

Kansas Corporation Commission Oil & Gas Conservation Division

1067476

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 #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City:	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used?
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Conv. to GSW	Chloride content: ppm Fluid volume: bbls Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec Twp S. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	

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:

Side Two



Operator Name: _ Lease Name: _ _ Well #: _ 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 Wireline Logs surveyed. Attach final geological well site report. **Drill Stem Tests Taken** Yes No Log Formation (Top), Depth and Datum Sample (Attach Additional Sheets) Name Top Datum Samples Sent to Geological Survey ☐ Yes □ No Cores Taken Yes No Electric Log Run Electric Log Submitted Electronically Yes No (If no, Submit Copy) List All E. Logs Run: CASING RECORD Used New Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight # Sacks Type and Percent Type of Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Additives Depth Cement Used ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated (Amount and Kind of Material Used) Depth TUBING RECORD: Size: Set At: Packer At: Liner Run: No Yes Producing Method: Date of First, Resumed Production, SWD or ENHR. Pumping Gas Lift Other (Explain) Flowing **Estimated Production** Bbls. Water Bbls. Gas-Oil Ratio Oil Gas Mcf Gravity Per 24 Hours **DISPOSITION OF GAS:** METHOD OF COMPLETION: PRODUCTION INTERVAL: Open Hole Dually Comp. Perf. Commingled Vented Sold Used on Lease (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)

Lease:	S BAKER	Processors and continues of the second secon
Owner:	BOBCAT OIL	FIELD SERVICES, INC.
OPR#:	3895	VA
Contractor:	DALE JACKS	ON PRODUCTION CO.
OPR #:	4339	A AN .
Surface:	Cemented:	Hole Size:
20FT, 6IN	5 SACKS	8 3/4
Longstring	Cemented:	Hole Size:
298 2 7/8	50	5 5/8

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

Well #: Q-6	SW
Location: SZ,SW,SE, S:	5, T:23, S.R.:23,
County: LINN	
FSL: 75 84	2 1
FEL: 3630	
API#: 15-107-24433-0	0-00
Started: 8-15-11	A SAME OF THE SAME
Completed: 8-16-11	

SN:	Packer:	TD: 300
Plugged:	Bottom Plug	

	Well Log BTM Formation Depth 2 TOP SOIL		Plugged:		Bot	ttom Plug:		
TKN	втм	Formation		TKN	втм	Formation		•
	Depth				Depth			
2	2	TOP SOIL		SURFA	ACE: 8-11-	11		•
2	4	CLAY & LIME		SET TI	ME: 7:00P	M		
20	24	LIME		CALLE	D: 12:30P	M- JUDYCANCELED- 2:30	PM	
2	26	CUALE						

Depth 2	TOP SOIL		Depth			
	TOP SOIL					
			ACE: 8-11-1			
1	CLAY & LIME	SET TIME: 7:00PM CALLED: 12:30PM- JUDYCANCELED- 2:30PM				
24	LIME	CALLE	D: 12:30PI	- JUDYCANCELED- 2:3UPIVI		
26		SURF	ACE: 8-15-1			
28		1				
31		CALLE	D: 1:45PM	STEVE		
36	SHALE (LIMEY)					
11	LIME					
12	BLACK SHALE					
51	SHALE (LIMEY)	CALLE	D. 11.45AI	- KTAIN		
L92	SHALE					
193	BLACK SHALE					
200	SHALE					
206	LIME					
227	SHALE					
239	LIME					
241	SHALE					
246	OIL SAND (SHALEY) (FAIR BLEED)			· · · · · · · · · · · · · · · · · · ·		
258						
259.5				4.0.2000		
261						
264						
265	The second secon					
267.5	OIL SAND (SOME SHALE) (GOOD BLEED)					
270						
271					1000	
275		-				
288						
290						
295						
800						
		_				
	, , , , , , , , , , , , , , , , , , ,					
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26 331 36 36 36 36 36 36 36 36 36 36 36 36 36	5 5 6 1 2 1 2 1 2 1 2 2 1 3 3 3 3 3 3 3 3 3 3 4 5 5 5 6 6 6 6 6 6 6 6 6 6 6 7 7 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9	SHALE BLACK SHALE LIME SHALE (LIMEY) LIME BLACK SHALE SHALE (LIMEY) SHALE SHALE	SHALE BLACK SHALE LIME SHALE (LIMEY) LIME BLACK SHALE SHALE (LIMEY) CALLE SHALE (LIMEY) SHALE SURFA SET TI CALLE SET TI CALLE	SURFACE: 8-15-11 SET TIME: 4:00PM CALLED: 1:45PM- CALLED: 1:45PM- CALLED: 1:45PM- CALLED: 1:45PM- CALLED: 1:45AM CALLED: 11:45AM CALLED: 1:45AM CALLED: 1:45A	S SHALE B BLACK SHALE L LIME CALLED: 1:45PM- STEVE LONGSTRING: 298, 2 7/8 8RD PIPE, TD-300, 8-16-11 SET TIME: 1:30PM CALLED: 1:45AM- RYAN L LIME LONGSTRING: 298, 2 7/8 8RD PIPE, TD-300, 8-16-11 SET TIME: 1:30PM CALLED: 11:45AM- RYAN CALLED:	



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

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

Core	Run	#1

Well #: Q-655 Well #: Q-656 .S.W Location: \$2,SW,SE, S:5, T:23, S.R.:23, County: LINN FSL: 75-84 FEL: 3630 API#: 15-107-24433-00-00

Started: 8-15-11 Completed: 8-16-11

		Completed: 8-16-11				
FT	Depth	Clock	Time	Formation/Remarks	Depth	
0	244					
1	245					
				OIL SAND SHALE (FAIR BLEED)	246	
2	246		*			
3	247					
4	248					
5	249					
6	250					
7	251	*				
8	252					
9	253					
10	254	×				
11	255					
12	256					
13	257					
				OIL SAND (SOME SHALE) (GOOD BLEED)	258	
14	258					
15	259			OIL SAND (SHALEY) (GOOD BLEED)	259.5	
16	260			OIL SAIND (SHALET) (GOOD BLEED)	233.3	
17	261					
18				OIL SAND (SOME SHALE) (GOOD BLEED)		
19						
1.7						
20						

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

Invoice: 10033533 Page: 1 09:11:41 Special Time: 08/11/11 Instructions Ship Date: Invoice Date: 08/15/11 Due Date: 09/05/11 Sale rep #: MAVERY MIKE Acct rep code: Sold To: BOBCAT OILFIELD SRVC,INC Ship To: BOBCAT OILFIELD SRVC,INC C/O BOB EBERHART (913) 837-2823 30805 COLDWATER RD LOUISBURG, K8 66053 (913) 837-2823

Customer #: 3570021 Order By:TERRY

\$4021.54

TOTAL

	Customer	#: J:	5/002	21 .	Customer PO:		Order By: TERRY		577
	<u> </u>							10gmiqoq	Т 2
ORDER	SHIP	LL	J/M	ITEM#	DESCRIPT	TION	Alt Price/Uom	PRICE	EXTENSION
280.00	280.00	LE	BAG	CPPC	PORTLAND CEMENT		8.2900 BAG	8.2900	2321.2
240.00	240.00	LE	BAG	СРРМ	POST SET FLY ASH	75#	5.1000 BAG	5.1000	1224.0
14.00	14.00	L E	EA	CPQP	QUIKRETE PALLETS		17.0000 EA	17.0000	238.0
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			Control of the contro		Faxeo	13 857 8 15 P			
		Lander	: u d i	FILLED BY SHIP VIA	CHECKED BY DATE SI	*	The state of the s	Sales total	\$3783.2
				X	CEIVED COMPLETE AND IN GOOD	CONDITION ————	Taxable 3783.20 Non-taxable 0.00 Tax #	Sales tax	238.

2 - Customer Copy

