

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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 # 34127
Name: Tomcat Drilling, LLC
Wellsite Geologist: Tim Pierce
Purchaser: _____
Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover
 Oil _____ SWD _____ SLOW
_____ 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.: _____
12/18/2009 12/30/2009 2/18/2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 007-23488-00-00
Spot Description: C NW/4
_____ NW Sec. 13 Twp. 32 S. R. 11 East West
1320 Feet from North / South Line of Section
1320 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barber
Lease Name: Hrencher Well #: B1
Field Name: McGuire-Goemann
Producing Formation: Lansing
Elevation: Ground: 1520 Kelly Bushing: 1530
Total Depth: 3807 Plug Back Total Depth: 3774
Amount of Surface Pipe Set and Cemented at: 254 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/ _____ ^{sq. cm}

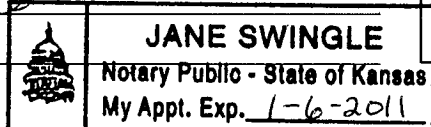
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: Hauled Off
Location of fluid disposal if hauled offsite:
Operator Name: Hart Energies, LLC
Lease Name: Marylne OWWO SWD License No.: 32798
Quarter SE Sec. 2 Twp. 31 S. R. 10 East West
County: Barber Docket No.: D-28, 465

AKI-Dlg - 5/3/10

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: 5-27-2010
Subscribed and sworn to before me this 27th day of May,
20 10.
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
MAY 28 2010
CONSERVATION DIVISION
WICHITA, KS

Operator Name: R & B Oil & Gas, Inc. Lease Name: Hrencher Well #: B1
 Sec. 13 Twp. 32 S. R. 11 East West County: Barber

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: Dual Induction, Dual Compensated Porosity, Sonic Bond	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Lansing 3739 (-2209)
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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#	254	60:40 Poz	175	5% cc & 2% gel
Production	7-7/8"	4-1/2"	10#	3786	Class H	175	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	3616 - 3626	5,000 gal 15% HCL Acid	
		1,000 gal 20% HCL	
		Mud Acid	

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TUBING RECORD: Size: <u>2-3/8"</u> Set At: <u>3642</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>03/10/2010</u>		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 Bbls. <u>3</u>	Gas Mcf <u>0</u>	Water Bbls. <u>12</u> Gas-Oil Ratio _____ Gravity _____

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

F

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

SERVICE POINT:
Medicine Lodge, KS

DATE <i>2/19/09</i>	SEC. <i>13</i>	TWP. <i>32S</i>	RANGE <i>11W</i>	CALLED OUT <i>12:00 Noon</i>	ON LOCATION <i>1:00 PM</i>	JOB START <i>1:45 PM</i>	JOB FINISH <i>4:30 PM</i>
LEASE <i>Hrencher</i>	WELL # <i>B-1</i>	LOCATION <i>Pixley, 1E, 1N, 1E, s into</i>			COUNTY <i>Barton</i>	STATE <i>KS</i>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR *Tom Cat*
 TYPE OF JOB *Surface*
 HOLE SIZE *12 1/4* T.D. *265*
 CASING SIZE *8 5/8* DEPTH *262*
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX *200* MINIMUM *-*
 MEAS. LINE SHOE JOINT *N/A*
 CEMENT LEFT IN CSG. *15*
 PERFS.
 DISPLACEMENT *15 3/4 Bbls total Fresh H₂O*

OWNER *R & B osg*
 CEMENT
 AMOUNT ORDERED *175 sx 60:40:3%acc + 2% gel*
& 100 sx "A" 3%acc + 2% gel

EQUIPMENT
 PUMP TRUCK CEMENTER *D. Felso*
#471 - 302 HELPER C. Balding
 BULK TRUCK
#364 DRIVER M. Thomsch
 BULK TRUCK
 # DRIVER

COMMON <i>A</i>	<i>205</i> SK @ <i>15.45</i>	<i>3167</i> ^{ES}
POZMIX	<i>70</i> SK @ <i>8.00</i>	<i>560</i> ^{ES}
GEL	<i>5</i> SK @ <i>20.80</i>	<i>104</i> ^{ES}
CHLORIDE	<i>10</i> SK @ <i>58.20</i>	<i>582</i> ^{ES}
ASC	@	
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING	<i>275</i> @ <i>2.40</i>	<i>660</i> ^{ES}
MILEAGE	<i>275 / 10 / 3</i> ^{Mile}	<i>80</i> ^{ES}
		TOTAL <i>5373</i> ^{ES}

REMARKS:

Pipe on Btm, Break Lic, Pump Spacer, Mix 175 sx 60:40 Cement, Stop Pump, Release Plug, Start Disp. w/ Fresh H₂O, Wash upon top of Plug, See increase in Pst, Slow Rate, Stop Pumpst 15 3/4 Bbls total disp., Shut in, Cement Did NOT Circ, Run 50' of 1", Pump 100 sx "A" 3% Cement, topped off

SERVICE

DEPTH OF JOB		
PUMP TRUCK CHARGE		<i>991</i> ^{ES}
EXTRA FOOTAGE	@	
MILEAGE	<i>5</i> @ <i>7.00</i>	<i>35</i> ^{ES}
MANIFOLD <i>Headcentral</i>	@	
	@	
	@	
		TOTAL <i>1026</i> ^{ES}

CHARGE TO: *R & B*
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<i>1 - Wooden Plug</i>	@	<i>68</i> ^{ES}
	@	
	@	
	@	
	@	
		TOTAL <i>68</i> ^{ES}

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 *DAUG SEARS*
FOR TOM FRAMPSON
 SIGNATURE *[Signature]*

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

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAY 28 2010
 CONSERVATION DIVISION
 WICHITA, KS

