



KANSAS CORPORATION COMMISSION 1096731  
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>09/04/2012</u>	<u>09/05/2012</u>	<u>09/05/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25547-00-00

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

NE NW SE NW Sec. 18 Twp. 21 S. R. 21  East  West

3647 Feet from  North /  South Line of Section

3486 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Anderson

Lease Name: BABBS Well #: 5-1

Field Name: Bush City Shoestring

Producing Formation: squirrel

Elevation: Ground: 1014 Kelly Bushing: 1014

Total Depth: 665 Plug Back Total Depth: 659

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: 659

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 Garriso Date: 10/16/2012



1096731

Operator Name: Kent, Roger dba R J Enterprises Lease Name: BABBS Well #: 5-1  
 Sec. 18 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>bkn sand</td> <td>635</td> <td></td> </tr> <tr> <td>dk sand</td> <td>642</td> <td></td> </tr> <tr> <td>shale</td> <td>665</td> <td></td> </tr> </table>	Name	Top	Datum	bkn sand	635		dk sand	642		shale	665	
Name	Top	Datum											
bkn sand	635												
dk sand	642												
shale	665												

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	15	20	Portland	66	
production	5.625	2.875	15	659		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	602.0 - 607.0		
20	612.0 - 622.0		
20	624.0 - 634.0		

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 (Explain) _____
Estimated Production Per 24 Hours	Oil Bbbs. Gas Mcf Water Bbbs. 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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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R.J. Enterprise  
22082 NE Neosho RD  
Garnett, KS 66032

Babbs 5-1

Start 9-4-2012

Finish 9-5-2012

3	soil	3	
9	sand/stone	12	
10	lime	22	
29	shale	51	
76	lime	127	
7	shale	134	
6	lime	140	
41	shale	181	set 20' 7"
7	lime	188	ran 659.2' 2 7/8
24	shale	212	cemented to surface 66 sxs
5	lime	217	
12	shale	229	
175	lime	404	
15	shale	419	
60	shale	479	
30	lime	509	
24	shale	533	
9	lime	542	
18	shale	560	
7	lime	567	
9	shale	576	
8	lime	584	
12	shale	596	
5	sandy shale	601	
6	Bkn sand	607	good show
4	sandy shale	611	show
24	Bkn sand	635	good show
7	Dk sand	642	show
23	shale	665	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!

Invoice: **10188224**

Page: 1 Time: 14:41:57  
 Special: Ship Date: 07/24/12  
 Instructions: Invoice Date: 08/07/12  
 Due Date: 09/08/12  
 Act rep code:  
 Sale rep #: MIKE  
 Ship To: **ROGER KENT**  
 Sold To: **ROGER KENT** (785) 448-6995 **NOT FOR HOUSE USE**  
**32082 NE NEOSH0 RD**  
**GARNETT, KS 66032** (785) 448-6995  
 Customer #: 0000357 Customer PO: Order By: ETH  
T 101

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Um	PRICE	EXTENSION
15.00	15.00	P	PC	75518	PRESSURE TREATED-22 8 X 6 X 10' OCA CUT IN HALF ON ORANGE RACK	659.7010 UMF	31.9900	479.85
						Sales total		\$479.85
FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ SHIP VIA Customer Pick up RECEIVED COMPLETE AND IN GOOD CONDITION						Taxable	479.85	Sales tax
						Non-taxable	0.00	
						Tax #		
X						TBF: 600	<b>TOTAL</b>	<b>\$519.85</b>

1 - Merchant Copy



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Invoice: **10189380**

Page: 1 Time: 15:59:57  
 Special: Ship Date: 08/22/12  
 Instructions: Invoice Date: 08/22/12  
 Due Date: 09/08/12  
 Act rep code:  
 Sale rep #: MIKE  
 Ship To: **ROGER KENT**  
 Sold To: **ROGER KENT** (785) 448-6995 **NOT FOR HOUSE USE**  
**32082 NE NEOSH0 RD**  
**GARNETT, KS 66032** (785) 448-6995  
 Customer #: 0000357 Customer PO: Order By: ETH  
T 102

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Um	PRICE	EXTENSION
-28.00	-28.00	P	PL	OPMP	MONARCH PALLET	15.0000 P.	15.0000	-300.00
640.00	640.00	P	BAG	CPPC	Credited from Invoice 10188335 PORTLAND CEMENT-64#	8.9900 BAG	8.9900	4854.60
						Sales total		\$4464.60
FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ SHIP VIA ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION						Taxable	4464.60	Sales tax
						Non-taxable	0.00	
						Tax #		
X						TOTAL	<b>\$4812.60</b>	

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