

ORIGINAL

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 3728

Name: R. J. Enterprises

Address 1203 East 4th Avenue

City/State/Zip Garnett, KS 66032

Purchaser: Plains Marketing, L.P.

Operator Contact Person: Roger Kent

Phone (785) 448-6995 or 448-6963

Contractor: Name: R. J. Enterprises

License: 3728

Wellsite Geologist: none

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: _____

Comp. Date _____ Old Total Depth _____

Deepening _____ Re-perf. _____ Conv. to In _____

Plug Back _____ PSTD _____

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (SWD or Inj?) _____ Docket No. _____

10-23-00 10-25-00

Spud Date Date Reached TD Completion Date

API NO. 15- 107-236240000

County Linn

Ap NW NE NE-SW Sec. 18 Twp. 22S Rge. 22 E W

2475 Feet from S (circle one) Line of Section

3235 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)

Lease Name Cox Well # 1-A

Field Name Blue Mound

Producing Formation Bartlesville

Elevation: Ground n/a KB _____

Total Depth 670 PSTD _____

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 II completion, cement circulated from 0

feet depth to 670 w/ 90 sx cmt.

Drilling Fluid Management Plan Alt 2 KJR 8/23/07
(Data must be collected from the Reserve Pit)

Dried with fresh water

Chloride content none ppm Fluid volume 140 bbls

Deviation method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. Twp. S Rng. E/W

County _____ Docket No. _____

CONSERVATION DIVISION
WICHITA, KS

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 02 2001

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 on 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 Date 1-3-01

Subscribed and sworn to before me this 3rd day of January, 19x2001

Notary Public Donna Manda

Date Commission Expires March 16, 2003

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input type="checkbox"/>	SWD/Rep	<input type="checkbox"/> NGPA
<input type="checkbox"/>	Plug	<input type="checkbox"/> Other
(Specify)		

DONNA MANDA KCC
NOTARY PUBLIC KGS
STATE OF KANSAS
My Appt. Exp. 3-16-03

Operator Name R. J. Enterprises Lease Name Cox Well # 1-A
 Sec. 18 Twp. 22S Rge. 22 East County Linn
 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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

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
Surface	8-5/8	6-1/4		20'		5	
Tubing	5-7/8	2-7/8		663.20		90	

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
21	630.0 - 640.0	See attached

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2-7/8	663.20		

Date of First, Resumed Production, SUD or Inj.	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
	none n/a n/a

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.) no gas

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

ORIGINAL

R.J. Enterprises
Cox 1A

	started 10-23-00		
	Complete 10-25-00		
	5	Top	5
	44	Lime	49
set 20' of 6 1/4 and	10	Shale	59
cement to surface	17	Lime	76
	4	Shale	80
	17	Lime	97
	3	Shale	100
	5	Lime	105
	169	Shale	274
	9	Lime	283
	5	Shale	288
	12	Lime	300
	33	Shale	333
	3	Lime	337
	16	Shale	353
	14	Lime	367
	12	Shale	379
	5	Lime	384
	32	Shale	416
	24	Lime	440
	10	Shale	450
	5	Lime	455
	98	Shale	553
	2	Lime	555
	71	Shale	626
	5	Bk. Sand	631
	12	Oil Sand	643
	2	Soft Shale	645
	1	Lime	646
	24	Shale	T.D. 670

ran 663.20' of 2 7/8 upset
cement to surface with 90 sx.

RECEIVED
KANSAS CORPORATION COMMISSION

JAN 05 2001

CONSERVATION DIVISION
WICHITA, KS



CONSOLIDATED INDUSTRIAL SERVICES

.....
A N INFINITY COMPANY

211 W. 14th, P.O. Box 884 Chanute, KS 66720 • 316/431-9210 • 1-800/467-8676

INVOICE DATE	INVOICE NO
11/22/00	00170102

S
O
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D

T
O

R. J. ENTERPRISE
% ROGER KENT
R. #1
GARNETT KS 66032

REMIT TO: CONSOLIDATED IND. SERVICES
P.O. BOX 26147
SHAWNEE MISSION, KS 66225

TERMS: Net 30 Days
A Finance Charge computed at 1% per month (annual percentage rate of 12%) will be added to balances over 30 days.

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

INT NO	P.O. NO	LOCATION	LEASE AND WELL NO	DATE OF JOB	JOB TICKET NO			
	0174	10	COX #1-A, 3-A	11/20/2000	16963			
ITEM NUMBER			DESCRIPTION	UNITS	UNIT PRICE	UNIT MEAS		EXTENDED PRICE
2			MINIMUM PUMP CHARGE	1.0000	1440.0000	EA		1440.00
2			MINIMUM PUMP CHARGE	1.0000	1296.0000	EA		1296.00
0			MISC PUMP ACID TRUCK	4.0000	120.0000	HR		480.00
2			MINIMUM ACID SPOTTING CHARGE	2.0000	247.5000	EA		495.00
0			28% HCL (50 GAL MAX)	500.0000	1.5000	GA		750.00
7			15% HCL	100.0000	8.0000	GA		80.00
9			7/8" RUBBER BALL SEALERS (SP. 1-3)	56.0000	1.7500	EA		98.00
1			FRAC GEL	150.0000	3.7500	LB		562.50
1			WATER TRANSPORT	5.0000	70.0000	HR		350.00
2			12/20 MESH	40.0000	11.5500	SK		462.00
3			8-12 MESH	10.0000	12.1000	SK		121.00
9			BULK SAND DELIVERY	1.0000	175.0000	EA		175.00

ORIGINAL

INVOICE TAX

PLEASE PAY

CONSOLIDATED

INDUSTRIAL SERVICES

AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720
316-431-9210 OR 800-467-8676

TICKET NUMBER **16983 ORIGINAL**

LOCATION Blue mound - 2N - 2W - 1/2N - E. side

FIELD TICKET

DATE 11-20-00	CUSTOMER ACCT # 7201	WELL NAME Cox #1A #3A	QTR/QTR SW 1/4	SECTION 19	TWP 22	RGE 22	COUNTY Linn	FORMATION Blue mound
CHARGE TO R J Enterprise				OWNER Roger Kent				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5102	1	PUMP CHARGE 1300 HP		1880.00
5106	1	1300 HP		1880.00
		HYDRAULIC HORSE POWER		1296.00
5610	4 hrs.	Acid Pump - Acid Del.		480.00
5302	2	Acid spots	2@ 247.50	495.00
3110	500 gal.	28% HCL		750.00
3107	100 gal.	15% HCL		80.00
4139	56	Ball sealers		98.00
1231	150 #	Frac Gel		562.50
		STAND BY TIME		
		MILEAGE		
5501	5 hrs.	WATER TRANSPORTS		350.00
		VACUUM TRUCKS		
2102	40 sx	FRAC SAND 12/20		462.00
2103	10 sx	8/12		121.00
		CEMENT		
		NITROGEN	Tax	6.76
5109	58 mi	TON-MILES		175.00
			ESTIMATED TOTAL	6316.26

NSCO #15087

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN Jerry L. Lester

CUSTOMER or AGENT (PLEASE PRINT)

DATE

170102

SOLIDATED INDUSTRIAL SERVICES, INC.
 N. 14TH STREET, CHANUTE, KS 66720
 431-9210 OR 800-467-8676

TICKET NUMBER **15634**

LOCATION _____

TREATMENT REPORT

FOREMAN Jerry Hester

DATE 20-00	CUSTOMER ACCT #	WELL NAME Cox #1A	QTR/QTR	SECTION	TWP	RGE	COUNTY Lincoln	FORMATION Bluemound
TO GO TO R.J. Enterprises				OWNER				
ADDRESS				OPERATOR				
				CONTRACTOR				
ZIP CODE				DISTANCE TO LOCATION				
ARRIVED ON LOCATION				TIME LEFT LOCATION				

WELL DATA	
SIZE	
DEPTH	
NG SIZE	2 7/8
NG DEPTH	
NG WEIGHT	
NG CONDITION	
NG SIZE	
NG DEPTH	
NG WEIGHT	
NG CONDITION	
DEPTER DEPTH	
FORATIONS	630-40
TS/FT	2154
N HOLE	
ATMENT VIA	Casing

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input checked="" type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input checked="" type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input checked="" type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS		
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB Spot 50 gal. 15% HCL. Break down and stage acid. pump necessary. do low rate acid ball-off w/500 gal. 15% and 18 balls. flow balls off. Establish max rate. pump necessary pad. sand balls sand. flush to parts. flow balls off. 10 B/L over. flush.

JOB SUMMARY

DESCRIPTION OF JOB EVENTS Spotted 50 gal. 15% - broke down and staged acid. did 12 BPM ball-off w/500 gal. 15% + 18 balls. No ball action. flowed balls off. established max rate. pumped 15 min. d. 1300" 12/20. 10 balls. 700" 12/20. 500" 8/12. flushed to parts. flowed balls off. 10 B/L. flush.

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	1800 psi
INITIAL DISPLACEMENT	1500 psi
INITIAL PRESSURE	psi
MAXIMUM PRESSURE	2200 psi
MINIMUM PRESSURE	1500 psi
FRAC PRESSURE	psi
FRAC RATE	400 psi
MIN SIP	psi
MAX SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	18
FINAL BPM	"
MINIMUM BPM	"
MAXIMUM BPM	"
AVERAGE BPM	"
HYD HHP = RATE X PRESSURE X 40.8	

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____

GARNETT SIDING & LUMBER CO ORIGINAL

P.O. BOX 374
 410 NORTH MAPLE, NORTH HWY 59
 GARNETT, KANSAS 66032
 PH: (785) 448-7106 * FAX: (785) 448-7135

Page 1 ***** INVOICE ***** Invoice # 0100291

SPECIAL: INSTR: TIME: 13:29:4
 SHIP: 10/25/02
 INVOICE: 10/25/02
 DUE DATE: 11/08/02
 Sales 558

SALESMAN: mark bures NUMBER: MANOCTSP: ORDERED BY:

SOLD TO: ROGER KENT
 RRA BOX 256
 GARNETT, KS 66032
 SHIP TO: (785) 448-6995
 TO: ROGER KENT

CUSTOMER NO: 2000357 JOB: CUSTOMER P.O.: PUR: SHIP VIA:

QTY.	UNIT	ITEM NUMBER	ITEM DESCRIPTION	PRICE	EXTENSION
50	BAG	CPRE	PORTLAND CEMENT-94#	5.85	292.50
50	BAG	CPRA	POST-MIX 75 LBS PER BAG	2.55	127.50
Cox 1A					

SALES TOTAL	\$506.40
FREIGHT	0.00
TAXABLE TOTAL	506.40
NON-TAXABLE TOTAL	0.00
SALES TAX	32.41
MISC + FRGT	0.00

RECEIVED BY: 

Net due: 538.81 TOTAL \$538.81

TERMS: MONTHLY CLOSING DATE IS LAST DAY OF MONTH. ANY CHARGES OR PAYMENTS MADE AFTER CLOSING DATE WILL SHOW ON NEXT MONTH'S STATEMENT.
 ALL CHARGES ARE DUE AND PAYABLE BY 10TH OF NEXT MONTH FOLLOWING DATE OF PURCHASE.
 ANY AMOUNT NOT PAID BY THIS DATE IS CONSIDERED PAST DUE AND WILL HAVE THE MAXIMUM LEGAL INTEREST APPLIED TO THE ACCOUNT.