Confidentiality Requested:

Yes No

### Kansas Corporation Commission Oil & Gas Conservation Division

1366180

Form ACO-1 November 2016 Form must be Typed Form must be Signed All blanks must be Filled

## WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No.:
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
☐ Oil ☐ WSW ☐ SWD	Producing Formation:
Gas DH EOR	Elevation: Ground: Kelly Bushing:
	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
☐ Deepening ☐ Re-perf. ☐ Conv. to EOR ☐ Conv. to SWD	Drilling Fluid Management Plan
☐ Plug Back ☐ Liner ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)
Down't #	Chloride content:ppm Fluid volume: bbls
☐ Commingled Permit #:   Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid diagonal if hould affeite.
EOR Permit #:	Location of fluid disposal if hauled offsite:
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R
Recompletion Date  Recompletion Date	County: Permit #:

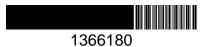
#### **AFFIDAVIT**

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 ☐ Drill Stem Tests Received				
Geologist Report / Mud Logs Received				
UIC Distribution				
ALT I II III Approved by: Date:				

Page Two



Operator Name:				Lease Name	e:			_ Well #:	
Sec Twp	S. R.	Eas	t West	County:					
and flow rates if gas	wing and shu to surface te	t-in pressures, wh st, along with final	ether shut-in pre chart(s). Attach	essure reached s extra sheet if m	static I nore sp	evel, hydrosta bace is needed	tic pressures, bot d.	tom hole tempe	val tested, time tool rature, fluid recovery,  Digital electronic log
files must be submit								0	0 0
Drill Stem Tests Take			Yes No		_ Log	g Formatic	on (Top), Depth a		Sample
Samples Sent to Ge	ological Surv	ey	Yes No	N	Name			Тор	Datum
Cores Taken Electric Log Run Geolgist Report / Mu List All E. Logs Run:	_		Yes No Yes No Yes No						
		Rep	CASING port all strings set-c	RECORD	New , interm	Used	on, etc.		
Purpose of String			ize Casing et (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
	5.1		ot (III 0.5.)	200.711.		Борит	Comont	0000	/ Iddilivos
			ADDITIONAL	CEMENTING /	SQUE	EZE RECORD			
Purpose: Perforate		epth Typ Bottom	e of Cement	# Sacks Used	b		Type and F	Percent Additives	
Protect Casing	9								
Plug Off Zone									
. 5:1									(0)
<ol> <li>Did you perform a h</li> <li>Does the volume of</li> </ol>	-	_		t exceed 350,000	gallons	Yes Yes		ip questions 2 an ip question 3)	d 3)
3. Was the hydraulic fra		-	=		-	Yes	= '	out Page Three o	of the ACO-1)
Date of first Production	n/Injection or Re	esumed Production/	Producing Meth	nod:					
Injection:			Flowing	Pumping	Ga	as Lift C	other (Explain)		
Estimated Production Per 24 Hours	1	Oil Bbls.	Gas	Mcf	Water	BI	bls. (	Gas-Oil Ratio	Gravity
DISPOSIT	TION OF GAS:		N	METHOD OF COM	//PLETI	ON:			N INTERVAL: Bottom
Vented So		on Lease	Open Hole		ually C		nmingled mit ACO-4)	Тор	Bottom
(If vented, S	Submit ACO-18.)			(00		(Cabi	7111.7100 1)		
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At		Acid,	Fracture, Shot, Cei (Amount and Kind	menting Squeeze of of Material Used)	Record
TUBING RECORD:	Size:	Set At		Packer At:					
	J.20.	OU! AI	-	. 20.0171					

Form	ACO1 - Well Completion
Operator	Kent, Roger dba R J Enterprises
Well Name	MEATS 3-A
Doc ID	1366180

### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9.875	7	17	40	portland	10	
Production	5.625	2.875	6.5	988	portland	120	



# RJ Energy

22082 NE Neosho Rd Garnett. Kansas 66032

## Meats 3-A

				Start	6-2-17
3	soil	3		Finish	6-6-17
25	clay/gravel	28			
144	shale	172			
20	lime	192			
3	shale	195			
30	lime	225			
66	shale	291			
82	lime	373			
29	shale	402			
9	lime	411		. 402	6.722 /10
5	shale	416		set 40° ( Ran 98	of 7" w/10sxs
5	$\mathbf{lime}$	421			ed to surface 120sxs
19	shale	440		00111011	
73	$\mathbf{lime}$	513			
6	shale	519			
51	lime	<b>570</b>			
162	shale	732			
33	lime	<b>765</b>			
55	shale	820			
27	lime	847			
37	shale	884			
28	lime	912			
8	shale	920			
5	lime	925			
4	shale	929			
4	lime	933			
23	shale	956			
4	sandy shale	960	odor		
9	Bkn sand	969	good sho	w	
24	shale	993	T.D.		

### HAMMERSON CORPORATION

PO BOX 189 GAS, KS 66742

## Invoice

Date	Invoice #
6/12/2017	10913

Bill To

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

P.O. No.	Terms	Project
WELL - MEATS 3A	Due on receipt	

Quantity	Description	Rate	Amount
	WELL MUD (\$8.00 PER SACK) COFFEY COUNTY SALES TAX (WELL MUD) TRUCKING (\$50 PER HOUR) COFFEY COUNTY SALES TAX	8.00 6.50% 50.00 6.50%	960.0 62.4 75.0 4.8
ık you for you	ır husiness		

Total

\$1,102.28