



KANSAS CORPORATION COMMISSION 1071590
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 SLOW
 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 #: _____
10/25/2011 10/26/2011 10/26/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-003-25230-00-00
Spot Description: _____
NW NE SE NE Sec. 16 Twp. 21 S. R. 20 East West
3655 Feet from North / South Line of Section
434 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: PUGSLEY Well #: 9-1
Field Name: Bush City Shoestring
Producing Formation: Squirrel
Elevation: Ground: 1168 Kelly Bushing: 1168
Total Depth: 850 Plug Back Total Depth: 845
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: 845 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 Garrick Date: 01/11/2012



1071590

Operator Name: Kent, Roger dba R J Enterprises Lease Name: PUGSLEY Well #: 9-1
 Sec. 16 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>Dark sand</td> <td>834</td> <td></td> </tr> <tr> <td>shale</td> <td>850</td> <td></td> </tr> </table>	Name	Top	Datum	Dark sand	834		shale	850	
Name	Top	Datum								
Dark sand	834									
shale	850									

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	845		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	801.0 - 811.0		
13	812.0 - 818.0		
17	822.0 - 830.0		

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 Bbbs.	Gas Mcf	Water Bbbs. 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

Pugsley 9-1

Start 10-25-2011

Finish 10-26-2011

3	soil	3	
11	clay rock	14	
38	lime	52	
160	shale	212	
31	lime	243	
69	shale	312	
10	lime	322	
5	shale	327	set 20' 7"
40	lime	367	ran 844.5' 2 7/8
22	shale	389	cemented to surface 90 sxs
14	lime	403	
7	shale	410	
16	lime	426	
166	shale	592	
21	lime	613	
59	shale	672	
28	lime	700	
23	shale	723	
15	lime	738	
13	shale	751	
8	lime	759	
7	shale	766	
7	lime	773	
12	shale	785	
13	sandy shale	798	odor
17	Bkn sand	815	good show
4	sandy shale	819	good show
11	Bkn sand	830	good show
4	Dk sand	834	show
16	shale	850	T.D.

GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, KS 65032
 (786) 448-7108 FAX (786) 448-7136

Merchant Copy
INVOICE
 THE COPY MUST BE PRINTED
 MERCHANT AT ALL TIMES

Page: 1 Invoice: 10177666

Order #: 000067 Customer PO: Order By:

Ship To: **ROGER KENT**
 8288 N MEDANO RD
 GARNETT, KS 65032
 (786) 448-6888

Bill To: **MARILYN**
 (786) 448-6888

Time: 08:18:00
 Ship Date: 10/21/11
 Invoice Date: 10/21/11
 Due Date: 11/08/11

Not for house use

ORDER	QTY	UOM	ITEM	DESCRIPTION	ALL PRICES	PRICE	EXTENSION	
89.00	26.00	P	BAG	OPPO	PORTLAND CEMENT-94	6.4900 ea	6.4900	268.72

ORDERED BY: _____ ORDERED BY DATE: _____ ORDER BY: _____

SHIP VIA: Customer Pick up
 RECEIVED COMPLETE AND IN GOOD CONDITION

Terms: Net 30
 Non-liable
 Tax: 22.00

Subtotal: \$286.72
 Sales tax: 22.00
TOTAL: \$308.72

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GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, KS 65032
 (786) 448-7108 FAX (786) 448-7136

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Page: 1 Invoice: 10177714

Order #: 000067 Customer PO: Order By:

Ship To: **ROGER KENT**
 8288 N MEDANO RD
 GARNETT, KS 65032
 (786) 448-6888

Bill To: **ROGER KENT**
 (786) 448-6888

Time: 10:28:28
 Ship Date: 10/21/11
 Invoice Date: 10/21/11
 Due Date: 11/08/11

Not for house use

ORDER	QTY	UOM	ITEM	DESCRIPTION	ALL PRICES	PRICE	EXTENSION	
890.00	890.00	P	BAG	OPPO	FLY AWH MIX 80 LBS PER BAG	6.0900 ea	6.0900	8410.40
8.00	8.00	P	PL	OPPO	MONARCH PALLET	18.0000 PL	18.0000	80.00
840.00	840.00	P	BAG	OPPO	PORTLAND CEMENT-94	6.4900 ea	6.4900	4884.80

ORDERED BY: _____ ORDERED BY DATE: _____ ORDER BY: _____

SHIP VIA: ANDERSON COUNTY
 RECEIVED COMPLETE AND IN GOOD CONDITION

Terms: Net 30
 Non-liable
 Tax: 825.80

Subtotal: \$2025.00
 Sales tax: 825.80
TOTAL: \$2850.80

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