2011

4	soil	4	
12	clay	16	
30	lime	46	
76	shale	122	
9	lime	131	
5	shale	136	
42	lime	178	
7	shale	185	set 20' 7"
25	lime	210	ran 684.7' 2 7/8
5	shale	215	cemented to surface 72 sxs
17	lime	232	
170	shale	402	
15	lime	417	
58	shale	475	
30	lime	505	
25	shale	530	
9	lime	539	
19	shale	558	
7	lime	565	
10	shale	575	
6	lime	581	
11	shale	592	
6	sandy shale	598	Odor
13	sandy shale	611	Good show
4	Bkn sand	615	Good show
8	sandy shale	623	Good show
13	Oil sand	636	Good show
4	Bkn sand	640	Show
4	Dk sandy shale	644	
47	shale	691	T.D.