



KANSAS CORPORATION COMMISSION 1071560
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

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: _____



1071560

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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R.J. Enterprise
22808 NE Neosho RD
Garnett, KS 66032

Pugsley 7-I

Start 10-31-2011

Finish 11-1-2011

2	soil	2	
3	clay rock	5	
65	lime	70	
155	shale	225	
32	lime	257	
72	shale	329	
9	lime	338	
5	shale	343	set 20' 7"
41	lime	384	ran 872.2' 2 7/8
20	shale	404	cemented to surface 90 sxs
14	lime	418	
6	shale	424	
18	lime	442	
168	shale	610	
21	lime	631	
55	shale	686	
27	lime	713	
23	shale	736	
16	lime	752	
12	shale	764	
7	lime	771	
10	shale	781	
8	lime	789	
11	shale	800	
8	sandy shale	808	odor
5	sandy shale	813	show
6	Bkn sand	819	good show
3	sandy shale	822	good show
8	Bkn sand	830	good show
6	sandy shale	836	good show
13	Bkn sand	849	good show
6	Dk sand	855	good show
25	shale	880	T.D.

GARNETT TRUE VALUE HOMECENTER

410 N Maple
Garnett, KS 66032
(785) 448-7108 FAX (785) 448-7135

Merchant Copy
INVOICE
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MERCHANDISE AT ALL TIMES

Invoice: 10177869

Page: 1
Special :
Invoices :
Ship To: ROGERS KENT
22858 NE NICHOLS RD
GARNETT, KS 66032
Ship To: ROGERS KENT
(785) 448-8985 NOT FOR HOUSE USE
Customer #: 0000267
Order #: 10177869
Date: 1/10/11
Ship Date: 1/21/11
Invoice Date: 1/21/11
Due Date: 1/28/11

ORDER SHIP L LUM ITEM DESCRIPTION QUANTITY UNIT PRICE EXTENSION
28.00 28.00 P BAG CPFC PORTLAND CEMENT-94# 84900 Pcs 84600 285.72

ORDER	SHIP L LUM	ITEM	DESCRIPTION	QUANTITY	UNIT	PRICE	EXTENSION	
28.00	28.00 P BAG	CPFC	PORTLAND CEMENT-94#	84900 Pcs	84600	285.72		
							Sales Total	\$285.72
							Taxable	285.72
							Non-Taxable	0.00
							Sales tax	22.08
							TOTAL	\$327.78

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Garnett, KS 66032
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Invoice: 10177714

Page: 1
Special :
Invoices :
Ship To: ROGERS KENT
22858 NE NICHOLS RD
GARNETT, KS 66032
Ship To: ROGERS KENT
(785) 448-8985 NOT FOR HOUSE USE
Customer #: 0000267
Order #: 10177714
Date: 1/10/11
Ship Date: 1/21/11
Invoice Date: 1/21/11
Due Date: 1/28/11

ORDER SHIP L LUM ITEM DESCRIPTION QUANTITY UNIT PRICE EXTENSION
860.00 860.00 P BAG CPFA FLYASH MIX 80 LBS PER BAG 8.0000 6720.00
8.00 8.00 P PL MONARCH PALLET 15.0000 P 15.0000 120.00
840.00 840.00 P BAG CPFC PORTLAND CEMENT-94# 84900 Pcs 84600 4894.80

ORDER	SHIP L LUM	ITEM	DESCRIPTION	QUANTITY	UNIT	PRICE	EXTENSION	
860.00	860.00 P BAG	CPFA	FLYASH MIX 80 LBS PER BAG	8.0000	P	8.0000	6720.00	
8.00	8.00 P PL	CPFA	MONARCH PALLET	15.0000	P	15.0000	120.00	
840.00	840.00 P BAG	CPFC	PORTLAND CEMENT-94#	84900 Pcs	84600	84600	4894.80	
							Sales Total	\$8225.00
							Taxable	8225.00
							Non-Taxable	0.00
							Sales tax	625.95
							TOTAL	\$8850.95

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