

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1348474
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

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
- Plug Back Conv. to GSW Conv. to Producer
- 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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

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

1348474

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

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

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 <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 List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

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				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
--	---	---

HAMMERSON CORPORATION

PO BOX 189
GAS, KS 66742

Invoice

Date	Invoice #
12/18/2016	10521-10522

Bill To
R.J. ENERGY LLC 22082 NE NEOSHO RD GARNETT, KS 66032

P.O. No.	Terms	Project
WELL BADER 19	Due on receipt	

Quantity	Description	Rate	Amount
110	WELL MUD (\$8.00 PER SACK)	8.00	880.00
	COFFEY COUNTY SALES TAX (WELL MUD)	6.50%	57.20
1.5	TRUCKING (\$50 PER HOUR)	50.00	75.00
	COFFEY COUNTY SALES TAX	6.50%	4.88

Thank you for your business.

Total

\$1,017.08



GARNETT TRUE VALUE HOMECENTER

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

Statement Copy
INVOICE
PLEASE PRINT TO VERIFY ITEMS
ON ALL CREDIT PURCHASES

Page: 1

Invoice: 10235739

Serial :
Description :
Sales rep : MIRE
Sales To: ROGER KENT
2582 NE HICSHO RD
GARNETT, KS 66032
Customer #: 0000057

Buy Date: 04/04/15
Invoice Date: 04/04/15
Ship Date: 05/08/15

Buy To: ROGER KENT
(785) 448-8995 NOT FOR HOUSE USE
(785) 448-8995

Customer PO: 034015

ORDER#	SHIP	L	UM	ITEM#	DESCRIPTION	AM	PRICE	EXTENSION
18 00	18 00 P	PL	CRAP	MONARCH-PALLET	18.0000 m	11.4900	206.80	
540 00	540 00 P	BA0	CPYC	PORTLAND CEMENT 94#	11.4900 94#	11.4900	131.40	
ORDERED BY: GARDNER, DAVE DATE ORDERED: 03/27/15 ORDERED BY: ANDERSON, CORY DATE ORDERED: 04/02/15 ORDERED BY: WILSON, CHARLES DATE ORDERED: 04/02/15						Subtotal	\$1482.80	
						Tax	519.41	
						TOTAL	\$1992.21	

3 - Statement Copy



GARNETT TRUE VALUE HOMECENTER

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

Statement Copy
CREDIT INVOICE
PLEASE PRINT TO VERIFY ITEMS
ON ALL CREDIT PURCHASES

Page: 1

Invoice: 10235740

Serial :
Description :
Sales rep : MIRE
Sales To: ROGER KENT
2582 NE HICSHO RD
GARNETT, KS 66032
Customer #: 0000057

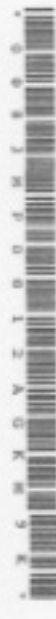
Buy Date: 04/04/15
Invoice Date: 04/04/15
Ship Date: 05/08/15

Buy To: ROGER KENT
(785) 448-8995 NOT FOR HOUSE USE
(785) 448-8995

Customer PO: 034015

ORDER#	SHIP	L	UM	ITEM#	DESCRIPTION	AM	PRICE	EXTENSION
-21 00	-21 00 P	PL	CRAP	MONARCH-PALLET	18.0000 m	11.4900	-206.80	
ORDERED BY: GARDNER, DAVE DATE ORDERED: 03/27/15 ORDERED BY: ANDERSON, CORY DATE ORDERED: 04/02/15 ORDERED BY: WILSON, CHARLES DATE ORDERED: 04/02/15						Subtotal	\$-206.80	
						Tax	-21.88	
						TOTAL	\$-228.68	

3 - Statement Copy





RJ Energy

22082 NE Neosho Rd Garnett, Kansas 66032

Bader 19

			Start 12-9-16
			Finish 12-13-16
4	soil	4	
27	clay/gravel	31	
100	shale	131	
13	lime	144	
10	shale	154	
84	lime	238	
59	shale	297	
16	lime	313	set 40' of 7" w/10sxs
13	shale	326	ran 1016.8' of 2 7/8
109	lime	435	cemented to surface 110sxs
37	shale	472	
54	lime	526	
14	shale	540	
47	lime	587	
171	shale	758	
25	lime	783	
71	shale	854	
27	lime	881	
16	shale	897	
7	lime	904	
15	shale	919	
7	lime	926	
7	shale	933	
7	lime	940	
31	shale	971	
2	sandy shale	973	show
10	Bkn sand	983	good show
39	shale	1022	T.D.