



KANSAS CORPORATION COMMISSION 1069571
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 #: _____

<u>09/08/2011</u>	<u>09/13/2011</u>	<u>09/13/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25187-00-00
Spot Description: _____
NW NW NW NE Sec. 18 Twp. 21 S. R. 21 East West
5244 Feet from North / South Line of Section
2329 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Anderson
Lease Name: KENT Well #: 24
Field Name: Bush City Shoestring

Producing Formation: Squirrel
Elevation: Ground: 1014 Kelly Bushing: 1014
Total Depth: 691 Plug Back Total Depth: 685
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: 685 w/ 72 sx cm.

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 Garrison Date: 12/05/2011



1069571

Operator Name: Kent, Roger dba R J Enterprises Lease Name: KENT Well #: 24
 Sec. 18 Twp. 21 S. R. 21 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 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 type="checkbox"/> Yes <input checked="" 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: Drillers Log	<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>dk sandy shale</td> <td>644</td> <td></td> </tr> <tr> <td>shale</td> <td>691</td> <td></td> </tr> </table>	Name	Top	Datum	dk sandy shale	644		shale	691	
Name	Top	Datum								
dk sandy shale	644									
shale	691									

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	685		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
20	611.0 - 621.0		
20	622.0 - 632.0		

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 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
 (789) 448-7108 FAX (789) 448-7195

Merchant Copy
INVOICE
 THE GARNETT TRUE VALUE

Invoice: 10178340

Page 1 of 1
 Date: 08/21/11
 Ship Date: 08/21/11
 Invoice Date: 08/21/11
 Order No: 08/21/11
 Ship To: ROBERT KENT
 8088 NE HOSCH RD
 GARNETT, MO 65038
 (789) 448-8908 NOT FOR HOUSE USE
 Order # 000057
 Order Pk: _____
 Order Pk: _____

CHGR	SHIP	L	U	TRM	DESCRIPTION	AS PER LHM	PRIC	EXTENSION
680.00	PL	SA	OP	PA	PLY ASH MIX 60 LBS PER BAG	6.0000	14.0000	84.0000
18.00	PL	SA	OP	PA	MCKAYH PALLET	14.0000	14.0000	252.0000
840.00	PL	SA	OP	PA	PORTLAND CEMENT-4#	6.4900	8.4900	484.4400
CREDITED FROM INVOICE 1017878 14.0000 PL 14.0000 PL 14.0000 PL								
TOTAL 10178340 14.0000 PL 14.0000 PL 14.0000 PL								

1 - Merchant copy

Invoice: 10178340

Page 1 of 1
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GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, MO 65038
 (789) 448-7108 FAX (789) 448-7195

Merchant Copy
INVOICE
 THE GARNETT TRUE VALUE

Invoice: 10178782

Page 1 of 1
 Date: 08/21/11
 Ship Date: 08/21/11
 Invoice Date: 08/21/11
 Order No: 08/21/11
 Ship To: ROBERT KENT
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 GARNETT, MO 65038
 (789) 448-8908 NOT FOR HOUSE USE
 Order # 000057
 Order Pk: _____
 Order Pk: _____

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CREDITED FROM INVOICE 1017878 14.0000 PL 14.0000 PL 14.0000 PL								
TOTAL 10178782 14.0000 PL 14.0000 PL 14.0000 PL								

1 - Merchant copy

Invoice: 10178782

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 Order # 000057
 Order Pk: _____
 Order Pk: _____

R.J. Enterprise
22082 NE Neosho RD
Garnett, KS 66032

Kent # 24

Start 9-8-2011

Finish 9-13-2011

4	soil	4	
12	clay	16	
30	lime	46	
76	shale	122	
9	lime	131	
5	shale	136	
42	lime	178	
7	shale	185	set 20' 7"
25	lime	210	ran 684.7' 2 7/8
5	shale	215	cemented to surface 72 sxs
17	lime	232	
170	shale	402	
15	lime	417	
58	shale	475	
30	lime	505	
25	shale	530	
9	lime	539	
19	shale	558	
7	lime	565	
10	shale	575	
6	lime	581	
11	shale	592	
6	sandy shale	598	Odor
13	sandy shale	611	Good show
4	Bkn sand	615	Good show
8	sandy shale	623	Good show
13	Oil sand	636	Good show
4	Bkn sand	640	Show
4	Dk sandy shale	644	
47	shale	691	T.D.