

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 3728
 Name: R. J. Enterprises
 Address: 1203 E. 4th Avenue
 City/State/Zip: Garnett, KS 66032
 Purchaser: n/a
 Operator Contact Person: Roger Kent
 Phone: (785) 448-6963 or 448-6995
 Contractor: Name: Kimzey Drilling Company
33030
 License:

Wellsite Geologist:

Designate Type of Completion:

New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No.
 Dual Completion Docket No.
 Other (SWD or Enhr.?) Docket No.

3-15-03 3-23-03 3-24-03
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date

API No. 15- _____
 County: Linn

NE NW NE Sec. 19 Twp. 22 S. R. 22 East West
 4895 feet from S / N (circle one) Line of Section
 1647 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Weber Well #: 2-W

Field Name: Blue Mound

Producing Formation: Bartlesville

Elevation: Ground: n/a Kelly Bushing: n/a

Total Depth: 647 Plug Back Total Depth: n/a

Amount of Surface Pipe Set and Cemented at 20' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate If completion, cement circulated from 0

feet depth to 635 w/ 60 sx cmt.

Drilling Fluid Management Plan Drilled with fresh
 (Data must be collected from the Reserve Pit) water

Chloride content none ppm Fluid volume 140 bbls

Dewatering method used

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: _____ License No. _____

Quarter Sec. Twp. S. R. East West

County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Roger Kent
 Title: Owner/Operator Date: 5-20-03

Subscribed and sworn to before me this 20th day of May, 2003,
 DONNA MANDA
 NOTARY PUBLIC
 STATE OF KANSAS
 Notary Public: Donna Appt. Exp. 3-16-07

Date Commission Expires: March 16, 2007

KCC Office Use ONLY	
_____ Letter of Confidentiality Attached	
If Denied, Yes <input type="checkbox"/> Date: _____	
_____ Wireline Log Received	
_____ Geologist Report Received	
_____ URC Distribution	

Operator Name: R. J. Enterprises Lease Name: Weber Well #: 2-W
 Sec. 19 Top. 22 S. R. 22 East West County: Linn

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stem tests giving interval tested, fine 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 copy of all Electric Well Log Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum Name Open Hole	<input type="checkbox"/> Sample Top Datum
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	See attached	
Cores Taken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Electric Log Run (Submit Copy)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E. Log Run:			

CASING RECORD <input type="checkbox"/> New <input checked="" 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
Surface	10-1/4	7"		20'	Portland	6	
Tubing	5-5/8"	2-7/8"		635'	Portland Pozmix	60	

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 Plug/ Set/Type Specify Footage of Each Interval Perforated	Add, Pressure, Shot, Cement Squeeze Record (Amount and Kind of Material Used)		Depth

TUBING RECORD	Size	Set At	Perforate At	Line Run	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enr.	Producing Method	<input type="checkbox"/> Flowing	<input type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift	<input type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (Vented, Sold ACO-18)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dual Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	