



KANSAS CORPORATION COMMISSION 1104376
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>11/01/2012</u>	<u>11/02/2012</u>	<u>11/02/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-25575-00-00
Spot Description: _____
SW SW NE NE Sec. 15 Twp. 21 S. R. 20 East West
4013 Feet from North / South Line of Section
1161 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: WARE Well #: 27-1
Field Name: Bush City Shoestring
Producing Formation: Squirrel
Elevation: Ground: 1172 Kelly Bushing: 1172
Total Depth: 840 Plug Back Total Depth: 834
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: 834
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 Gantson Date: 12/14/2012



1104376

Operator Name: Kent, Roger dba R J Enterprises Lease Name: WARE Well #: 27-1
 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 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>814</td> <td></td> </tr> <tr> <td>dk sand</td> <td>819</td> <td></td> </tr> <tr> <td>shale</td> <td>840</td> <td></td> </tr> </table>	Name	Top	Datum	bkn sand	814		dk sand	819		shale	840	
Name	Top	Datum											
bkn sand	814												
dk sand	819												
shale	840												

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	834		84	

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	789.0 - 799.0		
20	801.0 - 811.0		

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 27-I

Start 11-1-2012

Finish 11-2-2012

3	soil	3	
4	sand/rock	7	
29	lime	36	
162	shale	198	
31	lime	229	
31	shale	260	
4	lime	264	
38	shale	302	set 20' 7"
107	lime	409	ran 833.7' 2 7/8
168	shale	577	cemented to surface 84 sxs
20	lime	597	
56	shale	653	
29	lime	682	
24	shale	706	
10	lime	716	
12	shale	728	
12	lime	740	
9	shale	749	
8	lime	757	
14	shale	771	
7	sandy shale	778	odor
10	sandy shale	788	good show
26	bkn sand	814	good show
5	Dk sand	819	good show
21	shale	840	T.D.

GARNETT TRUE VALUE HOMECENTER

410 N Maple
Garnett, KS 66032
(785) 448-7106 FAX (785) 448-7135

Statement Copy
INVOICE
PLEASE REFER TO INVOICE NUMBER
ON ALL CORRESPONDENCE

Page: 1 Invoice: **10191163**

Special : Time: 12:56:35
Instructions : Ship Date: 10/09/12
Sales rep #: JIM Acct rep code: Invoice Date: 10/09/12
Due Date: 11/08/12

Buy To: **ROGER KENT** Ship To: **ROGER KENT**
22062 NE NEOSHO RD (785) 448-6995 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-6995

Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM #	DESCRIPTION	Alt Price/Lbm	PRICE	EXTENSION
80.00	80.00	P	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	6.2900 ea	6.2900	503.20
2.00	2.00	P	PL	CPMP	MONARCH PALLET	15.0000 PL	15.0000	30.00

FILED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$533.20
SHIP VIA ANDERSON COUNTY				Taxable	533.20
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	41.59
				TOTAL	\$574.79

3 - Statement Copy



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GARNETT TRUE VALUE HOMECENTER

410 N Maple
Garnett, KS 66032
(785) 448-7106 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
Sales rep #: MOKE Acct rep code: Invoice Date: 10/23/12
Due Date: 11/08/12

Buy To: **ROGER KENT** Ship To: **ROGER KENT**
22062 NE NEOSHO RD (785) 448-6995 NOT FOR HOUSE USE
GARNETT, KS 66032 (785) 448-6995

Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM #	DESCRIPTION	Alt Price/Lbm	PRICE	EXTENSION
500.00	500.00	P	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	6.2900 ea	6.2900	3146.00
843.00	843.00	P	BAG	CPPC	PORTLAND CEMENT-94#	8.9900 ea	8.9900	4334.80

FILED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$6377.00
SHIP VIA ANDERSON COUNTY				Taxable	6377.00
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	653.41
				TOTAL	\$7030.41

1 - Merchant Copy



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