KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1067673

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 #	API No. 15 - 15-003-25132-00-00
Name: Kent, Roger dba R J Enterprises	Spot Description:
Address 1: 22082 NE Neosho Rd	SE_NW_NW_NW Sec. 18 Twp. 21 S. R. 21  Seast West
Address 2:	
City: GARNETT State: KS Zip: 66032 + 1918	4658 Feet from ▼ East / □ West Line of Section
Contact Person: Roger Kent	Footages Calculated from Nearest Outside Section Corner:
Phone: ( 785 ) 448-6995	□ NE □ NW ☑ SE □ SW
CONTRACTOR: License #3728	County: Anderson
Name: _ Kent, Roger dba R J Enterprises	Lease Name: Hill Well #: 22
Wellsite Geologist: n/a	Field Name: Bush City Shoestring
Purchaser: n/a	Producing Formation: Squirrel
Designate Type of Completion:	Elevation: Ground: 1030 Kelly Bushing: 1030
✓ New Well Re-Entry Workover	Total Depth: 689 Plug Back Total Depth: 683
☑ Oil □ wsw ¹ □ swd □ slow	Amount of Surface Pipe Set and Cemented at: 20 Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ✓ No
☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set:Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from: 0
Cathodic Other (Core, Expl., etc.):	feet depth to: 683 w/ 72 sx cmt.
If Workover/Re-entry: Old Well Info as follows:	JA GING
Operator:	Delling Fluid Management Plan
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: 0 ppm Fluid volume: 0 bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD	Dewatering method used: Evaporated
Conv. to GSW	bewatering method used.
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec TwpS. R
GSW Permit #:	County: Permit #:
08/12/2011 08/15/2011 08/15/2011	
Spud Date or Date Reached TD Completion Date or	·

## **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.

Submitted Electronically

KCC Office Use ONLY
Letter of Confidentiality Received
Date:
Confidential Release Date:
☑ Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I I III Approved by: Deenna Garrisor Date: 11/16/2011

Side Two



Operator Name: Ken	t, Roger dba R .	J Enterpri	ses	Lease I	Name: _	Hill		_ Well #:22_	
Sec. 18 Twp.21	s. R. 21	✓ East	West	County	Ande	rson	<del></del>		
INSTRUCTIONS: Sho time tool open and clos recovery, and flow rate line Logs surveyed. At	sed, flowing and sho s if gas to surface to	ut-in pressu est, along w	res, whether s ith final chart(	hut-in pres	sure read	ched static level,	hydrostatic pres	sures, bottom h	ole temperature, fluid
Drill Stem Tests Taken (Attach Additional S	heets)	Ye	s 🗸 No		<b>V</b> Lo	og Formatio	n (Top), Depth a	nd Datum	Sample
Samples Sent to Geole	ogical Survey	☐ Ye	s √No		Nam	e idy shale		Тор 644	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	l Electronically	Ye  Ye  Ye  Ye	s ☑No s ☐No		shale			689	
List All E. Logs Run:								•	
Gamma Ray/Neutro	n/CCL								
		Repo		RECORD	✓ Ne urface, inte	ew Used ermediate, product	ion, etc.	·	
Purpose of String	Size Hole Drilled	Size	e Casing (In O.D.)	Wei	ght	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
surface	9.875	7		10		20	Portland	72	
production	5.625	2.875		10		683		72	
			ADDITIONAL	CEMENT	NC / SOI	IEEZE DECORD			
Purpose: Perforate	Depth Top Bottom	Туре	of Cement	1	# Sacks Used Type and Percent Additiv				
Protect Casing Plug Back TD Plug Off Zone	-							<u> </u>	
Shots Per Foot			D - Bridge Plug Each Interval Pe				acture, Shot, Ceme mount and Kind of N		d Depth
20	625.0 - 635.0						•		
TUBING RECORD:	Size:	Set At:		Packer A	At:	Liner Run:	Yes N	0	
Date of First, Resumed	Production, SWD or E	NHR.	Producing Me	thod:	ng [	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wa	ter E	Bbls.	Gas-Oil Ratio	Gravity
	ON OF GAS:		Open Hole	METHOD O	_		mmingled	PRODUCTI	ON INTERVAL:
Vented Sold	l Used on Leas bmit ACO-18.)		Other (Specify) _		(Submit		bmit ACO-4)		<u> </u>

<b>CARNETT</b>	TRUE VALUE HOMEC 410 N Maga Garnat KB 660092	enter
	410 N Maple	
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INVOICE
TO SECURITY OF THE SECUR

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GARRETT, NO COLE	(796) 418-4098	
Customer 9 0000557	Outlant PO	Orași Syr

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GARNETT TRUE VALUE HOMECENTER	₹
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Gemett, K8 66032 (785) 448-7 (06 FAX (785) 448-7135 Merchant Copy INVOICE TRANSMITTERM

Page: 1		INVICE 10174370
Short :	And top code:	Times 1 8:58105 Bits Opins 07/19/11 Invalve Date: 07/19/11 Date Sele: 08/08/11
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GARNETT, ICS SOUR	(FEE) 445-0000	
Output 3 0000057	Quiterer PO: Gris	194

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