

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 # 3728
Name: Roger Kent dba R.J. Enterprises
Address 1: 22082 NE Neosho Road
Address 2: _____
City: Garnett State: KS Zip: 66032 + 1918
Contact Person: Roger Kent
Phone: (785) 448-6995 or 448-7725
CONTRACTOR: License # 3728
Name: Roger Kent dba R.J. Enterprises
Wellsite Geologist: n/a
Purchaser: n/a
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.: _____
July 17, 2009 July 21, 2009 July 21, 2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

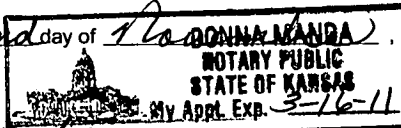
API No. 15 - 011-23569-00-00
Spot Description: _____
S2_N2_NE_NE Sec. 2 Twp. 24 S. R. 21 East West
4,900 Feet from North / South Line of Section
660 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Margrave Well #: 2-1
Field Name: Davis Bronson
Producing Formation: Bartlesville
Elevation: Ground: 1,044 ft. Kelly Bushing: n/a
Total Depth: 721 ft. Plug Back Total Depth: 715 ft.
Amount of Surface Pipe Set and Cemented at: 20 ft. Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: surface
feet depth to: 715 ft. w/ 90 sx cmt.

Drilling Fluid Management Plan AH II NR 12-2-09
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: Drilled with fresh water - air 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: [Signature]
Title: Agent for R.J. Enterprises Date: November 2, 2009
Subscribed and sworn to before me this 2nd day of November, 2009.
Notary Public: Donna Manda
Date Commission Expires: March 16, 2011



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution (11/03)

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Operator Name: Roger Kent dba R.J. Enterprises Lease Name: Margrave Well #: 2-1
 Sec. 2 Twp. 24 S. R. 21 East West County: Bourbon

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 type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See attached log
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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		7"		20'	Oil Well Cement	90 sxs	Cottonseed Hulls
Production		2-7/8"		715'		90 sxs	Kol Seal-50#
							S-5 gel/Bentonite 50#

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
13 perfs	679' - 683'		

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 <i>(If vented, Submit ACO-18.)</i>	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: _____ _____
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CASING MECHANICAL INTEGRITY TEST

DOCKET # _____

Disposal Enhanced Recovery:

S/2-N/2-NE-NE, Sec 2, T 24 S, R 21 EW

NW-OP Repressuring
Flood
Tertiary

4900 Feet from South Section Line
0660 Feet from East Section Line

Date injection started _____
API #15 - 011 - 23,569

Lease MarGrave Well # 2-I
County Bourbon

Operator: RJ Enterprises
Name &
Address 22082 NE Neosho RD
Garnett Ks. 66032

Operator License # 03728
Contact Person Roger Kent
Phone 785-448-6995

Max. Auth. Injection Press. _____ psi; Max. Inj. Rate _____ bbl/d;
If Dual Completion - Injection above production _____ Injection below production _____
Conductor Surface Production Liner Size Tubing
Set at _____ 7" _____ 2 7/8" _____ Size _____
Cement Top _____ 20' _____ 715' _____ Set at _____
" Bottom _____ Circ _____ Circ _____ Type _____
DV/Perf. _____ TD (and plug back) _____ 721' _____ ft. depth
Packer type _____ Size _____ Set at _____
Zone of injection _____ ft. to ft. _____ Perf. or open hole _____

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

F Time: Start 10 Min. 20 Min. 30 Min.
I 8:35
E Pressures: 800 800 800 Set up 1 | System Pres. during test _____
L 9:10 Set up 2 | Annular Pres. during test _____
D Set up 3 | Fluid loss during test _____ bbls.
D
A
T Tested: Casing or Casing - Tubing Annulus
A

The bottom of the tested zone is shut in with Pressure Test (rubber Plug)
Test Date 8/5/09 Using Midwest Surveys Company's Equipment
The operator hereby certifies that the zone between 0 feet and 715 feet
was the zone tested Amy Lindahl Signature Contractor Title

The results were Satisfactory , Marginal _____, Not Satisfactory _____
State Agent _____ Title _____ Witness: Yes _____ No _____
REMARKS: Pressured casing up to 800" Well not perforated yet

Origin. Conservation Div.; KDHE/T; Dist. Office;
 Computer Update
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KCC Form U-7 6/84



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 23050

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Invoice Date: 07/22/2009 Terms: 0/30,n/30 Page 1
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R. J. ENTERPRISE
% ROGER KENT
22082 NE NEOSHO RD
GARNETT KS 66032
(785) 448-6995

MARGRAVE 2-I
23455
07-21-09

Part Number	Description	Qty	Unit Price	Total
1126	OIL WELL CEMENT	90.00	16.0000	1440.0
1110A	KOL SEAL (50# BAG)	360.00	.3900	140.4
1118A	S-5 GEL/ BENTONITE (50#)	200.00	.1600	32.0
1105	COTTONSEED HULLS	25.00	.3700	9.2
4402	2 1/2" RUBBER PLUG	2.00	22.0000	44.0
1123	CITY WATER	3000.00	.0140	42.0

Description	Hours	Unit Price	Total
437 80 BBL VACUUM TRUCK (CEMENT)	3.00	94.00	282.0
479 TON MILEAGE DELIVERY	297.00	1.16	344.5
485 CEMENT PUMP	1.00	870.00	870.0

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Parts: 1707.65 Freight: .00 Tax: 107.59 AR 3311.7
Labor: .00 Misc: .00 Total: 3311.76
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

McALESTER, OK
918/426-7667

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577

R.J. Enterprise

Margrave 2-1

start 7-17-09
finish 7-21-09

3	soil	3	
11	clay	14	
55	lime	69	
3	shale	72	
2	lime	74	
5	shale	79	
60	lime	139	
162	shale	301	
22	lime	323	
69	shale	392	
30	lime	422	
41	shale	463	
20	lime	483	
7	shale	490	
6	lime	496	
93	shale	589	
3	lime	592	
73	shale	665	
14	sandy shale	679	
5	oil sand	684	good show
3	lime	687	
1	dk sand	688	
1	lime	689	
3	dk sand	692	
29	shale	721	T.D.

set 20' of 7"
ran 715' of 2 7/8
consolidated cemented
to surface

RECEIVED

NOV 03 2009

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