



KANSAS CORPORATION COMMISSION 1096668
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>08/28/2012</u>	<u>08/29/2012</u>	<u>08/29/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25544-00-00

Spot Description: _____
NW_NE_SE_NW Sec. 18 Twp. 21 S. R. 21 East West
3653 Feet from North / South Line of Section
3170 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Anderson

Lease Name: BABBS Well #: 2-1

Field Name: Bush City Shoestring

Producing Formation: Squirrel

Elevation: Ground: 1014 Kelly Bushing: 1014

Total Depth: 664 Plug Back Total Depth: 658

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: 658

feet depth to: 0 w/ 66 sx crnt.

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 Gantsoi Date: 10/16/2012



1096668

Operator Name: Kent, Roger dba R J Enterprises Lease Name: BABBS Well #: 2-1
 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>631</td> <td></td> </tr> <tr> <td>dk sand</td> <td>639</td> <td></td> </tr> <tr> <td>shale</td> <td>664</td> <td></td> </tr> </table>	Name	Top	Datum	bkn sand	631		dk sand	639		shale	664	
Name	Top	Datum											
bkn sand	631												
dk sand	639												
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	658		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
20	609.0 - 619.0		
20	621.0 - 631.0		

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)</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 2-1

Start 8-28-2012

Finish 8-29-2012

3	soil	3	
6	clay	9	
9	shale	18	
27	lime	45	
75	shale	120	
9	lime	129	
6	shale	135	
41	lime	176	set 20' 7"
8	shale	184	ran 658.3' 2 7/8
22	lime	206	cemented to surface 66 sxs
6	shale	212	
12	lime	224	
176	shale	400	
15	lime	415	
58	shale	473	
30	lime	503	
24	shale	527	
10	lime	537	
17	shale	554	
8	lime	562	
9	shale	571	
6	lime	577	
12	shale	589	
19	sandy shale	608	odor
7	oil sand	615	good show
4	sandy shale	619	good show
12	Bkn sand	631	good show
8	Dk sand	639	good show
25	shale	664	T.D.

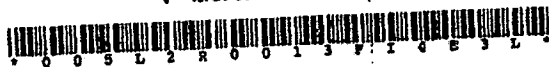
GARNETT TRUE VALUE HOMECENTER
 410 N Maple
 Garnett, KS 66032
 (785) 448-7108 FAX (785) 448-7135

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

Page: 1 Invoice: **10188224**
 Time: 14:41:57
 Special: Ship Date: 07/24/12
 Instructions: Invoice Date: 08/07/12
 Due Date: 08/08/12
 Acct rep code:
 Sale rep #: MIKE
 Ship To: ROGER KENT
 Sold To: ROGER KENT (785) 448-6095 NOT FOR HOUSE USE
 22082 NE NEOSHO RD
 GARNETT, KS 66032 (785) 448-6095
 Customer #: 0000357 Customer PO: Order By: 6TH T 121

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
15.00	15.00	P	PO	T8618	PREBURG TREATED-#2 6 X 6 X 18' OCA CUT IN HALF/ON ORANGE RACK	959.7010 uap	31.8900	478.85
						Sales total		\$478.85
						Taxable	478.85	
						Non-taxable	0.00	
						Sales tax		39.83
						TBF: 600		
						TOTAL		\$518.68

1 - Merchant Copy



GARNETT TRUE VALUE HOMECENTER
 410 N Maple
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 (785) 448-7106 FAX (785) 448-7135

Merchant Copy
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 MERCHANT AT ALL TIMES!

Page: 1 Invoice: **10189380**
 Time: 16:59:57
 Special: Ship Date: 08/22/12
 Instructions: Invoice Date: 08/22/12
 Due Date: 08/08/12
 Acct rep code:
 Sale rep #: MIKE
 Ship To: ROGER KENT
 Sold To: ROGER KENT (785) 448-6095 NOT FOR HOUSE USE
 22082 NE NEOSHO RD
 GARNETT, KS 66032 (785) 448-6095
 Customer #: 0000357 Customer PO: Order By: 6TH T 121

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
-26.00	-26.00	P	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	-300.00
640.00	640.00	P	BAG	CPPO	Credited from Invoice 10188335 PORTLAND CEMENT-84#	8.9900 bag	6.0000	4854.60
						Sales total		\$4484.60
						Taxable	4484.60	
						Non-taxable	0.00	
						Sales tax		346.24
						TOTAL		\$4830.84

1 - Merchant Copy

