



KANSAS CORPORATION COMMISSION 1104391
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 #: _____
11/02/2012 11/05/2012 11/05/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-003-25576-00-00
Spot Description: _____
NW SW NE NE Sec. 15 Twp. 21 S. R. 20 East West
4365 Feet from North / South Line of Section
1127 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: WARE Well #: 28-I
Field Name: Bush City Shoestring
Producing Formation: Squirrel
Elevation: Ground: 1169 Kelly Bushing: 1169
Total Depth: 836 Plug Back Total Depth: 830
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: 830
feet depth to: 0 w/ 84 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: 12/14/2012

1104391

Operator Name: Kent, Roger dba R J Enterprises Lease Name: WARE Well #: 28-1
 Sec. 15 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 Wireline 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>809</td> <td></td> </tr> <tr> <td>dk sand</td> <td>815</td> <td></td> </tr> <tr> <td>shale</td> <td>836</td> <td></td> </tr> </table>	Name	Top	Datum	bkn sand	809		dk sand	815		shale	836	
Name	Top	Datum											
bkn sand	809												
dk sand	815												
shale	836												

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	84	
production	5.625	2.875	15	830		84	

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	780.0 - 790.0		
20	793.0 - 803.0		

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**

Ware 28-I

Start 11-2-2012

Finish 11-5-2012

3	soil	3	
5	sand/rock	8	
20	lime	28	
166	shale	194	
31	lime	225	
31	shale	256	
3	lime	259	
38	shale	297	set 20' 7"
110	lime	407	ran 830' 2 7/8
167	shale	574	cemented to surface 84 sxs
17	lime	591	
57	shale	648	
29	lime	677	
23	shale	700	
12	lime	712	
10	shale	722	
12	lime	734	
9	shale	743	
10	lime	753	
14	shale	767	
8	sandy shale	775	odor
4	sandy shale	779	good show
30	bkn sand	809	good show
6	Dk sand	815	good show
21	shale	836	T.D.

GARNETT TRUE VALUE HOMECENTER

410 N Maple
Garnett, KS 66032
(785) 448-7108 FAX (785) 448-7135

Statement Copy
INVOICE
PLEASE REFER TO INVOICE NUMBER
ON ALL CORRESPONDENCE

Page: 1 Invoice: **10191163**

Special : Time: 12:58:35
Instructions : Ship Date: 10/09/12
Invoice Date: 10/09/12
Due Date: 11/08/12

Sale rep #: JIM Acct rep code:

Bill To: **ROGER KENT** Ship To: **ROGER KENT**
22082 NE NEOSHO RD (785) 448-6905 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-6905

Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	All Price/Unit	PRICE	EXTENSION
80.00	80.00	F	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	6.2900 ea	6.2900	603.20
2.00	2.00	F	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	30.00

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$633.20
SHIP VIA ANDERSON COUNTY				Taxable	533.20
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	41.59
				Tax #	

3 - Statement Copy

TOTAL \$574.79



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: **10191695**

Special : Time: 10:01:58
Instructions : Ship Date: 10/23/12
Invoice Date: 10/23/12
Due Date: 11/08/12

Sale rep #: MIKE Acct rep code:

Bill To: **ROGER KENT** Ship To: **ROGER KENT**
22082 NE NEOSHO RD (785) 448-6905 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-6905

Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	All Price/Unit	PRICE	EXTENSION
580.00	580.00	F	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	6.2900 ea	6.2900	3622.40
540.00	540.00	F	BAG	CPPO	PORTLAND CEMENT-44#	8.9900 ea	8.9900	4854.60

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$9377.00
SHIP VIA ANDERSON COUNTY				Taxable	8377.00
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	653.41
				Tax #	

1 - Merchant Copy

TOTAL \$9030.41

