



KANSAS CORPORATION COMMISSION 1089613
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>06/19/2012</u>	<u>06/20/2012</u>	<u>06/20/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-001-30413-00-00

Spot Description: _____
NW, NW, SW, SE Sec. 34 Twp. 23 S. R. 21 East West
1177 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: Allen

Lease Name: NORMAN UNIT Well #: 26-N

Field Name: Davis-Bronson

Producing Formation: Bartlesville

Elevation: Ground: 972 Kelly Bushing: 972

Total Depth: 753 Plug Back Total Depth: 748

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: 748

feet depth to: 0 w/ 66 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: 08/10/2012



1089613

Operator Name: Kent, Roger dba R J Enterprises Lease Name: NORMAN UNIT Well #: 26-N
 Sec. 34 Twp. 23 S. R. 21 East West County: Allen

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	oil sand	724	
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	shale	753	
Electric Log Submitted Electronically (If no, Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run: Gamma Ray/Neutron/CCL Drillers log				

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	66	
production	5.625	2.875	10	748		66	

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
13	718.0 - 724.0		

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 checked="" 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: _____ _____
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**R.J. Enterprise
22082 NE Neosho RD
Garnett, KS 66032**

Norman 26-N

Start 6-19 -2012

Finish 6- 20-2012

1	soil	1	
3	clay/rock	4	
87	lime	91	
164	shale	255	
22	lime	277	
70	shale	347	
30	lime	377	
40	shale	417	set 20' 7"
20	lime	437	ran 747.6' 2 7/8
8	shale	445	cemented to surface 66 sxs
4	lime	449	
98	shale	547	
3	lime	550	
80	shale	630	
4	limey sand	634	show
82	shale	716	
2	sand	718	
6	oil sand	724	good show
29	shale	753	T.D.

GARNETT TRUE VALUE HOMECENTER

410 N Maple
Garnett, KS 66032
(785) 448-7108 FAX (785) 448-7135

Merchant Copy
INVOICE

THIS COPY MUST BE RETURNED TO
MERCHANT AT ALL TIMES

Page: 1 Invoice: **10185769**

Special : Time: 13:28:28
Invoice Date: 05/24/12
Invoice Date: 05/24/12
Due Date: 06/08/12

Ship rep to: HANNAH HANNAH STEELS Acct rep code:

Sold To: ROGER KENT Ship To: ROGER KENT
22088 NE NEOSH0 RD (785) 448-0228 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-0228

Customer #: 0000367 Company PO: Order By:

ORDER	SHIP L	U/M	ITEM#	DESCRIPTION	UNIT PRICE	QTY	PRICE	EXTENSION
800	800	P/EA	255237	10M17/84x4-1/8 TREN BR	8.9900 ea	13.90	8.9900	(13.90)

PAID BY: CHECKED BY: DATE SHIPPED: DRIVER:

SHIP VIA: Customer Pick Up
RECEIVED COMPLETE AND IN GOOD CONDITION

Taxable: 10.99
Non-taxable: 0.00
Sales tax: 1.17

Weight: 0 lbs.

TOTAL 818.18

1 - Merchant Copy

0 0 0 4 0 1 9 0 0 1 1 X N L 3 7 8

GARNETT TRUE VALUE HOMECENTER

410 N Maple
Garnett, KS 66032
(785) 448-7108; FAX (785) 448-7135

Statement Copy
INVOICE

PLEASE REFER TO INVOICE NUMBER
ON ALL OUR RESPONSES

Page: 1 Invoice: **10185868**

Special : Time: 18:28:18
Invoice Date: 05/30/12
Invoice Date: 05/30/12
Due Date: 06/08/12

Ship rep to: MKKB Acct rep code:

Sold To: ROGER KENT Ship To: ROGER KENT
22088 NE NEOSH0 RD (785) 448-0228 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-0228

Customer #: 0000367 Company PO: Order By:

ORDER	SHIP L	U/M	ITEM#	DESCRIPTION	UNIT PRICE	QTY	PRICE	EXTENSION
11.00	11.00	P	PL	OPMP				
810.00	810.00	P	BAG	OPPO				
				MOHARCH PALLET	18.0000 ea	18.0000	18.0000	168.00
				PORTLAND CEMENT-84#	8.9900 ea	8.9900	8.9900	4604.90

PAID BY: CHECKED BY: DATE SHIPPED: DRIVER:

SHIP VIA: ANDERSON COUNTY
RECEIVED COMPLETE AND IN GOOD CONDITION

Taxable: 4748.90
Non-taxable: 0.00
Sales tax: 370.50

TOTAL \$5120.40

3 - Statement Copy

0 0 0 5 0 9 0 0 1 3 8 8 0 L I 3