

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

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 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 #: _____

August 18, 2010	August 19, 2010	August 19, 2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 003-24837-00-00

Spot Description: _____

NW SW NW NE Sec. 15 Twp. 21 S. R. 20 East West
4,345 Feet from North / South Line of Section
2,495 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Anderson

Lease Name: Ware Well #: 16-1

Field Name: Bush City Shoestring

Producing Formation: Squirrel

Elevation: Ground: 1,181' (est.) Kelly Bushing: _____

Total Depth: 858 ft. Plug Back Total Depth: 852.4 ft.

Amount of Surface Pipe Set and Cemented at: 20 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: 852.4 ft. w/ 84 sx cmt.

Drilling Fluid Management Plan

(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 #: _____

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: Donna Thanda

Title: Agent Date: November 23, 2010

KCC Office Use ONLY

Letter of Confidentiality Received

Date: _____ **RECEIVED**

Confidential Release Date: _____

Wireline Log Received

NOV 23 2010

Geologist Report Received

UIC Distribution

ALT I II III Approved by: Dtg

KCC WICHITA

Date: 12/2/10

Operator Name: Roger Kent dba R J Enterprises Lease Name: Ware Well #: 16-I
 Sec. 15 Twp. 21 S. R. 20 East West County: Anderson

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 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 type="checkbox"/> No <i>(If no, 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 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		7"		20'	Portland	84	Fly Ash
Production		2-7/8"		852.4'			

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
21	814.0 - 824.0		
21	828.0 - 838.0		

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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R. J. Enterprises
 22082 NE Neosho Rd
 Garnett, KS 66032

Ware 16-I

Start 8-18-¹⁰~~08~~

Finish 8-19-¹⁰~~08~~

2	soil	2	
3	lime	5	
17	shale	22	
45	lime	67	
161	shale	228	
31	lime	259	
24	shale	283	
8	lime	291	
3	shale	294	set 20' 7"
44	lime	338	ran 852.4' 2 7/8
6	shale	344	cemented
43	lime	387	to surface 84 sxs
4	shale	391	
26	lime	417	
4	shale	421	
16	lime	437	
165	shale	602	
21	lime	623	
59	shale	682	
28	lime	710	
25	shale	735	
8	lime	743	
20	shale	763	
6	lime	769	
9	shale	778	
9	lime	787	
19	shale	806	
9	sandy shale	815	odor
4	bk sand	819	show
24	bk sand	843	good show
3	dk sand	846	show
12	shale	858	T.D.

RECEIVED
 NOV 23 2010
 KCC WICHITA

GARNETT TRUE VALUE HOMECENTER

410 N Maple
Garnett, KS 66032
(785) 448-7108 FAX (785) 448-7135

Merchant Copy

INVOICE

THIS COPY MUST REMAIN AT
MERCHANT AT ALL TIMES!

Page: 1

Invoice: **10180153**

Special : Time: 14:22:28
Instructions : Ship Date: 08/16/10
Sale rep #: MIKE Acct rep code: Invoice Date: 08/16/10
Due Date: 07/08/10

Sold To: **ROGER KENT** Ship To: **ROGER KENT**
22062 NE NEOSHO RD (785) 448-6995 **NOT FOR HOUSE USE**
GARNETT, KS 66022 (785) 448-6995

Customer #: 0000357

Customer PO:

Order By:

874
T 101

ORDER	SHIP	LI	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
-10.00	-10.00	P	PL	CPMP	MONARCH PALLET	14.0000 PL	14.0000	-140.00
360.00	360.00	P	BAG	CPFC	PORTLAND CEMENT-94#	8.0900 BAG	8.0900	2912.40

FILLED BY _____ SHIP VIA ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION X	CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ Taxable 2772.40 Non-taxable 0.00 Tax # _____	Sales total \$2772.40 Sales tax 188.93 TOTAL \$2960.93
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1 - Merchant Copy



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NOV 23 2010
KCC WICHITA