



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: _____

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

Pugsley 11-1

Start 11-16-2012

Finish 11-19-2012

3	soil	3	
3	clay/rock	6	
53	lime	59	
158	shale	217	
36	lime	253	
31	shale	284	
3	lime	287	
36	shale	323	set 20' 7"
110	lime	433	ran 852.2' 2 7/8
168	shale	601	cemented to surface 84 sxs
23	lime	624	
60	shale	684	
27	lime	711	
23	shale	734	
13	lime	747	
14	shale	761	
7	lime	768	
11	shale	779	
10	lime	789	
18	shale	807	
6	sandy shale	813	
21	Bkn sand	834	good show
6	Dk sand	840	show
18	shale	858	T.D.

GARNETT TRUE VALUE HOMECENTER

410 N Maple
Garnett, KS 66032
(785) 448-7106 FAX (785) 448-7135

Statement Copy

INVOICE

PLEASE REFER TO INVOICE NUMBER
ON ALL CORRESPONDENCE

Invoice: 10191163

Special : Time: 12:56:35
Instructions : Ship Date: 10/09/12
Sole rep #: JIM Invoice Date: 10/09/12
Act rep code: Due Date: 11/08/12

Sold To: ROGER KENT Ship To: ROGER KENT
22082 NE NEOSHO RD (785) 448-6965 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-6965

Customer #: 0000357 Order By:

874 1120

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	All Price/Um	PRICE	EXTENSION
80.00	80.00	PL	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	6.2800	6.2800	503.20
2.00	2.00	PL	PL	CPMP	MONARCH PALLET	15.0000	15.0000	30.00

FILLED BY		CHECKED BY	DATE SHIPPED	DRIVER
SHIP VIA		ANDERSON COUNTY		
		RECEIVED COMPLETE AND IN GOOD CONDITION		
Taxable		533.20		
Non-taxable		0.00		
Sales tax		41.59		
TOTAL		\$574.79		

3 - Statement Copy



GARNETT TRUE VALUE HOMECENTER

410 N Maple
Garnett, KS 66032
(785) 448-7106 FAX (785) 448-7135

Merchant Copy
INVOICE

THIS COPY MUST BE RETURNED AT
RECEIPT AT ALL TIMES

Invoice: 10191695

Special : Time: 16:01:58
Instructions : Ship Date: 10/23/12
Sole rep #: MIKE Invoice Date: 10/23/12
Act rep code: Due Date: 11/08/12

Sold To: ROGER KENT Ship To: ROGER KENT
22082 NE NEOSHO RD (785) 448-6965 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-6965

Customer #: 0000357 Order By:

874 1101

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	All Price/Um	PRICE	EXTENSION
560.00	560.00	PL	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	6.2800	6.2800	3522.40
640.00	640.00	PL	BAG	CPPC	PORTLAND CEMENT-94#	8.9900	8.9900	4854.60

FILLED BY		CHECKED BY	DATE SHIPPED	DRIVER
SHIP VIA		ANDERSON COUNTY		
		RECEIVED COMPLETE AND IN GOOD CONDITION		
Taxable		8377.00		
Non-taxable		0.00		
Sales tax		653.41		
TOTAL		\$9030.41		

1 - Merchant Copy

