



KANSAS CORPORATION COMMISSION 1080403  
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>04/06/2012</u>	<u>04/09/2012</u>	<u>04/09/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25368-00-00

Spot Description: \_\_\_\_\_

NW NW NW NE Sec. 27 Twp. 21 S. R. 21  East  West  
5115 Feet from  North /  South Line of Section  
2475 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Anderson

Lease Name: BAILEY-KRIETLER Well #: 13-A

Field Name: Centerville

Producing Formation: Squirrel

Elevation: Ground: 991 Kelly Bushing: 991

Total Depth: 636 Plug Back Total Depth: 630

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: 630

feet depth to: 0 w/ 60 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 Gerritor Date: 05/11/2012



1080403

Operator Name: Kent, Roger dba R J Enterprises Lease Name: BAILEY-KRIETLER Well #: 13-A  
 Sec. 27 Twp. 21 S. R. 21  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 Drillers Log	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>dark sand</td> <td>596</td> <td></td> </tr> <tr> <td>shale</td> <td>636</td> <td></td> </tr> </table>	Name	Top	Datum	dark sand	596		shale	636	
Name	Top	Datum								
dark sand	596									
shale	636									

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	60	
production	5.625	2.875	10	630		60	

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
15	568.0 - 575.0		
20	584.0 - 594.0		

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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 <i>(Explain)</i> _____
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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**R.J. Enterprise**  
**22082 NE Neosho RD**  
**Garnett, KS 66032**

**Bailey Krietler 13-A**

Start 4-6-2012

Finish 4-9-2012

4	soil	4	
8	clay/rock	12	
31	shale	43	
8	lime	51	
13	shale	64	
56	lime	120	
7	shale	127	
17	lime	144	
6	shale	150	
19	lime	169	
181	shale	350	
13	lime	363	
56	shale	419	
31	lime	450	
28	shale	478	
10	lime	488	
17	shale	505	
8	lime	513	
10	shale	523	
6	lime	529	
18	shale	547	
12	sandy shale	559	odor
8	bkn sand	567	show
8	oil sand	575	good show
8	sandy shale	583	show
11	oil sand	594	good show
2	dk sand	596	show
40	shale	636	T.D.

set 20' 7"

ran 629.8' 2 7/8

cemented to surface 60 sxs

**GARNETT TRUE VALUE HOMECENTER**  
 410 N Maple  
 Garnett, KS 66032  
 (785) 448-7108 FAX (785) 448-7185

Merchant Copy  
**INVOICE**

THIS COPY MUST REMAIN AT  
 MERCHANT AT ALL TIMES

Page: 1 Invoice: **10182364**

Special: \_\_\_\_\_ Time: 18:20:18  
 Instructions: \_\_\_\_\_ Ship Date: 03/01/18  
 Bill to: MIKE Invoice Date: 03/01/18  
 Bill to code: \_\_\_\_\_ Due Date: 04/02/18

Bill To: **ROGER KENT** Ship To: **ROGER KENT**  
 8988 NE REDSHO RD (785) 448-8085 NOT FOR HOUSE USE  
 GARNETT, KS 66032 (785) 448-8085

Customer #: 000087 Customer PO: \_\_\_\_\_ Order By: \_\_\_\_\_

ORDER	SHIP	L	WM	ITEM#	DESCRIPTION	AM	Price/Unit	PRICE	EXTENSION
-12.00	-12.00	P	PL	CPMP	MONARCH PALLET		18.0000 ft.	18.0000	-180.00
					Credited from Invoice 10178827				
840.00	840.00	P	BAG	CPFC	PORTLAND CEMENT-947		8.4800 bag	8.4800	4334.80
FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ SHIP VIA ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION Taxable 4404.80 Non-taxable 0.00 Tax # _____ Sales tax 343.88 <b>TOTAL 4404.80</b>						Sales total		84404.80	

1 - Merchant Copy



**GARNETT TRUE VALUE HOMECENTER**  
 410 N Maple  
 Garnett, KS 66032  
 (785) 448-7108 FAX (785) 448-7185

Merchant Copy  
**INVOICE**

THIS COPY MUST REMAIN AT  
 MERCHANT AT ALL TIMES

Page: 1 Invoice: **10182408**

Special: \_\_\_\_\_ Time: 18:20:18  
 Instructions: \_\_\_\_\_ Ship Date: 03/02/18  
 Bill to: MIKE Invoice Date: 03/02/18  
 Bill to code: \_\_\_\_\_ Due Date: 04/02/18

Bill To: **ROGER KENT** Ship To: **ROGER KENT**  
 8988 NE REDSHO RD (785) 448-8085 NOT FOR HOUSE USE  
 GARNETT, KS 66032 (785) 448-8085

Customer #: 000087 Customer PO: \_\_\_\_\_ Order By: \_\_\_\_\_

ORDER	SHIP	L	WM	ITEM#	DESCRIPTION	AM	Price/Unit	PRICE	EXTENSION
800.00	800.00	P	BAG	CPFA	PLY ASH MIX 80 LBS PER BAG		8.0000 bag	8.0000	6400.00
-4.00	-4.00	P	PL	CPMP	MONARCH PALLET		18.0000 ft.	18.0000	-180.00
					Credited from Invoice 10180831				
FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ SHIP VIA ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION Taxable 8330.40 Non-taxable 0.00 Tax # _____ Sales tax 261.84 <b>TOTAL 8330.40</b>						Sales total		83350.40	

1 - Merchant Copy

