

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

Form ACO-1  
September 1999  
Form Must Be Typed

Operator: License # 31191  
Name: R&B Oil & Gas  
Address: PO Box 195  
City/State/Zip: Attica, Kansas 67009-0195  
Purchaser: AQUILA  
Operator Contact Person: Randy Newberry  
Phone: (620) 254-7251  
Contractor: Name: Duke Drilling Co., Inc.  
License: 5929  
Wellsite Geologist: Tim Pierce  
Designate Type of Completion:  
☒ New Well ☐ Re-Entry ☐ Workover  
☐ Oil ☐ SWD ☐ SIOW ☐ 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. \_\_\_\_\_  
05-09-01 05-12-01 5-29-01  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

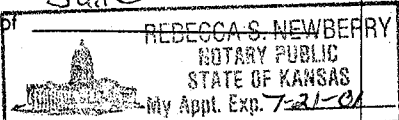
API No. 15 - 095-21788-0000  
County: Kingman County, Kansas  
C-W/2 NW NW Sec. 12 Twp. 30 S. R. 9 ☐ East ☒ West  
600 feet from S N (circle one) Line of Section  
310 feet from E W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Adelhardt Well #: 2  
Field Name: Spivey-Grabs-Basil  
Producing Formation: Indian Cave  
Elevation: Ground: 1625' Kelly Bushing: 1633'  
Total Depth: 2500' Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 231 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 ALT 1 JZ 11/13/02  
(Data must be collected from the Reserve Pit)  
Chloride content \_\_\_\_\_ ppm Fluid volume 240 bbls  
Dewatering method used Hauled Off  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: Jody Oil & Gas Corp  
Lease Name: Sanders 3 License No.: 3288  
Quarter SW Sec. 20 Twp. 31 S. R. 8 ☐ East ☒ West  
County: Harper 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: Randy Newberry  
Title: President Date: 6-22-01  
Subscribed and sworn to before me this 22nd day of June  
92001  
Notary Public: Rebecca S. Newberry  
Notary Commission Expires: 7-21-2001



**KCC Office Use ONLY**

☐ Letter of Confidentiality Attached  
☐ If Denied, Yes ☐ Date: \_\_\_\_\_  
☒ Wireline Log Received  
☐ Geologist Report Received  
☐ UIC Distribution

Operator Name: R&B Oil & Gas Lease Name: Adelhardt Well #: 2  
 Sec. 12 Twp. 30 S. R. 9 ☐ East ☒ West County: Kingman County, Kansas

**INSTRUCTIONS:** Show important tops and base 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. Attach copy of all electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☐ Yes ☒ No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No  
 (Submit Copy)

Submit All E. Logs Run:

Radiation Guard Log  
 Sonic Cement Bond Log

☒ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
Indian Cave	2360	727

### CASING RECORD ☐ New ☐ 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	# Sacs Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	23#	231'	60/40 Poz	200	3%cc 2%gel
Production	7-7/8"	4-1/2"	10.5#	2499'	50/50 Poz	100	10%salt

### 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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	2370 to 2373	Natural	

IBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8	2372			
Time of First, Resumed Production, SWD or Enhr.	Producing Method				
6-1-01	<input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
Limited Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NONE	250			

Position of Gas: **METHOD OF COMPLETION** Production Interval: **2370'-2373'**  
 Vented ☒ Sold ☐ Used on Lease ☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled  
 (If vented, Submit ACO-18.) ☐ Other (Specify) \_\_\_\_\_