



KANSAS CORPORATION COMMISSION 1071646
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 #: _____
10/20/2011 10/24/2011 10/24/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-003-25212-00-00
Spot Description: _____
NW SW SW NW Sec. 15 Twp. 21 S. R. 20 East West
2977 Feet from North / South Line of Section
4974 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: WEISS Well #: 2-1
Field Name: Bush City Shoestring
Producing Formation: Squirrel
Elevation: Ground: 1179 Kelly Bushing: 1179
Total Depth: 846 Plug Back Total Depth: 841
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: 841 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: Doanne Garbar Date: 01/11/2012



1071646

Operator Name: Kent, Roger dba R J Enterprises Lease Name: WEISS Well #: 2-1
 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>Ok sand</td> <td>831</td> <td></td> </tr> <tr> <td>shale</td> <td>846</td> <td></td> </tr> </table>	Name	Top	Datum	Ok sand	831		shale	846	
Name	Top	Datum								
Ok sand	831									
shale	846									

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	841		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	797.0 - 807.0		
20	810.0 - 820.0		

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

Weiss 2-1

Start 10-20-2011

Finish 10-24-2011

2	soil	2	
3	clay rock	5	
47	lime	52	
156	shale	208	
33	lime	241	
62	shale	303	
17	lime	320	
5	shale	325	set 20' 7"
39	lime	364	ran 840.6' 2 7/8
8	shale	372	cemented to surface 90 sxs
29	lime	401	
4	shale	405	
16	lime	421	
163	shale	584	
23	lime	607	
58	shale	665	
30	lime	695	
24	shale	719	
15	lime	734	
13	shale	747	
7	lime	754	
10	shale	764	
9	lime	773	
14	shale	787	
12	sandy shale	799	odor
10	Bkn sand	809	good show
2	sandy shale	811	show
7	bkn sand	818	good show
5	oil sand	823	good show
8	Dk sand	831	show
15	shale	846	T.D.

GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, MO 65023
 (785) 448-7108 FAX (785) 448-7185

Merchant Copy
INVOICE
 TELETYPE UNIT

Page: 1 Invoice: 10177281

Order: 10177281 Type: 080218
 Ship Date: 10/11/11
 Invoice Date: 10/11/11
 Ship Date: 11/08/11

Ship to: JMI
 Bill to: ROBERT KENT
 8888 NE WEDDING RD
 GARNETT, MO 65023
 (785) 448-8888

Customer #: 000087 Customer PO: Order By:

ORDER	QTY	UOM	ITEM	DESCRIPTION	AS Priced	PRICE	EXTENSION
17.00	17.00	P. PL	OPMP	MONARCH PALLET	18,000 R.	18,000	306.00
880.00	880.00	P. BAG	OPPO	PORTLAND CEMENT-94#	8,400 lbs	8,400	488.70

PAID BY CHECKS BY DATE SHIP/DIVISION

SHIP VIA ANDERSON COUNTY
 FURNISH COMPLETE P&H INFORMATION

Taxable 4784.70
 Non-taxable 0.00
 Tax 0

Subtotal 5478.40
 Sales Tax 870.87

TOTAL 6349.27

1 - Merchant Copy



GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, MO 65023
 (785) 448-7108 FAX (785) 448-7185

Merchant Copy
INVOICE
 TELETYPE UNIT

Page: 1 Invoice: 10177318

Order: 10177318 Type: 1011718
 Ship Date: 10/11/11
 Invoice Date: 10/11/11
 Ship Date: 11/08/11

Ship to: MPCE
 Bill to: ROBERT KENT
 8888 NE WEDDING RD
 GARNETT, MO 65023
 (785) 448-8888

Customer #: 000087 Customer PO: Order By:

ORDER	QTY	UOM	ITEM	DESCRIPTION	AS Priced	PRICE	EXTENSION
880.00	880.00	P. BAG	OPPA	FLY ASH MIX 80 LBS PER BAG	8,800 and	8,800	840.40
1.00	1.00	P. PL	OPMP	MONARCH PALLET	18,000 R.	18,000	18.00

PAID BY CHECKS BY DATE SHIP/DIVISION

SHIP VIA ANDERSON COUNTY
 FURNISH COMPLETE P&H INFORMATION

Taxable 8488.40
 Non-taxable 0.00
 Tax 0

Subtotal 8488.40
 Sales Tax 857.19

TOTAL 9345.59

1 - Merchant Copy

