



KANSAS CORPORATION COMMISSION 1074669
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 # 31191
Name: R & B Oil & Gas, Inc.
Address 1: 124 N. Main
Address 2: PO BOX 195
City: ATTICA State: KS Zip: 67009 + 9217
Contact Person: Randy Newberry
Phone: (620) 254-7251
CONTRACTOR: License # 33549
Name: Landmark Drilling, LLC
Wellsite Geologist: Tim Pierce
Purchaser: _____

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: Brandt Production Co.
Well Name: Pollock #1
Original Comp. Date: 7/8/1991 Original Total Depth: 5075

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>9/6/2011</u>	<u>9/7/2011</u>	<u>9/19/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-007-22369-00-01
Spot Description: NW SW NW
NW SW NW Sec. 12 Twp. 34 S. R. 10 East West
3630 Feet from North / South Line of Section
4950 Feet from East / West Line of Section

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

County: Barber
Lease Name: Pollock Well #: A1 'OWWO'
Field Name: _____
Producing Formation: Mississippi
Elevation: Ground: 1317 Kelly Bushing: 1325
Total Depth: 5067 Plug Back Total Depth: 5036
Amount of Surface Pipe Set and Cemented at: 261 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ sx crnt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ 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: Dennis Gantner Date: 02/27/2012



1074669

Operator Name: R & B Oil & Gas, Inc. Lease Name: Pollock Well #: A1 'OWWO'
 Sec. 12 Twp. 34 S. R. 10 East West County: Barber

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mississippi	4592	(-3267)
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Submitted Electronically (If no, Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				
Sector Bond/Gamma Ray				

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
Production	7.875	4.5	10.5	5067	Class H	225	10% Salt; 5# Koseal

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
Attached	Attached	Attached	Attached

TUBING RECORD:	Size: <u>2.375</u>	Set At: <u>4746</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>10/15/2011</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls. <u>0</u>	Gas Mcf <u>5</u>	Water Bbls. <u>350</u>	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input checked="" 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>4593 - 4624</u>
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Form	ACO1 - Well Completion
Operator	R & B Oil & Gas, Inc.
Well Name	Pollock A1 'OWWO'
Doc ID	1074669

Perforations

Perforations			
4	4926 - 4936	1000 gal 15% HCL Acid	
		Frac 300 sx Sand	
	4840	Set Bridge Plug	
4	4593 - 4624	1700 gal 15% HCL Acid	
		Frac - 215 SX 20/40- 190 SX 12/20	
		90 SX 16/30	

ALLIED CEMENTING CO., LLC. 037728

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

POINT: Med. Locofes

DATE <u>7-8-11</u>	SEC. <u>12</u>	TWP. <u>34S</u>	RANGE <u>10W</u>	CALLED OUT	ON LOCATION	JOB START <u>5:00am</u>	JOB FINISH <u>6:00am</u>
LEASE <u>Pollack</u>		WELL <u>A-1 OWND</u>		LOCATION <u>Harold & Frank #2</u>		COUNTY <u>Barber</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)				<u>to Galena Rd 1/4 E, 1/2 S on Galena Einto</u>			

CONTRACTOR Landmark Drilling

OWNER R+B Oil + Gas

TYPE OF JOB <u>Production</u>	HOLE SIZE <u>7 1/2</u>	I.D. <u>5071'</u>
CASING SIZE <u>4 1/2</u>	DEPTH <u>5058'</u>	
TUBING SIZE	DEPTH	
DRILL PIPE	DEPTH	
TOOL	DEPTH	
PRES. MAX <u>1200 psi</u>	MINIMUM	
MEAS. LINE	SHOBT JOINT <u>31'</u>	
CEMENT LEFT IN CSG. <u>31'</u>		
PERFS.		
DISPLACEMENT <u>8 1/2 bbls 2 3/4 KCL</u>		

CEMENT AMOUNT ORDERED		
<u>40 SK 60:40:4% gel + 4% ions</u>		
<u>225 cu c. less 14 + 10% salt + 5" Kolsal</u>		
COMMON <u>24 SK</u>	@ <u>16.25</u>	<u>390.00</u>
POZMIX <u>16 SK</u>	@ <u>8.50</u>	<u>136.00</u>
GEL <u>2 SK</u>	@ <u>21.25</u>	<u>42.50</u>
CHLORIDE	@	
ASC	@	
SMS <u>14</u>	@ <u>3.00</u>	<u>42.00</u>
<u>11</u>	@ <u>19.25</u>	<u>211.75</u>
<u>Kolsal 1125</u>	@ <u>.89</u>	<u>1001.25</u>
<u>SALT 23</u>	@ <u>12.00</u>	<u>276.00</u>
<u>Clappa 10 Gal</u>	@ <u>3.25</u>	<u>312.50</u>
HANDLING <u>314</u>	@ <u>2.25</u>	<u>706.50</u>
MILEAGE <u>314-11/20</u>		<u>690.80</u>
TOTL		<u>7928.80</u>

EQUIPMENT

PUMP TRUCK # <u>360/265</u>	CEMENTER <u>Matt Thmesch</u>
BULK TRUCK # <u>363/20</u>	DRIVER <u>Robt Elm</u>
BULK TRUCK #	DRIVER

REMARKS:

ARK on pump ball float
run 20 bbls 2% KCL pump 2 bbls H2O
run 500 gal Air pump 2 bbls H2O
MIX 15% to Port hole MIX 25% seawater cement
MIX 22.5% cement shot down
run 4 pump 4 times Release plug
drill 8 1/2 bbls 2 3/4 KCL bit 700 psi to 1200 psi
run 600 psi pump 8 1/2 bbls 2% KCL
run plug to 1000 psi pump 1/2 to 600 shot down

CHARGE TO: R+B Oil + Gas
 STREET _____
 CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME TIM PIERCE
 SIGNATURE Tim Pierce

SERVICE

DEPTH OF JOB <u>5058'</u>	
PUMP TRUCK CHARGE <u>2405.00</u>	
EXTRA FOOTAGE	@
MILEAGE <u>40</u>	@ <u>7.00</u> <u>280.00</u>
MANIFOLD	@
<u>Light Vehicle 40</u>	@ <u>4.00</u> <u>160.00</u>
TOTAL	<u>3045.00</u>

PLUG & FLOAT EQUIPMENT

<u>4 1/2</u>	
<u>1- Ring gaskets</u>	<u>192.00</u>
<u>1- All next</u>	@ <u>249.00</u>
<u>10- centralizers</u>	@ <u>48.00</u> <u>480.00</u>
<u>10- scratchers</u>	@ <u>118.00</u> <u>1180.00</u>
<u>2- Baskets</u>	@ <u>270.00</u> <u>540.00</u>
<u>1- Port collar</u>	@ <u>2485.00</u>
<u>1- Rubber plug</u>	<u>71.00</u>
TOTAL	<u>5197.00</u>

SALES TAX (If Any) _____
 TOTAL CHARGES 16,170.80
 DISCOUNT 20% IF PAID IN 30 DAYS
 NET 12,936.64