



KANSAS CORPORATION COMMISSION 1074542
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>11/25/2011</u>	<u>11/29/2011</u>	<u>11/29/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25246-00-00
Spot Description: _____
SE SE SE SE Sec. 12 Twp. 21 S. R. 19 East West
166 Feet from North / South Line of Section
258 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Anderson
Lease Name: JS Johnson Well #: 4-1
Field Name: Bush City Shoestring
Producing Formation: Squirrel
Elevation: Ground: 1011 Kelly Bushing: 1011
Total Depth: 784 Plug Back Total Depth: 778
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: 778 w/ 78 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 Garrison Date: 02/21/2012



1074542

Operator Name: Kent, Roger dba R J Enterprises Lease Name: JS Johnson Well #: 4-1
 Sec. 12 Twp. 21 S. R. 19 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 (Attach Additional Sheets) 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 (If no, Submit Copy) 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>746</td> <td></td> </tr> <tr> <td>Shale</td> <td>784</td> <td></td> </tr> </table>	Name	Top	Datum	Dark Sand	746		Shale	784	
Name	Top	Datum								
Dark Sand	746									
Shale	784									

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	Monarch	78	
production	5.625	2.875	10	778		78	

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 (Amount and Kind of Material Used)	Depth
17	723.0 - 731.0		

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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------

GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, KS 66032
 (785) 448-7108 FAX (785) 448-7108

Merchant Copy
INVOICE
 THE GARNETT TRUE VALUE HOMECENTER

Page 1 Invoice: 10178847

Special: _____ Time: 12:40:08
 Instructions: _____ Ship Date: 11/11/11
 _____ Invoice Date: 11/11/11
 _____ Due Date: 12/08/11

Sale rep to: HARLYN Add rep code: _____
 Bill To: ROGER KENT Ship To: ROGER KENT
 22026 NE NEESBHD RD (785) 448-6986 NOT FOR HOUSE USE
 GARNETT, KS 66032 (785) 448-6986

Customer #: 000087 Customer PO: _____ Order By: _____

ORDER	SHIP	U	UM	ITEM#	DESCRIPTION	Alt Price/Item	PRICE	EXTENSION
800	800	PL	CPMP		BLOCK PALLET	18.0000 PL	18.0000	80.00

PAID BY	SHIPPED BY	DATE SHIPPED	OWNER	Sales total	80.00
SHIP VIA	CUSTOMER / Pick up	RECEIVED COMPLETE AND IN GOOD CONDITION		Taxable	80.00
				Non-taxable	0.00
				Sales tax	2.48
				TOTAL	82.48

1 - Merchant Copy

1. GARNETT TRUE VALUE HOMECENTER IS NOT RESPONSIBLE FOR ANY DAMAGE TO OR LOSS OF MERCHANDISE DURING TRANSPORTATION. ALL MERCHANDISE IS SHIPPED AS IS.

GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, KS 66032
 (785) 448-7108 FAX (785) 448-7108

Merchant Copy
INVOICE
 THE GARNETT TRUE VALUE HOMECENTER

Page 1 Invoice: 10178853

Special: _____ Time: 14:18:31
 Instructions: _____ Ship Date: 11/11/11
 _____ Invoice Date: 11/11/11
 _____ Due Date: 12/08/11

Sale rep to: MIKE Add rep code: _____
 Bill To: ROGER KENT Ship To: ROGER KENT
 22026 NE NEESBHD RD (785) 448-6986 NOT FOR HOUSE USE
 GARNETT, KS 66032 (785) 448-6986

Customer #: 000087 Customer PO: _____ Order By: _____

ORDER	SHIP	U	UM	ITEM#	DESCRIPTION	Alt Price/Item	PRICE	EXTENSION
820.00	820.00	PL	BAG	CPMP	PLY ASH MIX 80 LBS PER BAG	0.0000 BAG	0.0000	8198.40
-25.00	-25.00	PL	CPMP		NONARCH PALLET	18.0000 PL	18.0000	-450.00
					Credited from Invoice 10178798			

PAID BY	SHIPPED BY	DATE SHIPPED	OWNER	Sales total	8200.00
SHIP VIA	ANGERSWICH COUNTY	RECEIVED COMPLETE AND IN GOOD CONDITION		Taxable	8200.00
				Non-taxable	0.00
				Sales tax	220.00
				TOTAL	8420.00

1 - Merchant Copy

1. GARNETT TRUE VALUE HOMECENTER IS NOT RESPONSIBLE FOR ANY DAMAGE TO OR LOSS OF MERCHANDISE DURING TRANSPORTATION. ALL MERCHANDISE IS SHIPPED AS IS.

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

J.S. Johnson 4-1

Start 11-25-2011

Finish 11-29-2011

6	soil	6	
6	clay	12	
118	shale	130	
28	lime	158	
64	shale	222	
9	lime	231	
7	shale	238	
39	lime	277	
9	shale	286	
22	lime	308	
6	shale	314	
17	lime	331	
179	shale	510	
21	lime	531	
62	shale	593	
28	lime	621	
22	shale	643	
8	lime	651	
17	shale	668	
8	lime	676	
7	shale	683	
11	lime	694	
14	shale	708	
10	sandy shale	718	odor
4	sandy shale	722	show
20	bkn sand	742	good show
4	Dk sand	746	show
38	shale	784	T.D.

set 20' 7"

ran 778' 2 7/8

cemented to surface 78 sxs