

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 Northeast 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

API No. 15 - 001-30163-00-00  
Spot Description: \_\_\_\_\_  
E2 NE SE NW Sec. 34 Twp. 23 S. R. 21  East  West  
3,630 Feet from  North /  South Line of Section  
2,650 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Allen  
Lease Name: Stanley Well #: 6-1  
Field Name: Davis-Bronson

Producing Formation: Bartlesville  
Elevation: Ground: 1,001 ft. Kelly Bushing: n/a  
Total Depth: 768 ft. Plug Back Total Depth: 755.7 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: 755.7 ft. w/ 72 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 #: \_\_\_\_\_

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  WSW  SWD  SLOW  
 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 #: \_\_\_\_\_  
April 15, 2011 April 19, 2011 April 21, 2011  
Spud Date or Date Reached TD Completion Date or Recompletion Date

**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: July 1, 2011

**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: Dlg Date: 7/13/11

Operator Name: Roger Kent dba R J Enterprises Lease Name: Stanley Well #: 6-1  
 Sec. 34 Twp. 23 S. R. 21  East  West County: Allen

**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 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run: <b>GAMMA RAY/NEUTRON/CCL</b>	<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'	Portland	72 sxs	
Production		2-7/8"		755.7'			

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
9	736.0 - 740.0		

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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**GARNETT TRUE VALUE HOMECENTER**  
 410 N Maple  
 Garnett, KS 66032  
 (785) 448-7108 FAX (785) 448-7135

Merchant Copy  
**INVOICE**  
THIS COPY IS NOT VALID AT ALL STORES

Page: 1 Invoice: **10170745**

Special Instructions: Time: 12:59:33  
 Ship Date: 04/13/11  
 Invoice Date: 04/13/11  
 Due Date: 08/08/11

Date rep #: MIKE Acct rep code:  
 Bill To: **ROGER KENT** Ship To: **ROGER KENT**  
**22022 NE NEOSHO RD (703) 448-0000 NOT FOR HOUSE USE**  
**GARNETT, KS 66032 (703) 448-0000**

Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Unit	PRICED	EXTENSION
0.00	0.00	P	PO	78818	PRESSURE TREATED-PS 2 X 4 X 16' OCA	099.7010 ucp	01.0000	85.97

RECEIVED

JUN 29 2011

KCC WICHITA

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	859.97
SHIP VIA Customer Pick up				Taxable	85.97
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	7.97
TBP 100				<b>TOTAL</b>	<b>867.94</b>

1 - Merchant Copy

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 00

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 Garnett, KS 66032  
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Statement Copy  
**INVOICE**  
PLEASE REFER TO INVOICE NUMBER ON ALL CORRESPONDENCE

Page: 1 Invoice: **10170788**

Special Instructions: Time: 18:48:47  
 Ship Date: 04/13/11  
 Invoice Date: 04/13/11  
 Due Date: 08/08/11

Date rep #: MIKE Acct rep code:  
 Bill To: **ROGER KENT** Ship To: **ROGER KENT**  
**22022 NE NEOSHO RD (703) 448-0000 NOT FOR HOUSE USE**  
**GARNETT, KS 66032 (703) 448-0000**

Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	All Units/Unit	PRICE	EXTENSION
0.00	0.00	P	PL	OPMP	MONARCH PALLET	14.0000 PL	14.0000	20.00
840.00	840.00	P	BAG	OPPC	Credited from Invoice 10169360 PORTLAND CEMENT-94#	8.4900 BAG	8.4900	4884.60

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$4856.60
SHIP VIA ANDERSON COUNTY				Taxable	4886.60
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	355.41
				<b>TOTAL</b>	<b>5242.01</b>

3 - Statement Copy

