

**- KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 31191
 Name: R&B Oil & Gas, Inc.
 Address: P.O. 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:

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>09-24-07</u>	<u>09-30-07</u>	<u>10-2-07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 095-22090-0000
 County: Kingman County, Kansas
 SE NW NE Sec. 14 Twp. 28 S. R. 5 East West
796 feet from S / (N) (circle one) Line of Section
1650 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) (NE) SE NW SW
 Lease Name: Henry Well #: 1
 Field Name: Broadway East

Producing Formation: _____
 Elevation: Ground: 1378' Kelly Bushing: 1386'
 Total Depth: 3965' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 265 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. PA-DG-1122/09

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used Let Dry
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

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: 1-11-08
 Subscribed and sworn to before me this 11th day of January
 2008.

Notary Public: Jane Swingle
 Date Commission Expires: 1-6-2011

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

KCC Office Use ONLY

Letter of Confidentiality Received **RECEIVED**

If Denied, Yes Date: _____ **KANSAS CORPORATION COMMISSION**

Wireline Log Received **RECEIVED 2008**

Geologist Report Received **KANSAS CORPORATION COMMISSION**

UIC Distribution

JAN 14 2008

Operator Name: R&B Oil & Gas, Inc. Lease Name: Henry Well #: 1
 Sec. 14 Twp. 28 S. R. 5 East West County: Kingman 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)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Miss 3769 (-2383)

List All E. Logs Run:
 Dual Induction
 Dual Compensated Porosity

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	12-1/4"	8-5/8"	23#	265'	60/40 Poz	190	3%cc 2%gel

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

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.	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

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)
 METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____
 Production Interval _____

ALLIED CEMENTING CO., INC.

31337

Federal Tax I.D.

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

SERVICE POINT:
Medicine Bldg, KS

DATE <i>24 Sep 07</i>	SEC. <i>14</i>	TWP. <i>28s</i>	RANGE <i>05w</i>	CALLED OUT <i>12:00 PM</i>	ON LOCATION <i>3:00 PM</i>	JOB START <i>10:15 AM</i>	JOB FINISH <i>10:45 PM</i>
LEASE <i>Henry</i>	WELL # <i>1</i>	LOCATION <i>Norwich, KS, 7N, 1E, 4W, 1/2W</i>			COUNTY <i>Kingman</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one)		<i>s/lints</i>					

CONTRACTOR *Duke #2*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/4* T.D. *266*

CASING SIZE *8 5/8* DEPTH *266*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX *250* MINIMUM *-*

MEAS. LINE SHOE JOINT *N/A*

CEMENT LEFT IN CSG. *15'*

PERFS.

DISPLACEMENT *16 Bbls Fresh H₂O*

EQUIPMENT

PUMP TRUCK CEMENTER *D. Felio*

360 HELPER *G. Kessler*

BULK TRUCK

381 DRIVER *H. McMurphy / Co Howser*

BULK TRUCK

DRIVER

OWNER *R & B oil & gas co.*

CEMENT AMOUNT ORDERED *190 cx 60:40:2 + 3% w/ AND 40 # Sugar*

COMMON	<i>114 A</i>	@	<i>11.10</i>	<i>1265.40</i>
POZMIX	<i>76</i>	@	<i>6.20</i>	<i>471.20</i>
GEL	<i>3</i>	@	<i>16.65</i>	<i>49.95</i>
CHLORIDE	<i>6</i>	@	<i>46.60</i>	<i>279.60</i>
ASC		@		
	<i>Sugar 40 #</i>	@	<i>1.00</i>	<i>40.00</i>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>199</i>	@	<i>1.90</i>	<i>378.10</i>
MILEAGE	<i>50 x 199 x .09</i>			<i>895.50</i>
				TOTAL <i>3379.75</i>

REMARKS:

Pipe on Bttn, Breat Circ, Pump Spacer, Mix 190sx 60:40:2+3% gel + 3% w/ Sugar, Stop Pump, Release Plug, Start Disp, Fresh H₂O, Wash up on Plug, See increase in PSI, Slow Rate, Stop Pump at 16 Bbls total Disp, Shut in Cement D. & Circ.

SERVICE

DEPTH OF JOB *266*

PUMP TRUCK CHARGE *815.00*

EXTRA FOOTAGE @

MILEAGE *50* @ *6.00* *300.00*

MANIFOLD *hand rental* @ *100.00* *100.00*

@

@

CHARGE TO: *R & B oil & gas co.*

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL *1215.00*

8 5/8" PLUG & FLOAT EQUIPMENT

1- TWP @ *60.00* *60.00*

@

@

@

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING TOTAL *60.00*

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

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.

SIGNATURE *John J. Ambrosetti*

PRINTED NAME

RECEIVED
KANSAS CORPORATION COMMISSION ON

JAN 14 2008

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., INC.

31273

Federal Tax I.D.#

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

SERVICE POINT:

Medicine Lodge

DATE <u>10-1-07</u>	SEC. <u>14</u>	TWP. <u>26S</u>	RANGE <u>05W</u>	CALLED OUT <u>11:00 A.M.</u>	ON LOCATION <u>3:00 P.M.</u>	JOB START <u>5:00 P.M.</u>	JOB FINISH <u>10:00 P.M.</u>
LEASE <u>Henry</u>	WELL # <u>1</u>	LOCATION <u>Nowich, Ka, 7 N to T</u>			COUNTY <u>Kingsman</u>	STATE <u>Ka.</u>	
OLD OR <u>NEW</u> (Circle one)		<u>1 East, 4 W to Steps, 1/2 W, S into</u>					

CONTRACTOR Duke #2 OWNER R+B Oil & Gas

TYPE OF JOB OHP

HOLE SIZE _____ T.D. _____ CEMENT AMOUNT ORDERED 1305 x 60' 4 1/2"

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 600

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____ COMMON 78 A @ 11.10 865.80

MEAS. LINE _____ SHOE JOINT _____ POZMIX 52 @ 6.20 322.40

CEMENT LEFT IN CSG. _____ GEL 5 @ 16.65 83.25

PERFS. _____ CHLORIDE _____ @ _____

DISPLACEMENT fresh ASC _____ @ _____

EQUIPMENT _____ @ _____

PUMP TRUCK CEMENTER Mark Coley _____ @ _____

343 HELPER Steve K. _____ @ _____

BULK TRUCK _____ @ _____

314 DRIVER Raymond R. _____ @ _____

BULK TRUCK _____ @ _____

_____ DRIVER _____ @ _____

HANDLING 135 @ 1.90 256.50

MILEAGE 50 x 135 x .09 607.50

TOTAL 2135.45

REMARKS:

spot plug @ 400' w/ 355x disp. w/ fresh.
spot plug @ 315' w/ 355x disp w/ fresh
plug @ 60' w/ 255x.
plug mouse w/ 105x
plug rat w/ 253x

SERVICE

DEPTH OF JOB 600'

PUMP TRUCK CHARGE _____ 220.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 50 @ 6.00 300.00

MANIFOLD _____ @ _____

TOTAL 1020.00

CHARGE TO: R+B Oil & Gas

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

ANY APPLICABLE TAX @ _____
WILL BE CHARGED
UPON INVOICING TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

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.

SIGNATURE John J. Armbruster

John J. Armbruster
PRINTED NAME

RECEIVED
KANSAS CORPORATION COMMISSION

JAN 14 2008

CONSERVATION DIVISION
WICHITA, KS