

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31191
Name: R&B Oil & Gas, Inc.
Address 1: P.O. Box 195
Address 2: 912 N. Logan
City: Attica State: KS Zip: 67009 + 9217
Contact Person: Randy Newberry
Phone: (620) 254-7251
CONTRACTOR: License # 5929
Name: Duke Drilling Co., Inc.
Wellsite Geologist: Tim Pierce
Purchaser:

Designate Type of Completion:
New Well Re-Entry Workover
Oil WSW SWD SIOW
Gas D&A ENHR SIGW
OG GSW Temp. Abd.
CM (Coal Bed Methane)
Cathodic Other (Core, Expl., 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
Conv. to GSW
Plug Back: Plug Back Total Depth
Commingled Permit #:
Dual Completion Permit #:
SWD Permit #:
ENHR Permit #:
GSW Permit #:

06-12-10 06-18-10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 095-22206-00-00

Spot Description:
NE SW SE SW Sec. 20 Twp. 30 S. R. 8 East West
431 Feet from North / South Line of Section
1,774 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE NW SE SW

County: Kingman County, Kansas

Lease Name: CARRICK Well #: 2

Field Name: Spivey-Grabs-Basil

Producing Formation:

Elevation: Ground: 1593' Kelly Bushing: 1606'

Total Depth: 4560' Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 270 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

(Data must be collected from the Reserve Pit)

Chloride content: ppm Fluid volume: bbls

Dewatering method used:

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: License #:

Quarter Sec. Twp. S. R. East West

County: Permit #:

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.

AFFIDAVIT

I am the affiant and I hereby certify that 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: 9-7-2010

KCC Office Use ONLY

Letter of Confidentiality Received
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: PJA Dlg Date: 9/9/10

Operator Name: R&B Oil & Gas, Inc. Lease Name: CARRICK Well #: 2
 Sec. 20 Twp. 30 S. R. 8 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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual Compensated Porosity Dual Induction	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Mississippi 4319 (-2692)
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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"	23#	270'	60/40 Poz	185	3%cc 2%gel

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 <i>(Amount and Kind of Material Used)</i>	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 <i>(Explain)</i> _____	
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 <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Customer	R & B OIL GAS	Lease No.		Date	6-19-10
Lease	CARRICK	Well #	2		
Field Order #	L134	Station	Pratt	Casing	D.P.
Type Job	CNW P.T.A.	Depth	P.T.A.	County	WYMAN
		Formation		State	KS
				Legal Description	20-30-8

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth	Depth	From	To	Pre Pad		Max		5 Min.
Volume	Volume	From	To	Pad		Min		10 Min.
Max Press	Max Press	From	To	Frac		Avg		15 Min.
Well Connection	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush		Gas Volume		Total Load

Customer Representative		Station Manager	DAVE SCOTT	Treater	Robert Miller
Service Units	19867 27463 19832 71010				
Driver Names	William Lesley Phyo				

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1945					on loc softy mach
					P.T.A.
2015			15	1/	Plug @ 1400' w/ 35 sk
2023					SPACER cmt Disp w/ muv
2040			9	1/	Plug @ 950' w/ 35 sk
2049			7		SPACER cmt Disp
2105			9.5	1/	Plug @ 320' w/ 35 sk
2110			+9		SPACER cmt
2125			1		Disp
2145			6	1/	Plug Top 60' w/ 25 sk
2150			1/		Plug Ret w/ 15
			1/		Plug N.H w/ 10

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