



KANSAS CORPORATION COMMISSION 1084215
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 #: _____

<u>05/04/2012</u>	<u>05/09/2012</u>	<u>05/09/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25382-00-00
Spot Description: _____
NE SE SW NE Sec. 27 Twp. 21 S. R. 21 East West
3262 Feet from North / South Line of Section
1513 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 #: 2-1
Field Name: Centerville
Producing Formation: Squirrel
Elevation: Ground: 945 Kelly Bushing: 945
Total Depth: 570 Plug Back Total Depth: 565
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: 565
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 Garbac Date: 06/18/2012



1084215

Operator Name: Kent, Roger dba R J Enterprises Lease Name: BAILEY-KRIETLER Well #: 2-1
 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>oil sand</td> <td>547</td> <td></td> </tr> <tr> <td>dk sand</td> <td>550</td> <td></td> </tr> <tr> <td>shale</td> <td>570</td> <td></td> </tr> </table>	Name	Top	Datum	oil sand	547		dk sand	550		shale	570	
Name	Top	Datum											
oil sand	547												
dk sand	550												
shale	570												

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	565		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
20	536.0 - 546.0		

TUBING RECORD: Size: Set At: Packer At: Liner Run: Yes 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 <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> <i>(Submit ACO-4)</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 2-1

Start 5-4--2012

Finish 5-9-2012

3	soil	3	
5	clay/rock	8	
9	shale	17	
8	lime	25	
6	shale	31	
45	lime	76	
9	shale	85	
14	lime	99	set 20' 7"
7	shale	106	ran 564.7' 2 7/8
19	lime	125	cemented to surface 60 sxs
180	shale	305	
15	lime	320	
48	shale	368	
32	lime	400	
29	shale	429	
11	lime	440	
15	shale	455	
8	lime	463	
7	shale	470	
10	lime	480	
15	shale	495	
10	sandy shale	505	odor
25	bkn sand	530	show
17	oil sand	547	good show
3	dk sand	550	
20	shale	570	T.D.

GARNETT TRUE VALUE HOMECENTER

410 N Maple
 Garnett, KS 66032
 (785) 448-7106 FAX (785) 448-7135

Customer Copy

INVOICE

THIS COPY MUST REMAIN AT
 MERCHANT AT ALL TIMES!

Page: 1

Invoice: **10184610**

Special :
 Instructions :
 Sale rep #: **MIKE**

Time: 13:44:59
 Ship Date: 04/26/12
 Invoice Date: 04/26/12
 Due Date: 05/08/12

REPRINT

Sold To: **ROGER KENT**
 22082 NE NEOSHO RD
 GARNETT, KS 66032

Ship To: **ROGER KENT**
 (785) 448-6995 **NOT FOR HOUSE USE**
 (785) 448-6995

Customer #: 0000357

Customer PO:

Order By:

8TH
 T 101

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
5.00	5.00	P	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	75.00
540.00	540.00	P	BAG	CPPC	PORTLAND CEMENT-94#	8.9900 BAG	8.9900	4854.60

FILLED BY
 CHECKED BY
 DATE SHIPPED
 DRIVER

 SHIP VIA **ANDERSON COUNTY**
 RECEIVED COMPLETE AND IN GOOD CONDITION
X

Sales total	\$4929.60
Taxable	4929.60
Non-taxable	0.00
Tax #	
Sales tax	384.51

TOTAL \$5314.11

1 - Customer Copy

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