



KANSAS CORPORATION COMMISSION 1096737
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 #: _____

08/30/2012 09/04/2012 09/04/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-003-25548-00-00

Spot Description: _____
NE NW SE NW Sec. 18 Twp. 21 S. R. 21 East West
3959 Feet from North / South Line of Section
3497 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Anderson

Lease Name: BABBS Well #: 6-1

Field Name: Bush City Shoestring

Producing Formation: Squirrel

Elevation: Ground: 1014 Kelly Bushing: 1014

Total Depth: 664 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 Garrisor Date: 10/16/2012



1096737

Operator Name: Kent, Roger dba R J Enterprises Lease Name: BABBS Well #: 6-1
 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:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>bkn sand</td> <td>636</td> <td></td> </tr> <tr> <td>dk sand</td> <td>643</td> <td></td> </tr> <tr> <td>shale</td> <td>664</td> <td></td> </tr> </table>	Name	Top	Datum	bkn sand	636		dk sand	643		shale	664	
Name	Top	Datum											
bkn sand	636												
dk sand	643												
shale	664												

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 <i>(Amount and Kind of Material Used)</i>	Depth
20	614.0 - 624.0		
20	625.0 - 635.0		

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

Babbs 6-1

Start 8-30-2012

Finish 9-4-2012

3	soil	3	
9	clay	12	
9	shale	21	
30	lime	51	
75	shale	126	
7	lime	133	
6	shale	139	
41	lime	180	set 20' 7"
9	shale	189	ran 658.9' 2 7/8
22	lime	211	cemented to surface 66 sxs
6	shale	217	
10	lime	227	
178	shale	405	
14	lime	419	
60	shale	479	
30	lime	509	
26	shale	535	
9	lime	544	
17	shale	561	
7	lime	568	
11	shale	579	
7	lime	586	
20	shale	606	
6	sandy shale	612	odor
24	Bkn sand	636	good show
7	Dk sand	643	good show
21	shale	664	T.D.

GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, KS 68032
 (785) 448-7108 FAX (785) 448-7135

Merchant Copy
INVOICE
 THIS COPY MUST REMAIN AT
 MERCHANT AT ALL TIMES

Page: 1 Invoice: **10188224**

Special : Time: 14:41:37
 Instructions : Ship Date: 07/24/12
 : Invoice Date: 08/07/12
 : Due Date: 08/08/12

Sale rep to: MIKE Acct rep code:
 Sold To: ROGER KENT Ship To: ROGER KENT
 22022 NE NEGSHO RD (785) 448-8985 NOT FOR HOUSE USE
 GARNETT, KS 68032 (785) 448-8985

Customer #: 0000357 Customer PO: Order By: 8TH
T 121

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	All Price/Um	PRICE	EXTENSION
18.00	18.00	P	PO	T2616	PRESSURE TREATED #2 S X 6 X 18' CCA CUT IN HALF ON ORANGE RACK	989.7010 um	31.8900	479.85
						Sales total		\$479.85
						Taxable	479.85	
						Non-taxable	0.00	
						Sales tax		39.83
						Tax #		
						TBF: 600		
						TOTAL		\$519.88

1 - Merchant Copy



GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, KS 68032
 (785) 448-7106 FAX (785) 448-7135

Merchant Copy
INVOICE
 THIS COPY MUST REMAIN AT
 MERCHANT AT ALL TIMES

Page: 1 Invoice: **10189380**

Special : Time: 16:59:57
 Instructions : Ship Date: 08/22/12
 : Invoice Date: 08/22/12
 : Due Date: 08/08/12

Sale rep to: MIKE Acct rep code:
 Sold To: ROGER KENT Ship To: ROGER KENT
 22022 NE NEGSHO RD (785) 448-8985 NOT FOR HOUSE USE
 GARNETT, KS 68032 (785) 448-8985

Customer #: 0000357 Customer PO: Order By: 8TH
T 122

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	All Price/Um	PRICE	EXTENSION
-28.00	-28.00	P	PL	OPMP	MONARCH PALLET	15.0000 PL	15.0000	-390.00
					Credited from Invoice 10188335			
640.00	640.00	P	BAG	CPPC	PORTLAND CEMENT-64#	8.8900 ea	8.8900	4884.80
						Sales total		\$4484.80
						Taxable	4484.80	
						Non-taxable	0.00	
						Sales tax		348.24
						Tax #		
						TBF: 600		
						TOTAL		\$4812.84

1 - Merchant Copy

