

Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1222289

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM

		00.000			
WELL	HISTORY	- DESCF	RIPTION	OF WE	LL & LEASE

OPERATOR: License #		API No. 15
Name:		Spot Description:
Address 1:		
Address 2:		Feet from Dorth / South Line of Section
City: State:	: Zip:+	Feet from East / West Line of Section
Contact Person:		Footages Calculated from Nearest Outside Section Corner:
Phone: ()		
CONTRACTOR: License #		GPS Location: Lat:, Long:
Name:		(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84
Purchaser:		County:
Designate Type of Completion:		Lease Name: Well #:
New Well Re-Ent	try Workover	Field Name:
		Producing Formation:
		Elevation: Ground: Kelly Bushing:
Gas D&A		Total Vertical Depth: Plug Back Total Depth:
	GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core Ex	xpl., etc.):	Multiple Stage Cementing Collar Used?
		If yes, show depth set: Feet
If Workover/Re-entry: Old Well Info as		If Alternate II completion, cement circulated from:
		feet depth to:w/sx cmt.
	Original Total Depth:	
	Conv. to ENHR	Drilling Fluid Management Plan
Plug Back	Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Pe	ermit #:	Chloride content: ppm Fluid volume: bbls
	ermit #:	Dewatering method used:
	ermit #:	Location of fluid disposal if hauled offsite:
	ermit #:	
	ermit #:	Operator Name:
		Lease Name: License #:
Spud Date or Date Reache	ed TD Completion Date or	Quarter Sec Twp S. R East West
Recompletion Date	Recompletion Date	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
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date:

	Page Two	1222289
Operator Name:	Lease Name:	Well #:
Sec TwpS. R □ East □ West	County:	
	ail all aaraa Danart all fi	nal appiae of drill atoms toots siving interval tootad, time tool

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken (Attach Additional She	aets)	Yes No	L	.og Formatic	on (Top), Depth an	d Datum	Sample
Samples Sent to Geolog		Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING Report all strings set-c			on, 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 / SQL	JEEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and Pe	ercent Additives	
Protect Casing Plug Back TD							
Plug Off Zone							
Did you perform a hydraulic	fracturing treatment of	on this well?		Yes	No (If No, skij	o questions 2 an	d 3)
	0	raulic fracturing treatment ex	ceed 350,000 gallons			o question 3)	/

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?

Shots Per Foot		PERFORATION Specify Fo	I RECOP	RD - Bridge P Each Interval F	lugs Set/Typ Perforated	e			ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Si	ze:	Set At:		Packe	r At:	Liner F		No	
Date of First, Resumed	d Product	ion, SWD or ENH	٦.	Producing N	lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
			1							
DISPOSIT	ION OF (GAS:			METHOD	OF COMPLE	TION:		PRODUCTION INT	ERVAL:
Vented Sol	d 🗌	Used on Lease		Open Hole	Perf.	Dually (Submit)		Commingled (Submit ACO-4)		
(If vented, Su	ıbmit ACC	D-18.)		Other (Specify)						

Yes

No

(If No, fill out Page Three of the ACO-1)

R J Enterprises 22082 NE Neosho Rd Garnett, KS 66032

Sobba 10-I

1	soil	1	
5	clay/rock	6	
25	lime	31	
43	shale	74	
9	lime	83	
115	shale	198	
29	lime	227	
35	shale	262	
9	lime	271	
20	shale	291	
109	lime	400	
188	shale	588	
<i>10</i>	lime	598	
61	shale	659	
28	lime	687	
21	shale	708	
9	lime	717	
13	shale	730	
11	lime	741	
8	shale	749	
6	lime	755	
10	shale	765	
10	sandy shale	775	show
11	Bkn sand	786	good show
31	Shale	817	T.D.

Start 6-3-14

Finish 6-6-14

set 20'7" ran 811.2 of 2 % cemented to surface 84 sxs

¥=					8TH 101 T	EXTENSION	135.00	\$3102.30	237.33	\$3339.63
Merchant Copy INVOICE THIS COPY MUST REMANAT MERCHANT AT ALL TIMES!	11485	14:19:31 05/27/14 05/27/14 06/08/14			1 Dominor		15,000 900 00 00 00 00 00 00 00 00 00 00 00	 Sales total	02.30 0.00 Sales tax	OTAL
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GARNETT TRUE VALUE HOMECENTER 410 N Maple Garnett, KS 66032 (785) 448-7106 FAX (785) 448-7135			Stile To: ROGER KENT (785) 448-6995 NOT FOR HOUSE USE	(785) 448-6985	Customer PO:	DESCRIPTION	PORTLAND CEMENT-94#	CHECKED BY DATE SHIPPED DRIVER	ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION MON-LEAX Non-Leax	1 - Merchant Copy
GARNETT TRUI Ga (785) 448-7-	Page: 1	Special : Instructions :	Said To: ROGER KENT 22082 NE NEOSHO RD	GARNET 1, NS 66032	Customer #: 0000357	CLUD I I IAA I ITCAAN	6 6		HIP VIA	
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Merchant Copy INVOICE THEORY WAST RAMMAT WERCHANT RALL THREE	Invoice: 10211450	Time 08:59:48 Step Date: 05/27/14 Invoice Date: 05/27/14				popringol T138	6.5900 7.390 7.9900 7.39 20.9900 7.39 21900 7.39 1.3900 1.39 1.3900 1.39 112,4900 1.39 15,400 12.49 2.3900 2.39 2.3900 2.39	Sales total \$83.10	83.10 0.00 Sales tax	TOTAL
	Invoice: 10211450		Abar reproces. Unit users. VOVIDI 14 Ship To: ROGER ICENT (785) 448-6955 NOT FOR HOUSE USE	(785) 448-6995	Order By:	Alt Princell Jonn DBICE EVTENISION	6.9900 km 6.9900 km 7.9900 cm 7.9900 cm 20.9900 cm 7.9900 cm 21.9900 cm 2.1900 cm 1.9900 cm 1.9900 cm 1.12,4900 cm 1.9900 cm 1.12,4900 cm 1.9900 cm 1.12,4900 cm 1.9900 cm 1.13900 cm 1.9900 cm 1.12,4900 cm 1.9900 cm 1.12,4900 cm 1.5,4900 cm 1.12,4900 cm 1.9900 cm 2.9900 cm 2.9900 cm	DATE SHIPPED DRIVER Sales total	Auf acodocommon 23.10 Non-toxable 83.10 Non-toxable 0.00 Sales tax	TOTAL
GARNETT TRUE VALUE HOMECENTER Merchant Copy 410 N Maple Annett, KS 66032 (785) 448-7106 FAX (785) 448-7135 INVOICE	Page: 1 Invoice: 10211450		VOLVILIN AND TO THE AND THE ADDRESS (TOTE) AND THE ADDRESS (TOTE) ADDRESS ADDR	20000		popringol T138	291302 1602 Viryl Protectant 6 9900 ts, 6 5900 13.98 164776 Logand 1262AL Jug 7 9900 ts, 7 1900 7 99 164776 Logand 1262AL Jug 7 9900 ts, 7 1900 7 99 164776 Logand 1263AL Jug 7 9900 ts, 7 1900 7 99 16957 2 Pir RED Cooler 2 0.9900 ts, 2 1900 2 19 25752 6 PK Rewideable Marker 2 1900 ts, 1 1990 1 199 2755 12 K Small Binder Clips 1 2,900 ts, 1 2,900 1 39 1111611 Pio LG ANG Bioon 12,490 ts, 1 12,400 1 2900 111161 Pio LG ANG Bioon 15,490 ts, 1 12,400 1 2,900 821627 Hand & Nail Brush 2.9900 ts, 2 2900 ts, 1 2,49	DRIVER Sales total	(ooptication	1 - Merchant Copy Weight: 6 lbs. Total