



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

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: _____



1070293

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
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ 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
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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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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R.J. Enterprise
22808 NE Neosho RD
Garnett, KS 66032

Ware 33-A

Start 10-18-2011

Finish 10-19-2011

2	soil	2	
3	clay rock	5	
30	lime	35	
164	shale	199	
30	lime	229	
75	shale	304	
8	lime	312	
6	shale	318	set 20' 7"
40	lime	358	ran 844.9' 2 7/8
8	shale	366	cemented to surface 90 sxs
24	lime	390	
5	shale	395	
16	lime	411	
169	shale	580	
17	lime	597	
58	shale	655	
29	lime	684	
23	shale	707	
14	lime	721	
14	shale	735	
8	lime	743	
10	shale	753	
7	lime	760	
24	shale	784	
3	sandy shale	787	odor
21	Bkn sand	808	good show
2	Dk sand	810	
41	shale	851	T.D.

GARNETT TRUE VALUE HOMECENTER

410 N. Maple
Garnett, KS 66032
(785) 448-7108 FAX (785) 448-7138

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INVOICE

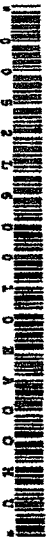
THE GARNETT TRADING COMPANY

Invoice: 10177291

Page: 1
Special: Time: 08/28/18
Invoice Date: 10/11/18
Invoice Date: 10/11/18
Date Ship: 11/09/18

Buyer: JIM
Buyer: ROGER KENT
Buyer: 3202 NE WESBRO RD
Buyer: GARNETT, MO 65024
Ship To: ROGER KENT
Ship To: 3202 NE WESBRO RD
Ship To: GARNETT, MO 65024
Customer #: 0006857

ORDER	SHIP	LT	UM	TRNG	DESCRIPTION	AM	PRICE	EXTENSION
17.00	P. PL.			CPMP	MCKNARCH PALLET	19,000.00	18.0000	342.00
830.00	P. BAG			CPMP	PORTLAND CEMENT 944	8,480.00	8.4800	448.70
FILLED BY: CHECKED BY: DATE SHIPPED: DRIVER:						Sales Total		4784.70
SHIP VIA: ANNEBROCK COUNTY HAZARDOUS COMMODITIES AND INCOGNITION:						Non-Taxable		4784.70
X						Tax #		0.00
						Sales tax		970.87
						TOTAL		\$6188.87



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INVOICE

THE GARNETT TRADING COMPANY

Invoice: 10177313

Page: 1
Special: Time: 10/17/18
Invoice Date: 10/11/18
Invoice Date: 10/11/18
Date Ship: 11/09/18

Buyer: JIM
Buyer: ROGER KENT
Buyer: 3202 NE WESBRO RD
Buyer: GARNETT, MO 65024
Ship To: ROGER KENT
Ship To: 3202 NE WESBRO RD
Ship To: GARNETT, MO 65024
Customer #: 0006857

ORDER	SHIP	LT	UM	TRNG	DESCRIPTION	AM	PRICE	EXTENSION
880.00	P. BAG			CPMP	PLY ASP. MIX 80 LBS PER BAG	0,090.00	0.0900	81.00
1.00	P. PL.			CPMP	MCKNARCH PALLET	19,000.00	18.0000	342.00
FILLED BY: CHECKED BY: DATE SHIPPED: DRIVER:						Sales Total		342.00
SHIP VIA: ANNEBROCK COUNTY HAZARDOUS COMMODITIES AND INCOGNITION:						Non-Taxable		342.00
X						Tax #		0.00
						Sales tax		887.18
						TOTAL		\$3982.38



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