

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL
Form ACO-1
September 1999
Must Be Typed

Operator: License # 31191
Name: R&B Oil & Gas
Address: PO Box 195
City/State/Zip: Attica, Kansas 67009-0195
Purchaser: _____
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 SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows: **RECEIVED**

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. _____

<u>10-05-05</u>	<u>10-12-05</u>	<u>11-16-05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 155-21492-00-00
County: Reno County, Kansas

E/2 . NE . SW . Sec. 11 Twp. 26 S. R. 9 East West

1980 feet from (S) / N (circle one) Line of Section

2310 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW **(SW)**

Lease Name: Reece Well #: 5-A

Field Name: Lerado

Producing Formation: Hertha

Elevation: Ground: 1660' Kelly Bushing: 1668'

Total Depth: 4128' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 344 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.

ATI - Da - 10/17/08

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume 320 bbls

Dewatering method used Hauled Off

Location of fluid disposal if hauled offsite:

Operator Name: R & B Oil & Gas, Inc.

Lease Name: Nunemaker License No.: 31191

Quarter SE Sec. 10 Twp. 26 S. R. 9 East West

County: Reno Docket No.: D-26,193

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: 2-4-06

Subscribed and sworn to before me this 10th day of February, 2006

Notary Public: Jane Swingle
Jane Swingle

Date Commission Expires: 1-6-07

 **JANE SWINGLE**
Notary Public - State of Kansas
My Appt. Exp. 1-6-07

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ORIGINAL
JAN 19 1970

Operator Name: Reece & Gas Lease Name: Reece Well #: 5-A
 Sec. 11 Twp. 26 S. R. 190 East West County: Reno 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction Dual Compensated Porosity	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Hertha</td> <td>3648</td> <td>-1982</td> </tr> </table>	Name	Top	Datum	Hertha	3648	-1982
Name	Top	Datum					
Hertha	3648	-1982					

CASING RECORD <input checked="" 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	# Sacs Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	23#	344'	60/40 Poz	250	3%cc 2%gel
Production	7-7/8"	5-1/2"	14#	3975'	ASC	150	

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	3648 - 3655	1000 gal 15% NEFE Acid	

TUBING RECORD	Size <u>2-3/8</u>	Set At <u>3820</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. <u>11-19-05</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
Estimated Production Per 24 Hours	Oil <u>10</u> Bbls.	Gas <u>25</u> Mcf	Water <u>20</u> Bbls.	Gas-Oil Ratio <u>2.5-1</u>	Gravity <u>38°</u>	

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

