

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31191
Name: R & B Oil & Gas, Inc.
Address 1: PO Box 195
Address 2: _____
City: Attica State: KS Zip: 67009 + _____
Contact Person: Randy Newberry
Phone: (620) 254-7251
CONTRACTOR: License # 33902
Name: Hardt Drilling, LLC
Wellsite Geologist: Tim Pierce
Purchaser: _____

Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
 Oil _____ SWD _____ SIOW _____
 Gas _____ ENHR _____ SIGW _____
_____ CM (Coal Bed Methane) _____ Temp. Abd. _____
_____ 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. _____ Conv. to SWD _____
_____ Plug Back: _____ Plug Back Total Depth _____
_____ Commingled _____ Docket No.: _____
_____ Dual Completion _____ Docket No.: _____
_____ Other (SWD or Enhr.?) _____ Docket No.: _____
8-13-08 8-24-08 10-18-08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 077-21641-00-00
Spot Description: _____
_____ -NW-SE Sec. 22 Twp. 31 S. R. 9 East West
1980 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Harper
Lease Name: Detmer Well #: 2
Field Name: Spivey-Grabs Basil
Producing Formation: Mississippi
Elevation: Ground: 1646 Kelly Bushing: 1656
Total Depth: 4660 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 268 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 A1 I NCR 3-26-09
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: 480 bbls
Dewatering method used: Hauled Off
Location of fluid disposal if hauled offsite: _____
Operator Name: Jody Oil & Gas Corp
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: Randy Newberry
Title: Vice President Date: 1-16-09
Subscribed and sworn to before me this 16th day of January,
20 09.
Notary Public: Jane Swingle
Date Commission Expires: 1-6-2011

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
JAN 20 2009

 **JANE SWINGLE**
Notary Public - State of Kansas
My Appt. Exp. 1-6-2011

CONSERVATION DIVISION
WICHITA, KS

Operator Name: R & B Oil & Gas, Inc. Lease Name: Detmer Well #: 2
 Sec. 22 Twp. 31 S. R. 9 East West County: Harper

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)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Mississippi 4436 (-2780)

List All E. Logs Run:

**Bond Log, Dual Compensated Porosity,
 Dual Induction**

CASING RECORD <input type="checkbox"/> New <input checked="" 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	12-1/4"	8-5/8"	23#	268	60/40 Poz	270 sxs	2% gel, 3% cc
Production	7-7/8"	4-1/2"	10.5#	4655	60/40 Class H	40 & 125	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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	4438-4446 & 4468-4500	2000 15% MCA	

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 WICHITA, KS

TUBING RECORD:		Size: 2-3/8	Set At: 4417	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 11-10-08		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 Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
	5	20	150		30

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	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: _____ _____
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ALLIED CEMENTING CO., LLC. 31275

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

SERVICE POINT:
MEDICINE LODGE

DATE <u>8-13-08</u>	SEC <u>22</u>	TWP <u>S15</u>	RANGE <u>9W</u>	CALLED OUT <u>11:00 pm</u>	ON LOCATION <u>1:00 am</u>	JOB START <u>3:00 am</u>	JOB FINISH <u>3:30 am</u>
LEASER <u>DETRIX</u>		WELL # <u>2</u>	LOCATION <u>KEYSTONE CHURCH, 2 SOUTH, HAWKMAN, KANSAS</u>			COUNTY <u>HAWKMAN</u>	STATE <u>KS</u>
<input checked="" type="radio"/> OLD OR <input type="radio"/> NEW (Circle one)		LOCATION <u>1/2 WEST, S/SIDE</u>					

CONTRACTOR HAND #1 OWNER ADB OIL & GAS

TYPE OF JOB SURFACE CASING CEMENT AMOUNT ORDERED 270 SK 60/40/2 + 32 cc

HOLE SIZE 12 1/4" T.D. 368'
 CASING SIZE 8 5/8" DEPTH 368'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2" DEPTH _____
 TOOL _____ DEPTH _____

PRES. MAX 250 MINIMUM 100 COMMON 162 A @ 15.45 2502.90
 MEAS. LINE _____ SHOE JOINT 15' POZMIX 108 @ 8.00 864.00
 CEMENT LEFT IN CSG. 15' GEL 5 @ 20.80 104.00
 PERFS. _____ CHLORIDE 9 @ 58.20 523.80
 DISPLACEMENT 16 bbl. FRESH WATER ASC _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER BILL M.
 # 352 HELPER MIKE B.
 BULK TRUCK _____ @ _____
 # 364 DRIVER LARRY F.
 BULK TRUCK _____ @ _____
 # _____ DRIVER _____ @ _____

HANDLING 284 @ 2.40 681.60
 MILEAGE 30 x 284 x .10 852.00
 TOTAL 5528.30

REMARKS:
PIPE ON BOTTOM, BREAK CIRCULATION,
PUMP PRE-FRESH, PUMP 270 SK 60/40/2
+32 cc, STOP PUMPS, RELEASE PLUG,
START DISPLACEMENT, SEE LIFT, SHOW
DATE, DISPLACE WITH 16 bbl. FRESH
WATER, STOP PUMPS, SHUT-IN, CIRCULATE
CEMENT.

CHARGE TO: ADB OIL & GAS
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 268'
 PUMP TRUCK CHARGE _____ 1018.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 30 @ 7.00 210.00
 MANIFOLD HEAD RENT @ 113.00 113.00
 _____ @ _____
 _____ @ _____
 TOTAL 1341.00

PLUG & FLOAT EQUIPMENT

8 5/8" WOODEN PLUG 1 @ 68.00 68.00
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL 68.00

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME SCOTT ADELHANT
 SIGNATURE Scott C Adelant

SALES TAX (If Any) _____
 TOTAL CHARGES 1341.00
 DISCOUNT 0.00 IF PAID IN 30 DAYS

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

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 KANSAS CORPORATION COMMISSION
JAN 20 2009
 CONSERVATION DIVISION
 WICHITA, KS

ALLIED CEMENTING CO., LLC. 34246

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

SERVICE POINT:
Medicine Lodge, KS.

Jane

DATE <i>8-24-08</i>	SEC. <i>22</i>	TWP. <i>31S</i>	RANGE <i>9W</i>	CALLED OUT <i>5:00 AM</i>	ON LOCATION <i>9:30 AM</i>	JOB START <i>1:15 PM</i>	JOB FINISH <i>2:15 PM</i>
LEASE <i>Detmer</i>	WELL # <i>2</i>	LOCATION <i>Keystone Church, 2S, 4W, 5</i>			COUNTY <i>Haver</i>	STATE <i>KS.</i>	
OLD OR <u>NEW</u> (Circle one)			<i>Into</i>				

CONTRACTOR *Hardt #1*
 TYPE OF JOB *Production casing*
 HOLE SIZE *7 7/8"* I.D. *4660'*
 CASING SIZE *4 1/2"* 10.5" DEPTH *4655'*
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX *1200#* MINIMUM *100#*
 MEAS. LINE _____ SHOE JOINT *42.83'*
 CEMENT LEFT IN CSG. *42.83'*
 PERFS. _____
 DISPLACEMENT *7 1/2 Bbl 2% KCL water*

OWNER *R+B oil+gas*
 CEMENT
 AMOUNT ORDERED *405# 60:40:4 + 4% SMS, 125# class H + 10% salt + 5# Kot-seal/sk, 106 gal CAPRO, 500 gal ASF*
 COMMON *243 A @ 15.45 3754.35*
 POZMIX *162 @ 8.00 1296.00*
 GEL *14 @ 20.80 291.20*
 CHLORIDE _____ @ _____
 ASC _____ @ _____
125 H @ 16.75 2093.75
Sodium Metasilicate 14 @ 2.45 34.30
Salt 14 @ 12.00 168.00
Kot Seal 625# @ .89 556.25
CIA Pro 10 gal @ 31.25 312.50
ASF 500 gal @ 1.27 635.00
 @ _____
 @ _____
 HANDLING *571 @ 2.40 1370.40*
 MILEAGE *30 x 571 x .10 1713.00*
 TOTAL *12224.75*

EQUIPMENT

PUMP TRUCK CEMENTER *Thomas D. Morrow*
 # *300* HELPER *Greg K.*
 BULK TRUCK
 # *389* DRIVER *Michael N.*
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

Picked bottom, break circulation, Pump Pre Flush - 3 Bbl Fresh, 20 Bbl 2% KCL, 3 Bbl Fresh, 500 gal ASF, 3 Bbl Fresh, Plug float w/ 15 sk 60:40:4 + 4% SMS, Pump Production - 25 sk 60:40:4 + 4% SMS, 125 sk class H + 10% salt + 5# Kot-seal/sk, stop pumps, wash pump lines, Release Plug, start displacement, 500 gal ASF, slow rate, Bump Plug, float held Displaced w/ 7 1/2 Bbl 2% KCL Thank you

SERVICE

DEPTH OF JOB *4655'*
 PUMP TRUCK CHARGE _____ *2185.00*
 EXTRA FOOTAGE _____ @ _____
 MILEAGE *30 @ 7.00 210.00*
 MANIFOLD _____ @ _____
 Head Rental *1 @ 113.00 113.00*
 @ _____

TOTAL *2508.00*

CHARGE TO: *R+B Oil+Gas*
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

4 1/2"
 Top Rubber Plug *1 @ 62.00 62.00*
 Inside Shoe *1 @ 169.00 169.00*
 KFO Insert *1 @ 254.00 254.00*
 centralizers *5 @ 51.00 255.00*
 Reel Scratchers *9 @ 68.00 612.00*
 TOTAL *1352.00*

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 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME *X Tim Pierce*
 SIGNATURE *X Tim Pierce*

SALES TAX (If Any) _____
 TOTAL CHARGES ~~_____~~
 DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

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