

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 E. 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 Comp. Amp.
 Gas ENHR SIGW Methodic (etc)
 Dry Other (Core, WSW, Expl. etc)

If Workover/Re-Entry: old well info as follows
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____
Deepening _____ Re-perf. _____ Conv. to Inj/SWD
Plug Back _____ PBTD
Commingled _____ Docket No. _____
Dual Completion _____ Docket No. _____
Other (SWD or Inj?) _____ Docket No. _____
10-19-00 10-23-00
Spud Date Date Reached TD Completion Date

API NO. 15- 107-236250000
County Linn
Ap SE NE NE-SW Sec. 18 Twp. 22 Rge. 22 E W
2035 Feet from (S) N (circle one) Line of Section
2805 Feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)
Lease Name Cox Well # 3-A
Field Name Blue Mound
Producing Formation Bartlesville
Elevation: Ground n/a KB _____
Total Depth 677' PBTD _____
Amount of Surface Pipe Set and Cemented at 20 Feet
Multiple Stage Cementing Collar Used? _____ Yes No
If yes, show depth set _____ Feet
Alternate II completion, cement circulated from 0
feet depth to 677 w/ 90 _____ ex cmt.
Filling Fluid Management Plan Alt 2 KGR 8/23/07
Data must be collected from the Reserve Pit)
Drilled with fresh 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 Rng. _____ E/W _____
County _____ Docket No. _____

KANSAS CORPORATION COMMISSION

OIL & GAS CONSERVATION DIVISION
WICHITA, KANSAS

JAN 30 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, 2001

Notary Public Donna Manda
Date Commission Expires March 2006
My Appl. Exp. 3-16-03

DONNA MANDA
NOTARY PUBLIC
STATE OF KANSAS
My Appl. Exp. 3-16-03

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
KCC _____ SVD/Rep _____ NGPA _____
KGS _____ Plug _____ Other _____
(Specify)

Operator Name R. J. Enterprises Lease Name Cox Well # 3-A
 Sec. 18 Twp. 22S Rge. 22 East West
 County Linn

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 Datum	<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		669.80'		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	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used) Depth
21	628.0 - 638.0	See attached

TUBING RECORD	Size 2-7/8	Set At 669.80	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD 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: no gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____

(If vented, submit ACO-18.) Other (Specify) _____

R.J. Enterprises
Cox 3A

	started 10-19-00		
	Complete 10-23-00		
	6	Top	6
	45	Lime	51
set 20' of 6 1/4 and	10	Shale	61
cement to surface	17	Lime	78
	3	Shale	81
	7	Lime	88
	6	Shale	94
	13	Lime	107
	169	Shale	276
	12	Lime	288
	3	Shale	291
	9	Lime	300
	52	Shale	352
	2	Coal	354
	14	Lime	368
	5	Shale	373
	12	Lime	385
	32	Shale	417
	27	Lime	444
	9	Shale	453
	6	Lime	459
	94	Shale	553
	2	Lime	555
	66	Shale	626
	2	Bk. Sand	628
	11	Oil Sand	639
	1	Shale	640
	3	Bk. Sand	643
	2	Soft Shale	645
	32	Shale	T.D. 677

ran 669.80' of 2 7/8 upset
cement to surface with 90 sx.

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 # 01000283

SPECIAL INSTR: TIME: 10:15:3
 SHIP: 10/23/0
 INVOICE: 10/23/0
 DUE DATE: 11/08/0
 SALESMAN: NUMBER: MIKACCTS/P: ORDERED BY: 3
 Fics658

SOLD TO: ROGER KENT
 RR1 BOX 256
 GARNETT, KS 66032
 SHIP TO: (785) 448-6995
 TO: ROGER KENT
 TO: ROGER KENT

CUSTOMER NO: 000357 JOB: CUSTOMER PO: PUR: SHIP VIA:

QTY.	UNIT	ITEM NUMBER	ITEM DESCRIPTION	PRICE	C	EXTENSION
58.00	BAG	CPCC	PORTLAND CEMENT-94#	5.85	F	339.30
60.00	BAG	CPFA	HIST. MIX 75 LBS PER BAG	2.59	F	155.40
			<i>COX 3A</i>			
			<i>(Signature)</i>			

SALES TOTAL	\$494.70
FREIGHT	0.00
TAXABLE TOTAL	494.70
NON-TAXABLE TOTAL	0.00
Ant due:	526.36
MISC + FRGT	0.00
SALES TAX	31.66
TOTAL	\$526.36

RECEIVED BY *Roger*

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.
 CONSIDERED PAST DUE AND WILL HAVE THE MAXIMUM LEGAL INTEREST APPLIED TO THE ACCOUNT.



**CONSOLIDATED
INDUSTRIAL
SERVICES**
.....
AN 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
L
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 comput
at 1% per month (annual p
centage rate of 12%) will b
added to balances over 30
days.

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ITEM NO	P.O. NO	LOCATION	LEASE AND WELL NO	DATE OF JOB	JOB TICKET NO		
	0174	10	COX 3-1-A, 3-A	11/20/2000	16963		
ITEM NUMBER			DESCRIPTION	UNITS	UNIT PRICE	UNIT MEAS	EXTENDED
2			MINIMUM PUMP CHARGE	1.0000	1140.0000	EA	1140.00
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 (150 GAL MAX)	500.0000	1.5000	GA	750.00
7			15% HCL	100.0000	8.0000	GA	800.00
9			7/8" RUBBER BALL SEALERS (SP 1.3)	56.0000	1.7500	EA	980.00
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
INVOICE		TAX				PLEASE PAY	

ORIGINAL

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

TICKET NUMBER **15635**

LOCATION _____

FOREMAN Jerry Lester

TREATMENT REPORT

DATE <u>11-20-06</u>	CUSTOMER ACCT #	WELL NAME <u>Cox # 3A</u>	QTR/QTR	SECTION	TWP	RGE	COUNTY <u>Linn</u>	FORMATION <u>Bluemound</u>
CHARGE TO <u>R. J. Enterprises</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR				
STATE				DISTANCE TO LOCATION				
ZIP CODE				TIME LEFT LOCATION				
TIME ARRIVED ON LOCATION								

WELL DATA	
HOLE SIZE	
TOTAL DEPTH	
CASING SIZE	<u>2 7/8</u>
CASING DEPTH	
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	<u>628-38</u>
SHOTS/FT	<u>215</u>
OPEN HOLE	
TREATMENT VIA	<u>Casing</u>

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. do ball-off w/ 50 gal. 15% and 18 Balls. flow balls off. Establish max rate. pump necessary pad. sand. balls. sand. flush to perfs flow balls off. 10 bbl. overflush.

JOB SUMMARY

DESCRIPTION OF JOB EVENTS Spotted 50 gal. 15% HCL. Broke down and staged acid. established 120 BPM rate - pumped 500 gal. 15% HCL 10/18 balls. Flowed balls off. established max rate - pumped 15 bbl. pad. 1300# 12/20 - 10 balls - 700# 12/20 - 500# 8/19 - flushed to perfs - flowed balls off. 10 bbl. overflush.

PRESSURE SUMMARY

REACKDOWN or CIRCULATING	<u>1600</u>	psi
INAL DISPLACEMENT	<u>2000</u>	psi
NNULUS		psi
AXIMUM	<u>2400</u>	psi
INIMUM	<u>1800</u>	psi
VERAGE		psi
IP		psi
MIN SIP	<u>500</u>	psi
MIN SIP		psi
MIN SIP		psi

AUTHORIZATION TO PROCEED _____

TITLE _____

TREATMENT RATE

BREAKDOWN BPM	
INITIAL BPM	<u>14</u>
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
HYD HHP = RATE X PRESSURE X 40.8	

DATE _____



**CONSOLIDATED
INDUSTRIAL
SERVICES**

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

TICKET NUMBER **16963**
LOCATION Blue mound - 2N
2W - 1/2 N - E. side

ORIGINAL

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
11-20-00	7201	Cox #1A #3A	SW #14	19	22	22	Linn	Blue mound
CHARGE TO				OWNER				
RJ Enterprise				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		1890.00
5106	1	1300 HP		1890.00
		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 #1507

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN Jerry L. Lester

CUSTOMER or AGENT (PLEASE PRINT)

DATE

170102