



KANSAS CORPORATION COMMISSION 1099324
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>09/26/2012</u>	<u>09/27/2012</u>	<u>09/27/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25554-00-00
Spot Description: _____
NW NW NE SE Sec. 14 Twp. 21 S. R. 20 East West
2475 Feet from North / South Line of Section
1261 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Anderson
Lease Name: IOWA COLLEGE Well #: 16
Field Name: Bush City Shoestring
Producing Formation: Squirrel
Elevation: Ground: 1071 Kelly Bushing: 1071
Total Depth: 749 Plug Back Total Depth: 743
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: 743
feet depth to: 0 w/ 78 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 Garrison Date: 11/07/2012



1099324

Operator Name: Kent, Roger dba R J Enterprises Lease Name: IOWA COLLEGE Well #: 16
 Sec. 14 Twp. 21 S. R. 20 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>722</td> <td></td> </tr> <tr> <td>dk sand</td> <td>725</td> <td></td> </tr> <tr> <td>shale</td> <td>749</td> <td></td> </tr> </table>	Name	Top	Datum	bkn sand	722		dk sand	725		shale	749	
Name	Top	Datum											
bkn sand	722												
dk sand	725												
shale	749												

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	78	
production	5.625	2.875	15	743		78	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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	699.0 - 709.0		
20	711.0 - 721.0		

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 <i>(Explain)</i> _____			
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) (Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**R.J. Enterprise
22082 NE Neosho RD
Garnett, KS 66032**

Iowa College # 16

Start 9-26-2012

Finish 9-27-2012

3	soil	3	
12	clay	15	
87	shale	102	
30	lime	132	
36	shale	168	
21	lime	189	
18	shale	207	
55	lime	262	set 20' 7"
7	shale	269	ran 743.4' 2 7/8
43	lime	312	cemented to surface 78sxs
174	shale	486	
16	lime	502	
57	shale	559	
29	lime	588	
25	shale	613	
10	lime	623	
19	shale	642	
6	lime	648	
9	shale	657	
8	lime	665	
15	shale	680	
8	sandy shale	688	odor
9	sandy shale	697	show
25	Bkn sand	722	good show
3	Dk sand	725	show
24	shale	749	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: **10189039**

Special: _____ Time: 18:40:37
Instructions: _____ Ship Date: 09/06/12
Sole rep #: MIKE Acct rep code: _____ Invoice Date: 09/06/12
Due Date: 10/06/12

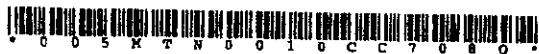
Sold To: ROGER KENT Ship To: ROGER KENT
22062 NE NBOBHO RD (785) 448-8995 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-8995

Customer #: 0000357 Customer PG: _____ Order By: _____

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
-4.00	-4.00	P	PL	CPMP	MONARCH PALLET	18.0000 PL	18.0000	-80.00
540.00	540.00	P	BAG	CPPC	Credited from invoice 10188060 PORTLAND CEMENT-94#	8.8900 BAG	5.8900	4854.60

FILED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales Total	\$4784.60
SHIP VIA ANDERSON COUNTY				Taxable	4784.60
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales Tax	373.98
				TOTAL	\$5168.58

1 - Merchant Copy



GARNETT TRUE VALUE HOMECENTER

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Merchant Copy
INVOICE

THIS COPY MUST REMAIN AT
MERCHANT AT ALL TIMES!

Page: 1 Invoice: **10190091**

Special: _____ Time: 17:01:28
Instructions: _____ Ship Date: 09/10/12
Sole rep #: MIKE Acct rep code: _____ Invoice Date: 09/10/12
Due Date: 10/09/12

Sold To: ROGER KENT Ship To: ROGER KENT
22062 NE NBOBHO RD (785) 448-8995 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-8995

Customer #: 0000357 Customer PG: _____ Order By: _____

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
480.00	480.00	P	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	8.2900 BAG	8.2900	3016.20
12.00	12.00	P	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	180.00

FILED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales Total	\$3199.20
SHIP VIA ANDERSON COUNTY				Taxable	3199.20
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales Tax	240.54
				TOTAL	\$3440.74

1 - Merchant Copy

