



KANSAS CORPORATION COMMISSION 1070289  
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 #: \_\_\_\_\_  
10/12/2011    10/13/2011    10/13/2011  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 15-003-25215-00-00  
Spot Description: \_\_\_\_\_  
NE NW SE NE Sec. 15 Twp. 21 S. R. 20  East  West  
3787 Feet from  North /  South Line of Section  
986 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Anderson  
Lease Name: WARE Well #: 30-A  
Field Name: Bush City Shoestring  
Producing Formation: Squirrel  
Elevation: Ground: 1177 Kelly Bushing: 1177  
Total Depth: 852 Plug Back Total Depth: 846  
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: 846 w/ 90 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 Gantico Date: 12/15/2011



1070289

Operator Name: Kent, Roger dba R J Enterprises Lease Name: WARE Well #: 30-A  
 Sec. 15 Twp 21 S. R. 20  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 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>dk sand</td> <td>822</td> <td></td> </tr> <tr> <td>shale</td> <td>852</td> <td></td> </tr> </table>	Name	Top	Datum	dk sand	822		shale	852	
Name	Top	Datum								
dk sand	822									
shale	852									

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	90	
production	5.625	2.875	10	846		90	

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	779.0 - 789.0		
20	791.0 - 801.0		
20	805.0 - 815.0		

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
--	--	---

**R.J. Enterprise  
22808 NE Neosho RD  
Garnett, KS 66032**

**Ware 30-A**

Start 10-12-2011

Finish 10-13-2011

3	soil	3	
5	clay	8	
30	lime	38	
165	shale	203	
26	lime	229	
73	shale	302	
8	lime	310	
6	shale	316	set 20' 7"
43	lime	359	ran 845.8' 2 7/8
16	shale	375	cemented to surface 90 sxs
17	lime	392	
6	shale	398	
14	lime	412	
166	shale	578	
20	lime	598	
56	shale	654	
29	lime	683	
22	shale	705	
13	lime	718	
15	shale	733	
9	lime	742	
8	shale	750	
8	lime	758	
17	shale	775	
4	sandy shale	779	odor
37	Bkn sand	816	good show
6	Dk snad	822	show
30	Shale	852	T.D.

**GARNETT TRUE VALUE HOMECENTER**

410 N Maple  
Garnett, KS 66032  
(785) 448-7106 FAX (785) 448-7108

Merchant Copy

**INVOICE**

THIS COPY IS NOT VALID UNLESS  
SIGNATURE AT ALL TIMES

Page: 1

Invoice: 10177281

Special:	Order:	08/08/11
Subtotal:	Ship Date:	10/11/11
Est. up to: JM	Invoice Date:	10/11/11
	Due Date:	11/08/11

Ship To: ROGER KENT  
2808 W. KINGS RD  
GARNETT, KS 66032  
Ship To: ROGER KENT  
(785) 448-8988 NOT FOR HOUSE USE

Customer #: 000857 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM	DESCRIPTION	AS Priced/Per	PRICE	EXTENSION
17.00	17.00	P	PL	OPMP	MONARCH PALLEY	18.0000 PL	18.0000	324.00
890.00	890.00	P	BAG	OPPO	PORTLAND CEMENT-948	8.9800 PL	8.9800	4488.70

FILLED BY: _____ ORDERED BY: _____ DATE SHIPPED: _____ DRIVER: _____ SHIP VIA: ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION X	Taxable: 4784.70 Non-taxable: 0.00 Tax #: _____ Sales tax: 870.87	Subtotal: 84784.70 Sales tax: 870.87 <b>TOTAL: 85655.57</b>
---	--	---

1 - Merchant Copy

PLEASE PRINT CLEARLY ABOVE LINE(S) AND SIGN BELOW LINE(S) (PRINT NAME AND ADDRESS OF THE CUSTOMER)

**GARNETT TRUE VALUE HOMECENTER**

410 N Maple  
Garnett, KS 66032  
(785) 448-7106 FAX (785) 448-7108

Merchant Copy

**INVOICE**

THIS COPY IS NOT VALID UNLESS  
SIGNATURE AT ALL TIMES

Page: 1

Invoice: 10177318

Special:	Order:	12/17/11
Subtotal:	Ship Date:	10/11/11
Est. up to: MIKE	Invoice Date:	10/11/11
	Due Date:	11/08/11

Ship To: ROGER KENT  
2808 W. KINGS RD  
GARNETT, KS 66032  
Ship To: ROGER KENT  
(785) 448-8988 NOT FOR HOUSE USE

Customer #: 000857 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM	DESCRIPTION	AS Priced/Per	PRICE	EXTENSION
890.00	890.00	P	BAG	OPPA	PLY ASH MIX 80 LBS PER BAG	8.0800 PL	8.0800	8410.40
1.00	1.00	P	PL	OPMP	MONARCH PALLEY	18.0000 PL	18.0000	18.00

FILLED BY: _____ ORDERED BY: _____ DATE SHIPPED: _____ DRIVER: _____ SHIP VIA: ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION X	Taxable: 8428.40 Non-taxable: 0.00 Tax #: _____ Sales tax: 267.19	Subtotal: 8395.40 Sales tax: 267.19 <b>TOTAL: 8662.59</b>
---	--	---

1 - Merchant Copy

PLEASE PRINT CLEARLY ABOVE LINE(S) AND SIGN BELOW LINE(S) (PRINT NAME AND ADDRESS OF THE CUSTOMER)