



KANSAS CORPORATION COMMISSION 1099328  
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>09/25/2012</u>	<u>09/26/2012</u>	<u>09/26/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25555-00-00

Spot Description: \_\_\_\_\_  
SW NW NE SE Sec. 14 Twp. 21 S. R. 20  East  West  
2233 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 #: 17  
Field Name: Bush City Shoestring  
Producing Formation: Squirrel

Elevation: Ground: 1070 Kelly Bushing: 1070  
Total Depth: 742 Plug Back Total Depth: 736  
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: 736  
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



1099328

Operator Name: Kent, Roger dba R J Enterprises Lease Name: IOWA COLLEGE Well #: 17  
 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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>bkn sand</td> <td>709</td> <td></td> </tr> <tr> <td>dk sand</td> <td>712</td> <td></td> </tr> <tr> <td>shale</td> <td>742</td> <td></td> </tr> </table>	Name	Top	Datum	bkn sand	709		dk sand	712		shale	742	
Name	Top	Datum											
bkn sand	709												
dk sand	712												
shale	742												

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	736		78	

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	687.0 - 697.0		
20	699.0 - 709.0		

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 <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)</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 # 17**

Start 9-25-2012

Finish 9-26-2012

3	soil	3	
12	clay	15	
84	shale	99	
29	lime	128	
37	shale	165	
21	lime	186	
18	shale	204	
55	lime	259	set 20' 7"
8	shale	267	ran 735.9 2 7/8
41	lime	308	cemented to surface 78sxs
177	shale	485	
15	lime	500	
57	shale	557	
29	lime	586	
26	shale	612	
7	lime	619	
21	shale	640	
7	lime	647	
8	shale	655	
8	lime	663	
16	shale	679	
7	sandy shale	686	odor
22	Bkn sand	708	good show
4	Dk sand	712	good show
30	shale	742	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: **10188939**

Special : Time: 18:40:57  
Instructions : Ship Date: 09/08/12  
Sales rep #: MIKE Acct rep code: Invoice Date: 09/08/12  
Due Date: 10/08/12

Sold To: **ROGER KENT** Ship To: **ROGER KENT**  
22082 NE NEOSHO RD (785) 448-6895 NOT FOR HOUSE USE  
GARNETT, KS 66032 (785) 448-6895

Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
-4.00	-4.00	P	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	-60.00
640.00	640.00	P	BAG	CPPC	Credited from Invoice 10188060 PORTLAND CEMENT-94#	8.8900 BAG	8.9900	4854.80

  

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	64704.80
SHIP VIA ANDERSON COUNTY				Taxable	4784.80
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	373.98
				<b>TOTAL</b>	<b>\$5188.88</b>

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: **10180091**

Special : Time: 17:01:28  
Instructions : Ship Date: 08/10/12  
Sales rep #: MIKE Acct rep code: Invoice Date: 08/10/12  
Due Date: 10/08/12

Sold To: **ROGER KENT** Ship To: **ROGER KENT**  
22082 NE NEOSHO RD (785) 448-6895 NOT FOR HOUSE USE  
GARNETT, KS 66032 (785) 448-6895

Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
480.00	480.00	P	BAG	CPFA	FLY ASH MIX 60 LBS PER BAG	8.2800 BAG	8.2800	3019.20
12.00	12.00	P	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	180.00

  

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$3109.20
SHIP VIA ANDERSON COUNTY				Taxable	3109.20
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	240.00
				<b>TOTAL</b>	<b>\$3449.20</b>

1 - Merchant Copy

