

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.: _____
8-13-2009 8-18-2009 8-18-09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 191-22565-00-00
Spot Description: _____
-SW- NW NE Sec. 25 Twp. 31 S. R. 4 East West
990 Feet from North / South Line of Section
2310 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Summer
Lease Name: Kraus A Well #: 1
Field Name: Wildcat
Producing Formation: _____
Elevation: Ground: 1328 Kelly Bushing: 1338
3586
Total Depth: _____ Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 263 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 P+A Alt I NR
(Data must be collected from the Reserve Pit) 10-2-09
Chloride content: _____ ppm Fluid volume: 320 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: President Date: 10-16-2009
Subscribed and sworn to before me this 16th day of October,
20 09.
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
N Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
____ UIC Distribution

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OCT 19 2009

CONSERVATION DIVISION
WICHITA, KS

Operator Name: R & B OIL & GAS, INC. Lease Name: Kraus A Well #: 1
 Sec. 25 Twp. 31 S. R. 4 East West County: Sumner

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
Kansas City 3368 (-2030)

List All E. Logs Run:

Radiation Guard Log

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	# Sacks Used	Type and Percent Additives
Surface	12 1/4	8-5/8"	24	263	CommonA	175	2 & 3% CC

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, Resumed 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: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____ RECEIVED KANSAS CORPORATION COMMISSION
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

OCT 19 2009

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 042530

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

SERVICE POINT:
Medicine Lodge

DATE <i>8/14/09</i>	SEC <i>25</i>	TWP <i>31S</i>	RANGE <i>4W</i>	CALLED OUT <i>8/13 10:00pm</i>	ON LOCATION <i>12:00 AM</i>	JOB START <i>1:15 AM</i>	JOB FINISH <i>1:45 AM</i>
LEASE <i>Kraus</i>	WELL # <i>A-1</i>	LOCATION <i>Argonia, KS. 4N to 50th</i>			COUNTY <i>Harper</i>	STATE <i>KS.</i>	
OLD OR NEW (Circle one)		<i>3 1/2", 5 into</i>					

CONTRACTOR *Hurd*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/4* T.D. *262'*

CASING SIZE *8 3/8* DEPTH *263'*

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX *300#* MINIMUM *—*

MEAS. LINE _____ SHOE JOINT *—*

CEMENT LEFT IN CSG. *20'*

PERFS. _____

DISPLACEMENT *15 1/2 BBLs Fresh*

OWNER *R+B Oil & Gas*

CEMENT AMOUNT ORDERED *175x 60.40' 2+39cc*

COMMON <i>A</i>	<i>105</i> sx	@ <i>15.45</i>	<i>1622.25</i>
POZMIX	<i>70</i>	@ <i>8.60</i>	<i>560.00</i>
GEL	<i>3</i>	@ <i>20.80</i>	<i>62.40</i>
CHLORIDE	<i>6</i>	@ <i>58.20</i>	<i>349.20</i>
ASC		@	

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HANDLING <i>184</i>	@ <i>2.40</i>	<i>441.60</i>
MILEAGE <i>184/25/.10</i>		<i>300.00</i>
		TOTAL <i>3335.45</i>

REMARKS:

*pipe on bottom, to peak C.C. mix 175sx
60.40' 2+39cc. Release plus.
Disp. 15 1/2 BBLs Fresh H2O.
Set in.
Release psi.
Cement did C.C.*

SERVICE

DEPTH OF JOB <i>263'</i>		
PUMP TRUCK CHARGE		<i>991.00</i>
EXTRA FOOTAGE	@	
MILEAGE <i>25</i>	@ <i>7.00</i>	<i>175.00</i>
MANIFOLD	@	
	@	
	@	
		TOTAL <i>1166.00</i>

CHARGE TO: *R+B Oil & Gas*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<i>1-wooden Plug</i>	@ <i>N/C</i>	
	@	
	@	
	@	
	@	
		TOTAL _____

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 *X Scott C Adelhardt*

SIGNATURE *X Scott C Adelhardt*

SALES TAX (If Any) _____

TOTAL CHARGES ~~_____~~

DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC. 042985

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

SERVICE POINT:
Medicine Lodge KS

DATE <i>08 18 09</i>	SEC. <i>25</i>	TWP. <i>31s</i>	RANGE <i>04w</i>	CALLED OUT <i>3:00 pm</i>	ON LOCATION <i>7:30 pm</i>	JOB START <i>9:00 pm</i>	JOB FINISH <i>10:00 pm</i>
LEASE <i>Kraus</i>		WELL # <i>A #1</i>		LOCATION <i>Argonia, KS, 4N, 3 1/2 E, S into</i>		COUNTY <i>Harper</i>	STATE <i>KS</i>
OLD OR NEW (Circle one)							

CONTRACTOR *Hardt #1*

TYPE OF JOB *Rotary Plug*

HOLE SIZE *7 7/8* T.D. *3580'*

CASING SIZE *8 5/8* DEPTH *263'*

TUBING SIZE _____ DEPTH _____

DRILL PIPE *4 1/2* DEPTH *750'*

TOOL _____ DEPTH _____

PRES. MAX *250* MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. *n/a*

PERFS. _____

DISPLACEMENT *Fresh H₂O*

OWNER *R & B oil & gas*

CEMENT AMOUNT ORDERED *150sx60.40.4 1/2 gal*

EQUIPMENT

PUMP TRUCK CEMENTER *P. Felio*

372 HELPER *D. Franklin*

BULK TRUCK

364 DRIVER *S. Priddy*

BULK TRUCK

_____ DRIVER _____

COMMON	<i>A 90 sx</i>	@	<i>15.45</i>	<i>1390.50</i>
POZMIX	<i>60</i>	@	<i>8.00</i>	<i>480.00</i>
GEL	<i>S sx</i>	@	<i>2.80</i>	<i>164.00</i>
CHLORIDE	_____	@	_____	_____
ASC	_____	@	_____	_____
HANDLING	<i>150</i>	@	<i>2.40</i>	<i>360.00</i>
MILEAGE	<i>150/25/.10</i>	@	_____	<i>375.00</i>
TOTAL				<i>2709.50</i>

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REMARKS:

*Drill Pipe at 750', Load Hole, Pump Spacer
Mix 35sx Cement, Disp w/ 8 Bbls water,
Drill Pipe at 450', Load Hole, Pump Spacer
Mix 35sx Cement, Disp w/ 4 Bbls water
Drill pipe at 300', Load Hole, Pump Spacer,
Mix 35sx Cement, Disp w/ 1 1/2 Bbls water,
Drill Pipe at 60', Load Hole, Mix 25sx Cement
Cement Did Circ, Plug Rat Hole w/ 20sx Cement*

CHARGE TO: *R & B oil & gas*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<i>750</i>	_____
PUMP TRUCK CHARGE	_____	<i>1017.00</i>
EXTRA FOOTAGE	@	_____
MILEAGE	<i>25</i>	@ <i>7.00</i> <i>175.00</i>
MANIFOLD	@	_____
_____	@	_____
_____	@	_____
TOTAL <i>1192.00</i>		

PLUG & FLOAT EQUIPMENT

<i>None</i>	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
TOTAL _____		

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 C Adcher*

SIGNATURE *Scott C Adcher*

SALES TAX (If Any) _____

TOTAL CHARGES *1192.00*

DISCOUNT *0.00* IF PAID IN 30 DAYS