

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

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 **RECEIVED**
 Wellsite Geologist: Tim Pierce **JUL 23 2004**
 Designate Type of Completion:
 New Well Re-Entry Workover **KCC WICHITA**
 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. _____

<u>02-16-04</u>	<u>02-23-04</u>	<u>3-31-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007-22798-00-00
 County: Barber County, Kansas
NW NE SE - Sec. 27 Twp. 32 S. R. 10 East West
2970 feet from S (circle one) Line of Section
810 feet from (circle one) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Blick Well #: 1
 Field Name: Medicine Lodge East
 Producing Formation: Mississippi
 Elevation: Ground: 1432' Kelly Bushing: 1440'
 Total Depth: 4490' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 235 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 cml.

Drilling Fluid Management Plan *Alt I KGR 2-17-08*
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume: 400 bbls
 Dewatering method used Hauled Off
 Location of fluid disposal if hauled offsite:
 Operator Name: Jody Oil & Gas Corporation
 Lease Name: Sanders 3A License No.: 3288
 Quarter SW Sec. 20 Twp. 31 S. R. 8 East West
 County: Harper Docket No.: D-23, 313

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: Rebecca S. Newberry
 Title: Sec./Treas. Date: 7-21-04
 Subscribed and sworn to before me this 21st day of July,
2004
 Notary Public: Jane Swingle
 Date Commission Expires: 1-6-2007

KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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

Operator Name: R&B Oil & Gas Lease Name: Blick Well #: 1

Sec. 27 Twp. 32 S. R. 10 East West County: Barber 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)

List All E. Logs Run:
 Dual Induction
 Dual Compensated Porosity
 Sonic Cement Bond

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Mississippi	4357	2917

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#	235'	60/40 Poz	185	2%cc 2%gel
Production	7-7/8"	5-1/2"	14#	4487'	Class A	135	10%salt 5#kolseal

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	4369 - 4389	600 gal HCl	
		Frac 350 sx 20/40	
		220 sx 12/20	
		45 sx Super LC	

TUBING RECORD Size 2-7/8 Set At 4446 Packer At _____ Liner Run Yes No

Date of First, Resumerd Production, SWD or Enhr. 4-16-04 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcl	Water Bbls.	Gas-Oil Ratio	Gravity
	10	45	300	4.5 - 1	

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
(If vented, Sumit ACO-18.) Other (Specify) _____

ALLIED CEMENTING CO., INC. 14133

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
MEDICINE LODGE

DATE <i>2-16-04</i>	SEC. <i>27</i>	TWP. <i>32s</i>	RANGE <i>10w</i>	CALLED OUT <i>7:30 AM</i>	ON LOCATION <i>9:00 PM</i>	JOB START <i>12:25 AM</i>	JOB FINISH <i>12:45 AM</i>
LEASE <i>BUCK</i>		WELL # <i>1</i>	LOCATION <i>SHARON 2E, 1/2S, W/5</i>			COUNTY <i>BARBER</i>	STATE <i>KANSAS</i>
OLD OR (NEW) (Circle one)							

CONTRACTOR *DUKE #2*

TYPE OF JOB *SURFACE CASING*

HOLE SIZE *12 1/4"* T.D. *23'*

CASING SIZE *8 5/8" X 23"* DEPTH *235'*

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG: *15'*

PERFS. _____

DISPLACEMENT *14 BBLS FRESH WATER*

EQUIPMENT

PUMP TRUCK CEMENTER *KEVIN BOINBOUT*

343 HELPER *LARRY DREILING*

BULK TRUCK _____

364 DRIVER *THAD CANTRALL*

BULK TRUCK _____

_____ DRIVER _____

OWNER *R+B OIL + GAS*

CEMENT AMOUNT ORDERED *185g 60:40:2 + 2% CC + 1% AMH.*

COMMON <i>A</i>	<i>111</i>	@	<i>7.15</i>	<i>793.65</i>
POZMIX	<i>74</i>	@	<i>3.80</i>	<i>281.20</i>
GEL	<i>3</i>	@	<i>10.00</i>	<i>30.00</i>
CHLORIDE	<i>4</i>	@	<i>30.00</i>	<i>120.00</i>
AMMONIUM CL	<i>3</i>	@	<i>31.50</i>	<i>94.50</i>
SUGAR	<i>50#</i>	@	<i>1.00</i>	<i>50.00</i>
		@		
		@		
		@		
		@		
HANDLING	<i>195</i>	@	<i>1.15</i>	<i>224.25</i>
MILEAGE	<i>195 x 15</i>		<i>.05</i>	<i>146.25</i>

RECEIVED
JUL 23 2004

TOTAL *1989.85*

REMARKS:

RUN 8 5/8" CASING + BREAK CIRC.

PUMP 5 BBLS FRESH WATER

MIX 185g 60:40:2 + 2% CC + 1% AMH

DISPLACE PLUG TO 220' / 14 BBLS

CEMENT DID NOT CIRCULATE TO CELLAR

KCC WICHITA

SERVICE

DEPTH OF JOB	<i>235'</i>		
PUMP TRUCK CHARGE			<i>520.00</i>
EXTRA FOOTAGE		@	
MILEAGE	<i>15</i>	@	<i>3.50</i>
PLUG	<i>8 5/8" SURFACE</i>	@	<i>45.00</i>
		@	
		@	
		@	
		@	

TOTAL *617.50*

CHARGE TO: *R+B OIL + GAS*

STREET *P.O. BOX 195*

CITY *ATTICA* STATE *KANSAS* ZIP *67009*

FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TOTAL _____

TAX _____

TOTAL CHARGE ~~_____~~

DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

SIGNATURE *John J. Ambuster*

**ANY APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING**

PRINTED NAME _____

ALLIED CEMENTING CO., INC. 15006

TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Med. Lodge, KS

DATE <u>2-23-04</u>	SEC <u>27</u>	TWP. <u>30S</u>	RANGE <u>10W</u>	CALLED OUT <u>8:00 pm</u>	ON LOCATION <u>8:00 pm</u>	JOB START <u>2:00 pm</u>	JOB FINISH <u>2:45 pm</u>
LEASE <u>Blick</u>	WELL # <u>1</u>	LOCATION <u>Sharon 2 East, 1 1/2 South,</u>			COUNTY <u>Barber</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one) <u>NEW</u>			LOCATION <u>West Side</u>				

CONTRACTOR Duke #2
 TYPE OF JOB Production
 HOLE SIZE 7 7/8 T.D. 4490
 CASING SIZE 5 1/2" 14.00' DEPTH 4493
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2" DEPTH 4490
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM 50
 MEAS. LINE 1200 SHOE JOINT 30.03
 CEMENT LEFT IN CSG. 30.03
 PERFS. _____
 DISPLACEMENT 10911 20% KCl H₂O
 EQUIPMENT _____

OWNER R+B Oil & Gas
 CEMENT
 AMOUNT ORDERED 50s x 60' 40' 2 + .4%
Sodium Met. / 135s x A + 10% 4up Seal +
10% salt + 5# KCl Seal + 1% Defoamer + .8% FL-160
1.75% Gas Blocker
 COMMON 16.5 'A' @ 7.15 1179.75
 POZMIX 20 @ 3.80 76.00
 GEL 1 @ 10.00 10.00
 CHLORIDE Kol Seal 675" @ .50 337.50
Sodium Metasilicate @ 1.50 25.50
Eye Seal 13 17" @ 17.85 232.05
Salt 15 @ 7.50 112.50
Defoamer 13 # @ 5.25 68.25
Gas Blocker 95 # @ 7.00 665.00
 HANDLING 231 @ 1.15 265.65
 MILEAGE 15 x 231 x .05 173.25
FL-160 101 # @ 8.00 808.00
 TOTAL \$3953.45

PUMP TRUCK CEMENTER Mike Rucker
 # 265 HELPER Larry Dreiling
 BULK TRUCK
 # 364 DRIVER Larry Goldsberg
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

Pipe on bottom, Drop Ball Break Circ.
See Job Log for Rest of info.

SERVICE

DEPTH OF JOB 4493
 PUMP TRUCK CHARGE _____ 1195.00
 EXTRA FOOTAGE @ _____
 MILEAGE 15 @ 3.50 52.50
 PLUG Rubber @ 40.00 60.00
 @ _____
 @ _____

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JUL 23 2004

TOTAL \$1307.50

CHARGE TO: R+B Oil & Gas KCC WICHITA

STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

5 1/2" Gemeco
 1- Guide Shoe @ 150.00 150.00
 1- AFO insert @ 235.00 235.00
 5- Centralizers @ 50.00 250.00
 @ _____
 @ _____

TOTAL \$635.00

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
 TOTAL CHARGE ~~635.00~~
 DISCOUNT ~~635.00~~ IF PAID IN 30 DAYS

SIGNATURE Tim Pierce TIM PIERCE

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING PRINTED NAME