



KANSAS CORPORATION COMMISSION 1084109  
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 #:

04/23/2012	04/24/2012	04/24/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25378-00-00  
Spot Description:  
SW NE SE NW Sec. 27 Twp. 21 S. R. 21  East  West  
3334 Feet from  North /  South Line of Section  
3219 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 #: 36-A  
Field Name: Centerville  
Producing Formation: Squirrel

Elevation: Ground: 958 Kelly Bushing: 958  
Total Depth: 602 Plug Back Total Depth: 596  
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: 596  
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 Garrison Date: 06/18/2012



1084109

Operator Name: Kent, Roger dba R J Enterprises Lease Name: BAILEY-KRIETLER Well #: 36-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 <i>(Attach Additional Sheets)</i>	<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	oil sand	569	
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	dk sand	571	
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	shale	602	
List All E. Logs Run: Gamma Ray/Neutron/CCL Drillers Log				

**CASING RECORD**  New  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	596		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	559 - 569		

TUBING RECORD: Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. \_\_\_\_\_ Producing Method:  
 Flowing  Pumping  Gas Lift  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 <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"/> Commingled <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 36-A**

Start 4-23-2012

Finish 4-24-2012

3	soil	3	
12	clay/rock	15	
23	shale	38	
9	lime	47	
6	shale	53	
43	lime	96	
8	shale	104	
16	lime	120	set 20' 7"
6	shale	126	ran 596' 2 7/8
19	lime	145	cemented to surface 60 sxs
180	shale	325	
20	lime	345	
54	shale	399	
31	lime	430	
28	shale	458	
10	lime	468	
17	shale	485	
8	lime	493	
8	shale	501	
8	lime	509	
29	shale	538	
14	sandy shale	552	
9	bkn sand	561	good show
8	oil sand	569	good show
2	dk sand	571	show
31	shale	602	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: **10184186**

Special :		Time:	10:31:15
Instructions :		Ship Date:	04/17/12
:		Invoice Date:	04/17/12
Sale rep #: JIM	Acct rap code:	Due Date:	05/08/12

**REPRINT**

Sold To: <b>ROGER KENT</b> 22082 NE NEOSHO RD GARNETT, KS 66032	Ship To: <b>ROGER KENT</b> (785) 448-6995 <b>NOT FOR HOUSE USE</b>  (785) 448-6995
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Customer #: 0000357

Customer PO:

Order By:

popimg01

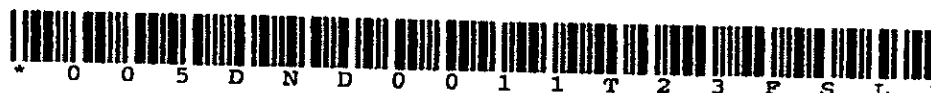
8TH  
T 130

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
560.00	560.00	P	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	6.2900 BAG	6.2900	3522.40
4.00	4.00	P	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	60.00

FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ SHIP VIA ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION <b>X</b>	Sales total \$3582.40
	Taxable 3582.40 Non-taxable 0.00 Tax # _____
	Sales tax 279.43

**TOTAL \$3861.83**

1 - Customer Copy



# 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: **10183991**

Special :  
Instructions :  
Sale rep #: JIM

Time: 07:38:52  
Ship Date: 04/12/12  
Invoice Date: 04/12/12  
Due Date: 05/08/12

Accd rep code:

**REPRINT**

Sold To: **ROGER KENT**  
22062 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:

ppcimg01

8TH  
T 130

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
-33.00	-33.00	P	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	-495.00
540.00	540.00	P	BAG	CPPC	PORTLAND CEMENT-94#	8.4900 BAG	8.4900	4584.60

FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ SHIP VIA ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION X	Taxable 4089.60 Non-taxable 0.00 Tax #	Sales total \$4089.60 Sales tax 318.99
	<b>TOTAL \$4408.59</b>	

1 - Customer Copy

1. COMPLETELY ORIGINAL DOCUMENT. ANY OTHER COPIES ARE UNRELIABLE. THIS DOCUMENT IS THE PROPERTY OF GARNETT TRUE VALUE HOMECENTER AND WILL BE DESTROYED UPON REQUEST.