

083-21466-0000

ORIGINAL

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 31191

Name: R & B Oil and Gas, Inc.

Address P.O. Box 422

City/State/Zip Attica, Kansas 67009

Purchaser: N/A

Operator Contact Person: Randy Newberry

Phone (316) 254-7972

Contractor: Name: Vonfeldt Drilling, Inc.

License: 9431

Wellsite Geologist: Tim Pierce

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SLOW Term Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Gas, etc.)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBSD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

8-23-00 8-30-00 8-30-00
Spud Date Date Reached TD Completion Date

API NO. 15- _____
County Hodgeman
- NE - SE - NE Sec. 4 Twp. 24S Rge. 21 EW
3630 Feet from SW (circle one) Line of Section
330 Feet from EW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Gleason Well # 1
Field Name _____
Producing Formation None
Elevation: Ground 2345 KB 2350
Total Depth 4593 PBSD _____
Amount of Surface Pipe Set and Cemented at 320 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
 Alternate II completion, cement circulated from _____
_____ depth to _____ w/ _____ sx cmt.
_____ Fluid Management Plan DA A 8/25/02
(Data must be collected from the Reserve Pit)
Chloride content 38,000 ppm Fluid volume 320 bbls
Dewatering method used Allow to dry and backfill
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____ License No. _____
_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W
County _____ Docket No. _____

CONSERVATION DIVISION
Wichita, Kansas
OCT 25 2000
STATE CORPORATION COMMISSION

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature Randy Newberry
Title President Date 10-24-00

Subscribed and sworn to before me this 24th day of October, 192000

Notary Public Rebecca S. Newberry

Date Commission Expires 7-21-2001

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
____ KCC _____ SWD/Rep _____ NGPA
____ KGS _____ Plug _____ Other (Specify)

Form ACO-1 (7-91)

COPY

REBECCA S. NEWBERRY
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. _____

Operator Name R & B Oil & Gas, Inc.

Lease Name Gleason

Well # 1

Sec. 4 Twp. 24S Rge. 21

East
 West

County Hodgeman

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
(Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run:

Radiation Guard Log

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
ANHYDRITE	1436	
HEEBNER	3956	
LANSING	4056	
MARMATON	4432	
MARMATON "B"	4448	
LABETTE SHALE	4574	

CASING RECORD

New 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

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 (Amount and Kind of Material Used)	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj.	Producing Method
<u>D&A</u>	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil <u>N/A</u> Bbls.	Gas <u>N/A</u> Mcf	Water <u>N/A</u> Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease
(If vented, submit ACO-18.)

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566

ORIGINAL

INVOICE

Invoice Number: 082043

Invoice Date: 08/22/00

Sold R & B Oil & Gas, Inc.

To: P. O. Box 422
 Attica, KS
 67009-0422

*Give Back
to me*

71730

7GLV000

Cust I.D.: R&B
 P.O. Number: Gleason #1
 P.O. Date: 08/22/00

Due Date: 09/21/00
 Terms: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net
Common	120.00	SKS	6.3500	762.00
Pozmix	80.00	SKS	3.2500	260.00
Gel	4.00	SKS	9.5000	38.00
Chloride	6.00	SKS	28.0000	168.00
Handling	200.00	SKS	1.0500	210.00
Mileage (45)	45.00	MILE	8.0000	360.00
200 sks @ \$.04 per sk per mi				
Surface	1.00	JOB	470.0000	470.00
Mileage pmp trk	45.00	MILE	3.0000	135.00
Extra Footage	20.00	PER	0.4300	8.60
Wood plug	1.00	EACH	45.0000	45.00

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 245.66
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2456.60
 Tax: 0.00
 Payments: 0.00
 Total: 2456.60

- 245.66

*PA 8/28/00
#22052*

\$2210.94

ALLIED CEMENTING CO., INC.

4050

Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

ORIGINAL

DATE 08-22-00 SEC. 4 TWP. 24S RANGE 21W CALLED OUT 5:00 PM ON LOCATION 8:00 AM JOB START 3:20 AM JOB FINISH 3:10 PM
 LEASE REASON WELL # 1 LOCATION GRAVEL KS 12 1/2 S W 31 E COUNTY HODGEMAN STATE KS
 OLD OR NEW (Circle one)

CONTRACTOR Don Felat, DDC #1 OWNER R+B Oil & Gas Inc.

TYPE OF JOB Surface
 HOLE SIZE 12 1/4" T.D. 332'
 CASING SIZE 8 5/8" DEPTH 320'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 250# MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 20'
 PERFS. _____
 DISPLACEMENT 19 1/4 B/s

CEMENT AMOUNT ORDERED 200# 60/40 BZ 3% Ca 28% GEL

COMMON	120	@ 6.35	762.00
POZMIX	80	@ 3.25	260.00
GEL	4	@ 9.50	38.00
CHLORIDE	6	@ 28.00	168.00

EQUIPMENT
 PUMP TRUCK CEMENTER Don
 # 120 HELPER JD
 BULK TRUCK # 342 DRIVER Steve
 BULK TRUCK # _____ DRIVER _____

HANDLING 200 @ 1.05 210.00
 MILEAGE 45 360.00

TOTAL \$ 1798.00

REMARKS:
Run log to 320' - Break circulation
with 28% GEL
Mixed 200# 60/40 BZ 3% Ca
28% GEL Dispensed in 14 1/2 B/s
Cement Displacement

SERVICE
 DEPTH OF JOB 320
 PUMP TRUCK CHARGE 0-300' 420.00
 EXTRA FOOTAGE 20' @ .43 8.60
 MILEAGE 45 @ 3.00 135.00
 PLUG 1-top 8 5/8" 11 B/s @ 45.00 45.00

TOTAL \$ 658.60

CHARGE TO: R+B Oil & Gas Inc.
 STREET P.O. Box 442
 CITY Anna STATE KS ZIP 67609

FLOAT EQUIPMENT
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TOTAL _____
 TAX - 0 -
 TOTAL CHARGE \$ 2456.60
 DISCOUNT \$ 245.66 IF PAID IN 30 DAYS

SIGNATURE R. G. Miller

PRINTED NAME R. G. Miller

Net \$ 2210.94

ALLIED CEMENTING CO., INC.

Federal Tax I.D.# 48-0727860

7554 ORIGINAL

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

West Road

DATE 8-30-00	SEC. 4	TWP. 24	RANGE 21	CALLED OUT 3:00 PM	ON LOCATION 5:30 PM	JOB START 5:45 PM	JOB FINISH 8:00 PM
LEASE W. Cannon	WELL# 1	LOCATION Hay 1 1/2 S		COUNTY Hodgeman	STATE Kansas		

OLD OR **(NEW)** (Circle one)

CONTRACTOR **Vonfeldt Drilling**

TYPE OF JOB **Rotary Plug**

HOLE SIZE **7 1/2** T.D. **4593'**

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE **4 1/2 x H** DEPTH **1460**

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER **R.B. Oil**

CEMENT

AMOUNT ORDERED **1850x 60/40 POZ**

6% gel 1/4" #16 seal per oz

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING **1850x** @ _____

MILEAGE _____ @ _____

TOTAL _____

EQUIPMENT

A.B.

PUMP TRUCK CEMENTER **AD Drilling**

181 HELPER **Fura**

BULK TRUCK

341 DRIVER **Steve Turley**

BULK TRUCK

_____ DRIVER _____

REMARKS:

Safety meeting (fill hole)

1st 500x - 1460

2nd 500x - 600

3rd 500x - 350

4th 100x - 40

5th

THANKS

SERVICE

DEPTH OF JOB **1460'**

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG **1.8%** @ _____

_____ @ _____

_____ @ _____

TOTAL _____

CHARGE TO: **R.B. Oil**

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

Thank You

To Allied Cementing Co., Inc. you are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE **X** **Dreg Davidson** **X**

PRINTED NAME **DREG DAVIDSON**

TOTAL _____