



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1047969

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

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 #: _____

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

_____ Feet from ☐ North / ☐ South Line of Section

_____ Feet from ☐ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☐ SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☐ No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

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: _____ Date: _____



1047969

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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 ☐ Yes ☐ No
 (Attach Additional Sheets)

 Samples Sent to Geological Survey ☐ Yes ☐ No

 Cores Taken ☐ Yes ☐ No

 Electric Log Run ☐ Yes ☐ No

 Electric Log Submitted Electronically ☐ Yes ☐ No
 (If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum
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 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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Lease :	HARVEY	
Owner:	BOBCAT OILFIELD SERVICES, INC.	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface: 20FT, 6IN	Cemented: 5 SACKS	Hole Size: 8 3/4
Longstring 338 2 7/8 HYDRILL	Cemented: 50	Hole Size: 5 5/8

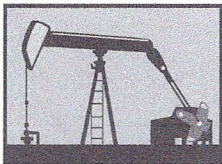
Dale Jackson Production Co.
Box 266, Mound City, Ks 66056
Cell # 620-363-2683
Office # 913-795-2991

Well #: G-7
Location: S2,-SE-SE, S:5, T: 20, S.R.: 23, E
County: LINN
FSL: 330- 342
FEL: 660- 690
API#: 15-107-24297-00-00
Started: 11-15-10
Completed: 11-16-10

SN: NONE	Packer:	TD: 342
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	TOP SOIL			SURFACE: 11-13-10 SET TIME: 9:00 A.M. CALLED: 11-12-10 RUSSEL 11-16-10 LONGSTRING:338' 2 7/8 HYDRILL TD 342' SET TIME: 2:30 P.M. CALLED 1:15 P.M. JUDY
19	21	LIME			
4	25	SHALE			
5	30	BLACKSHALE			
18	48	LIME			
4	52	SHALE			
2	54	BLACKSHALE			
14	68	LIME (SHALEY)			
1	69	BLACKSHALE			
10	79	SANDY SHALE (LIMEY)			
32	111	SHALE			
16	127	SANDY SHALE (OIL SAND STK)			
91	218	SHALE			
1	219	BLACKSHALE			
9	228	SHALE			
5	233	SANDY SHALE (LIMEY)			
25	258	SHALE			
11	269	LIME (OIL SHOW)			
2	271	SHALE			
1	272	SHALE (OIL SAND STK) (SOME FLOW OF WATER A LITTLE OIL)			
2	274	OIL SAND (SHALEY) (FAIR BLEED) (SOME FLOW OF WATER A LITTLE OIL)			
2	276	SANDY SHALE (SOME OIL SAND STREAKS) (POOR BLEED)			
5.5	281.5	OIL SAND (SOME SHALE) (GOOD BLEED) (A LITTLE SHOW OF WATER)			
2.5	284	OIL SAND(SHALEY) (FAIR BLEED) (SOME WATER)			
2.5	286.5	OIL SAND (LIMEY) (GOOD BLEED)			
1	287.5	OIL SAND (SOME SHALE) (GOOD BLEED)			
1	288.5	SANDY SHALE (SOME OIL SAND STREAKS) (GOOD BLEED)			
1.5	290	OIL SAND (SOME SHALE) (GOOD BLEED)			
2.5	292.5	OIL SAND (SHALEY) (GOOD BLEED)			
5.5	298	SANDY SHALE (POOR BLEED)			
2	300	OIL SAND (FAIR BLEED) (SHALEY)			
5	305	SANDY SHALE (OIL SAND STK)			
12	317	SHALE			
3	320	COAL			
4	324	SHALE			
7	331	LIME			
TD	342	SHALE			



Dale Jackson Production Co.
Box 266, Mound City, Ks 66056
Cell # 620-363-2683
Office # 913-795-2991



Lease :	HARVEY
Owner:	BOBCAT OILFIELD SERVICES, INC.
OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

Core
Run # 1

Well #: G-7 NE-SW
Location: S2,-SE-SE, S:5, T: 20, S.R.: 23, E
County: LINN
FSL: 330 342
FEL: 660 690
API#: 15-107-24297-00-00
Started: 11-15-10
Completed: 11-16-10

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	274		-----	SANDY SHALE (SOME OIL SAND STREAKS) (POOR BLEED)	276
1	275		1		
2	276		1.5		
3	277		1	OIL SAND (SOME SHALE) (GOOD BLEED) (A LITTLE SHOW OF WATER)	281.5
4	278		1		
5	279		1.5		
6	280		1		
7	281		1.5		
8	282		1	OIL SAND (SHALEY) FAIR BLEED (SOME WATER)	284
9	283		1.5		
10	284		1		
11	285		1.5	OIL SAND (LIMEY) (GOOD BLEED)	286.5
12	286		1.5		
13	287		1.5		
14	288		1.5	OIL SAND (SOME SHALE) (GOOD BLEED)	287.5
15	289		1.5		288.5
16	290		1	SANDY SHALE SOME OIL SAND STREAKS (GOOD BLEED)	
17	291		1.5	OIL SAND (SOME SHALE) (GOOD BLEED)	292.5
18	292		1.5		
19	293		1.5	SANDY SHALE POOR BLEED	
20	294		1.5		

copy

Avery Lumber

P.O. BOX 66
MOUND CITY, KS 66056
(913) 795-2210 FAX (913) 795-2194

Customer Copy

INVOICE

PLEASE REFER TO INVOICE NUMBER
ON ALL CORRESPONDENCE

Page: 1

Invoice: 10025897

Special : Time: 15:24:51
Instructions : Ship Date: 11/10/10
Sale rep #: MAVERY MIKE Acct rep code: Invoice Date: 11/18/10
Due Date: 12/05/10

Sold To: BOBCAT OILFIELD SRVC, INC
C/O BOB EBERHART
30805 COLDWATER RD
LOUISBURG, KS 66053

Ship To: BOBCAT OILFIELD SRVC, INC
(913) 837-2823
(913) 837-2823

Customer #: 3570021

Customer PO:

Order By: TERRY

popimg01

5TH
T 26

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
280.00	280.00	L	BAG	CPPC	PORTLAND CEMENT	7.9900 BAG	7.9900	2237.20
240.00	240.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.1000 BAG	5.1000	1224.00
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

Direct Delivery
Harvey
OKRE
G-7 11-16

INVOICE

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$3699.20
SHIP VIA LINN COUNTY				Taxable	3699.20
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	233.05

TOTAL \$3932.25

2 - Customer Copy

