



KANSAS CORPORATION COMMISSION 1065976  
OIL & GAS CONSERVATION DIVISION

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: Kent, Roger dba R J Enterprises  
Address 1: 22082 NE Neosho Rd  
Address 2: \_\_\_\_\_  
City: GARNETT State: KS Zip: 66032 + 1918  
Contact Person: Roger Kent  
Phone: ( 785 ) 448-6995  
CONTRACTOR: License # 3728  
Name: Kent, Roger 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 #: \_\_\_\_\_  
06/15/2011    06/20/2011    06/20/2011  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-001-30197-00-00  
Spot Description: \_\_\_\_\_  
NE SW NW SE Sec. 34 Twp. 23 S. R. 21  East  West  
1840 Feet from  North /  South Line of Section  
2146 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Allen  
Lease Name: NORMAN UNIT Well #: 16-N  
Field Name: Davis-Bronson  
Producing Formation: Bartlesville  
Elevation: Ground: 949 Kelly Bushing: 949  
Total Depth: 727 Plug Back Total Depth: 721  
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: 0  
feet depth to: 721 w/ 72 sx cmt.

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content: 0 ppm Fluid volume: 0 bbls  
Dewatering method used: Evaporated  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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  II  III Approved by: Deanna Garrick Date: 10/25/2011



1065976

Operator Name: Kent, Roger dba R J Enterprises Lease Name: NORMAN UNIT Well #: 16-N  
 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 checked="" 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  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>oil sand</td> <td>682</td> <td></td> </tr> <tr> <td>shale</td> <td>727</td> <td></td> </tr> </table>	Name	Top	Datum	oil sand	682		shale	727	
Name	Top	Datum								
oil sand	682									
shale	727									

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	9.875	7	10	20	Portland	72	
production	5.625	2.875	10	721		72	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ 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
13	676.0 - 682.0		

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, MO 65038  
 (785) 448-7100 FAX (785) 448-7188

Merchant Copy  
**INVOICE**  
 TELEPHONIC ORDER

Page 1 Invoice: 10178758

Order: 100000  
 Order Date: 08/07/11  
 Order Date: 08/07/11  
 Order Date: 07/08/11

Ship to: **ROBERT HERTY**  
 2002 N8 HIGHWAY RD  
 GARNETT, MO 65038

Bill to: **ROBERT HERTY**  
 (785) 448-0000 NOT FOR HOUSE USE

Customer # 000087 Customer PO# Order #

ORDER	SHIP	QTY	UNIT	ITEM#	DESCRIPTION	AR Price/Unit	PRICE	EXTENSION
880.00	880.00	8	BAG	OPFA	PLY ASH MIX 80 LBS PER BAG	8.0000	64.000	6416.40
7.00	7.00	1	PL	OPMP	MCKNICH PALLET	14.0000	14.000	98.00
848.00	848.00	8	BAG	OPPO	PORTLAND CEMENT-94	8.4000	67.200	684.80

Subtotal: 6894.00

SHIP VIA ANDERSON COUNTY  
 (RESERVED FOR LOCAL DELIVERY ONLY)

Freight: 5086.00  
 Tax: 0.00  
 Subtotal: 691.00

**TOTAL: 691.00**

1 - Merchant Copy

UNLESS SPECIALLY MARKED OR INDICATED BY OTHER MARKS THIS ORDER IS SUBJECT TO OUR STANDARD TERMS AND CONDITIONS WHICH ARE AVAILABLE AT THE TIME OF ORDERING.

**GARNETT TRUE VALUE HOMECENTER**  
 410 N Maple  
 Garnett, MO 65038  
 (785) 448-7100 FAX (785) 448-7188

Merchant Copy  
**INVOICE**  
 TELEPHONIC ORDER

Page 1 Invoice: 10178800

Order: 100000  
 Order Date: 08/04/11  
 Order Date: 08/04/11  
 Order Date: 07/08/11

Ship to: **JOE**

Bill to: **ROBERT HERTY**  
 2002 N8 HIGHWAY RD  
 GARNETT, MO 65038

Customer # 000087 Customer PO# Order #

ORDER	SHIP	QTY	UNIT	ITEM#	DESCRIPTION	AR Price/Unit	PRICE	EXTENSION
8.00	8.00	1	PL	48000	70018 GLV ROLL VALLEY12000PT	48.0000	48.000	87.80

Subtotal: 87.80

SHIP VIA ANDERSON COUNTY  
 (RESERVED FOR LOCAL DELIVERY ONLY)

Freight: 87.80  
 Tax: 0.00  
 Subtotal: 7.51

*John Miller*

**TOTAL: 7.51**

1 - Merchant Copy

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