

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

**RECEIVED**  
**JUN 29 2011**  
**KCC WICHITA**

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 28, 2011    April 29, 2011    May 1, 2011  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 001-30161-00-00  
Spot Description: \_\_\_\_\_  
E2 SE SE NW Sec. 34 Twp. 23 S. R. 21  East  West  
2,970 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 #: 4-1  
Field Name: Davis-Bronson  
Producing Formation: Bartlesville  
Elevation: Ground: 993 ft. Kelly Bushing: n/a  
Total Depth: 753 ft. Plug Back Total Depth: 747.3 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: 747.3 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 #: \_\_\_\_\_

**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 #: 4-1  
 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"		747.3'			

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
11	729.0 - 734.0		

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) (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 MUST REMAIN AT  
 MERCHANT AT ALL TIMES

Page: 1 Invoice: **10170755**

Special Instructions: \_\_\_\_\_ Time: **18:59:38**  
 Date rep to: **MIKE** Next rep code: \_\_\_\_\_ Ship Date: **04/18/11**  
 Sold To: **ROGER KENT** Ship To: **ROGER KENT** Invoice Date: **04/18/11**  
**28082 NE NEOSHO RD** (785) 448-8998 **NOT FOR HOUSE USE** Due Date: **05/08/11**  
**GARNETT, KS 66032** (785) 448-8998

Customer #: **0000387** Customer PO: \_\_\_\_\_ Order By: \_\_\_\_\_

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
0.00	0.00	P	PL	78616	PRESSURE TREATED-#2 6 X 8 X 16' OGA	998.7010	81.6900	89.87

KCC WICHITA  
 JUN 29 2011  
 RECEIVED

FILLED BY \_\_\_\_\_ CHECKED BY \_\_\_\_\_ DATE SHIPPED \_\_\_\_\_ DRIVER \_\_\_\_\_  
 SHIP VIA  Customer Pick up  
 RECEIVED COMPLETE AND IN GOOD CONDITION  
 Taxable **89.87**  
 Non-taxable **0.00**  
 Tax # \_\_\_\_\_  
 Sales total **89.87**  
 Sales tax **7.97**  
 TSP: 100 **TOTAL \$103.84**

1 - Merchant Copy



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

Statement Copy  
**INVOICE**  
 PLEASE REFER TO INVOICE NUMBER  
 ON ALL CORRESPONDENCE

Page: 1 Invoice: **10170755**

Special Instructions: \_\_\_\_\_ Time: **18:42:47**  
 Date rep to: **MIKE** Next rep code: \_\_\_\_\_ Ship Date: **04/18/11**  
 Sold To: **ROGER KENT** Ship To: **ROGER KENT** Invoice Date: **04/18/11**  
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Customer #: **0000387** Customer PO: \_\_\_\_\_ Order By: \_\_\_\_\_

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
-0.00	-0.00	P	PL	OPMP	MONARCH PALLET			
540.00	540.00	P	BAG	OPPO	Credited from Invoice 10189360 PORTLAND CEMENT-94#			
						14.0000 PL	14.0000	-88.00
						8.4900 BAG	8.4900	4584.60

FILLED BY \_\_\_\_\_ CHECKED BY \_\_\_\_\_ DATE SHIPPED \_\_\_\_\_ DRIVER \_\_\_\_\_  
 SHIP VIA  ANDERSON COUNTY  
 RECEIVED COMPLETE AND IN GOOD CONDITION  
 Taxable **4584.60**  
 Non-taxable **0.00**  
 Tax # \_\_\_\_\_  
 Sales total **\$4586.60**  
 Sales tax **388.41**

3 - Statement Copy

**TOTAL \$4975.01**

