



KANSAS CORPORATION COMMISSION 1105885
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 #: _____
11/06/2012 11/07/2012 11/07/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-003-25651-00-00

Spot Description: _____
NE_NW_SW_NW Sec. 15 Twp. 21 S. R. 20 East West
3741 Feet from North / South Line of Section
4763 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Anderson

Lease Name: WEISS Well #: 11-A

Field Name: BUSH CITY SHOESTRING

Producing Formation: SQUIRREL

Elevation: Ground: 1168 Kelly Bushing: 1168

Total Depth: 854 Plug Back Total Depth: 848

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: 848

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: 12/28/2012



1105885

Operator Name: Kent, Roger dba R J Enterprises Lease Name: WEISS Well #: 11-A
 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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i></p> <p>List All E. Logs Run: GAMMA RAY/NEUTRON/CCL DRILLERS LOG</p>	<p><input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample</p> <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>oil sand</td> <td>830</td> <td></td> </tr> <tr> <td>dk sand</td> <td>833</td> <td></td> </tr> <tr> <td>shale</td> <td>854</td> <td></td> </tr> </table>	Name	Top	Datum	oil sand	830		dk sand	833		shale	854	
Name	Top	Datum											
oil sand	830												
dk sand	833												
shale	854												

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	848		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
9	797.0 - 801.0		
20	811.0 - 829.0		

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: _____ _____
--	---	---

**R.J. Enterprise
22082 NE Neosho RD
Garnett, KS 66032**

Weis 11-A

Start 11-6-2012

Finish 11-7-2012

3	soil	3	
9	clay/rock	12	
37	lime	49	
161	shale	210	
31	lime	241	
27	shale	268	
3	lime	271	
38	shale	309	set 20' 7"
110	lime	419	ran 848.4' 2 7/8
171	shale	590	cemented to surface 84 sxs
17	lime	607	
58	shale	665	
32	lime	697	
22	shale	719	
11	lime	730	
14	shale	744	
10	lime	754	
8	shale	762	
10	lime	772	
17	shale	789	
6	sandy shale	795	odor
9	Bkn sand	804	good show
8	sandy shale	812	show
12	Bkn sand	824	good show
6	oil sand	830	good show
3	Dk sand	833	show
21	shale	854	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: 10/08/12
Sales rep #: JIM Acct rep code: Invoice Date: 10/09/12
Due Date: 11/08/12

Sold To: **ROGER KENT** Ship To: **ROGER KENT**
22082 NE NEOSHO RD (785) 448-6995 **NOT FOR HOUSE USE**
GARNETT, KS 66032 (785) 448-6995

Customer #: 0000357 Customer PO: Order By:

819

T 120

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Unit	PRICE	EXTENSION
80.00	80.00	P	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	8.2900 ea	8.2900	603.20
2.00	2.00	P	PL	CPMP	MONARCH PALLET	15.0000 ea	15.0000	30.00

FILED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____

SHIP VIA ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION

Taxable 533.20
Non-taxable 0.00
Tax # _____

Sales tax 41.59

Sales total \$533.20

TOTAL \$574.79

3 - Statement Copy



* 0 0 5 0 T 8 0 0 1 0 D L V H Q R *

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
Sales rep #: MIKE Acct rep code: Invoice Date: 10/23/12
Due Date: 11/08/12

Sold To: **ROGER KENT** Ship To: **ROGER KENT**
22082 NE NEOSHO RD (785) 448-6995 **NOT FOR HOUSE USE**
GARNETT, KS 66032 (785) 448-6995

Customer #: 0000357 Customer PO: Order By:

819

T 120

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Unit	PRICE	EXTENSION
560.00	560.00	P	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	8.2900 ea	8.2900	622.40
840.00	840.00	P	BAG	CPPC	PORTLAND CEMENT-04V	8.2900 ea	8.2900	654.60

FILED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____

SHIP VIA ANDERSON COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION

Taxable 8377.00
Non-taxable 0.00
Tax # _____

Sales tax 653.41

Sales total \$8377.00

TOTAL \$9030.41

1 - Merchant Copy



* 0 0 5 0 T 8 0 0 1 0 D L V H Q R *