

KANSAS CORPORATION COMMISSION 1089632
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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 #: _____

06/21/2012	06/22/2012	06/22/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-001-30416-00-00
Spot Description: _____
SE NW SW SE Sec. 34 Twp. 23 S. R. 21 ☒ East ☐ West
875 Feet from ☐ North / ☒ South Line of Section
2148 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 #: 29-N
Field Name: Davis-Bronson
Producing Formation: Bartlesville
Elevation: Ground: 976 Kelly Bushing: 976
Total Depth: 760 Plug Back Total Depth: 754
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: 754
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 Garfield Date: 08/10/2012



1089632

Operator Name: Kent, Roger dba R J Enterprises Lease Name: NORMAN UNIT Well #: 29-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 <i>(Attach Additional Sheets)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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%;"> <tr> <td style="width: 60%;">Name</td> <td style="width: 20%;">Top</td> <td style="width: 20%;">Datum</td> </tr> <tr> <td>oil sand</td> <td>733</td> <td></td> </tr> <tr> <td>shale</td> <td>760</td> <td></td> </tr> </table>	Name	Top	Datum	oil sand	733		shale	760	
Name	Top	Datum								
oil sand	733									
shale	760									

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	754		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
11	728.0 - 733.0		

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 <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" 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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
--	---	---

R.J. Enterprise
22082 NE Neosho RD
Garnett, KS 66032

Norman 29-N

Start 6- 21-2012

Finish 6- 22-2012

1	soil	1	
2	clay/rock	3	
102	lime	105	
165	shale	270	
23	lime	293	
70	shale	363	
30	lime	393	
41	shale	434	set 20' 7"
20	lime	454	ran 754.4 ' 2 7/8
5	shale	459	cemented to surface 66 sxs
5	lime	464	
96	shale	560	
3	lime	563	
164	shale	727	
1	sand	728	odor
5	oil sand	733	good show
27	shale	760	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 REMAIN AT
MERCHANT AT ALL TIMES

Page: 1

Invoice: 10185759

Special :	Time: 13:58:28
Instructions :	Ship Date: 05/24/12
Ship rep to: HANNAH HANNAH STEELE	Invoice Date: 05/24/12
Acct rep code:	Due Date: 06/08/12
Sold To: ROGER KENT	Ship To: ROGER KENT
22082 NE NEOSHO RD	(785) 448-6985 NOT FOR HOUSE USE
GARNETT, KS 66032	(785) 448-6985
Customer #: 0000357	Customer PO:
Order By:	

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
2.00	2.00	P	EA	288237	MM17/84x4-1/8 TBar BR	8.9900 ea	8.9900	13.98

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$13.98
SHIP VIA	Customer Pick Up	RECEIVED COMPLETE AND IN GOOD CONDITION		Taxable	13.98
X				Non-taxable	0.00
				Sales tax	1.17

1 - Merchant Copy

Weight: 0 lbs.

TOTAL \$15.15

0 0 1 5 0 1 0 0 0 1 1 X M L 3 P E

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 CORRESPONDENCE

Page: 1

Invoice: 10185888

Special :	Time: 18:38:12
Instructions :	Ship Date: 05/30/12
Ship rep to: MIKE	Invoice Date: 05/30/12
Acct rep code:	Due Date: 06/08/12
Sold To: ROGER KENT	Ship To: ROGER KENT
22082 NE NEOSHO RD	(785) 448-6985 NOT FOR HOUSE USE
GARNETT, KS 66032	(785) 448-6985
Customer #: 0000357	Customer PO:
Order By:	

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
11.00	11.00	P	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	165.00
510.00	510.00	P	BAG	CPPC	PORTLAND CEMENT-94#	8.9900 #40	8.9900	4584.80

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$4749.80
SHIP VIA	ANDERSON COUNTY	RECEIVED COMPLETE AND IN GOOD CONDITION		Taxable	4749.80
X				Non-taxable	0.00
				Sales tax	370.80

3 - Statement Copy

TOTAL \$5120.40

0 0 0 5 G 9 Q 0 0 1 3 8 0 0 L X 9