



KANSAS CORPORATION COMMISSION 1109727  
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 #:  
12/03/2012 12/04/2012 12/04/2012  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-003-25682-00-00  
Spot Description:  
SE SE SW SW Sec. 8 Twp. 21 S. R. 20  East  West  
201 Feet from  North /  South Line of Section  
3984 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Anderson  
Lease Name: WILSON-MELCHER Well #: 12-A  
Field Name: Bush City Shoestring  
Producing Formation: Squirrel  
Elevation: Ground: 1117 Kelly Bushing: 1117  
Total Depth: 856 Plug Back Total Depth: 850  
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: 850  
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: 01/24/2013



1109727

Operator Name: Kent, Roger dba R J Enterprises Lease Name: WILSON-MELCHER Well #: 12-A  
 Sec. 8 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	bkn sand	822	
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	dk sand	825	
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	shale	856	
List All E. Logs Run: Gamma Ray/Neutron/CCL Drillers Log				

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	850		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	799.0 - 809.0		
20	811.0 - 821.0		

TUBING RECORD: Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. \_\_\_\_\_ Producing Method:  Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**R.J. Enterprise**  
**22082 NE Neosho RD**  
**Garnett, KS 66032**

**Wilson Melcher 12-A**

Start 12-3-2012

Finish 12-4-2012

3	soil	3	
6	clay/rock	9	
41	lime	50	
40	shale	90	
12	lime	102	
107	shale	209	
40	lime	249	
34	shale	283	set 20' 7"
8	lime	291	ran 849.7' 2 7/8
22	shale	313	cemented to surface 84 sxs
108	lime	421	
171	shale	592	
22	lime	614	
62	shale	676	
17	lime	693	
5	shale	698	
6	lime	704	
22	shale	726	
8	lime	734	
18	shale	752	
2	lime	754	
2	shale	756	
4	lime	760	
13	shale	773	
7	lime	780	
10	shale	790	
6	sandy shale	796	odor
8	Bkn sand	804	good show
12	oil sand	816	good show
6	Bkn sand	822	good show
3	Dk sand	825	show
31	shale	856	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: 10192283  
Special : Time: 18:07:59  
Instructions : Ship Date: 11/05/12  
Sales rep #: MIKE Acct rep code: Invoice Date: 11/06/12  
Due Date: 12/08/12  
Bill To: ROGER KENT Ship To: ROGER KENT  
22082 NE NEOSHO RD (785) 448-8305 NOT FOR HOUSE USE  
GARNETT, KS 66032 (785) 448-8305  
Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION	UNIT
590.00	540.00	P	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	6.9900 bag	6.9900	3522.40	
540.00	540.00	P	BAG	CPPC	PORTLAND CEMENT-94#	6.9900 bag	6.9900	4894.80	

PAID BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$5377.00
SHIP VIA	ANDERSON COUNTY	RECEIVED COMPLETE AND IN GOOD CONDITION		Taxable	9377.00
X				Non-taxable	0.00
				Sales tax	653.41
				<b>TOTAL</b>	<b>\$6030.41</b>

1 - Merchant Copy



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Statement Copy  
**INVOICE**  
PLEASE REFER TO INVOICE NUM  
ON ALL CORRESPONDENCE

Page: 1 Invoice: 10192854  
Special : Time: 18:59:07  
Instructions : Ship Date: 11/19/12  
Sales rep #: JIM Acct rep code: Invoice Date: 11/19/12  
Due Date: 12/08/12 REF  
Bill To: ROGER KENT Ship To: ROGER KENT  
22082 NE NEOSHO RD (785) 448-8305 NOT FOR HOUSE USE  
GARNETT, KS 66032 (785) 448-8305  
Customer #: 0000357 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION	UNIT
-29.00	-29.00	P	PL	CPMP	MONARCH PALLET			15.0000 PL	
540.00	540.00	P	BAG	CPPC	PORTLAND CEMENT-94#	6.9900 bag	6.9900	4894.80	

PAID BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$544
SHIP VIA	ANDERSON COUNTY	RECEIVED COMPLETE AND IN GOOD CONDITION		Taxable	4410.00
X				Non-taxable	0.00
				Sales tax	3
				<b>TOTAL</b>	<b>\$547</b>

2 - Statement copy

