



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 Recompletion Date Date Reached TD Completion Date or 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: _____



1083341

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
---	---

CASING RECORD <input 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

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

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
-----------------------------------	-----------	---------	-------------	---------------	---------

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
---	--	--

Lease:	Schendel	
Owner:	Bobcat Oilfield Services, Inc.	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface:	Cemented:	Hole Size:
20' 6"	5	8 3/4
Longstring	Cemented:	Hole Size:
712' 2 7/8	90 sacks	5 5/8
8 rnd		

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



Well #: 6-12
Location: NW-SW-NE-NW S24 T16 R21E
County: Miami
FSL: 4560
FEL: 3668
API#: 15-121-29087-00-00
Started: 5/2/12
Completed: 5/8/12

SN: None	Packer:	TD: 720
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	Top Soil	17	622	Shale
5	7	Clay	4	626	Lime (Strong Odor)
15	22	Lime	8	634	Black shale
4	26	Shale	4	638	Lime (Shaley)
5	41	Lime	15	653	Shale
9	50	Shale	4	657	Lime
19	69	Lime	16	673	Shale
3	72	Shale	1	674	Lime
6	78	Red Bed	5	679	Shale
17	95	Sandy Shale	1	680	Oil Sand (Poor Bleed)
19	114	Lime	1	681	Sandy Shale
29	143	Sandy Shale	4	684	Oil Sand (Oil & Water) (Fair Bleed) (Some Shale)
60	203	Shale	1.5	685.5	Oil Sand (Fractured) "Water"
21	224	Lime	1.5	687	Lime
32	256	Shale (Limey)	.5	687.5	Sandy Shale
9	265	Lime	2.5	690	Oil Sand (Shaley) (Good Bleed)
7	272	Shale	1	691	Sandy shale (Some Oil Sand Streaks)
1	273	Coal	2	693	Sandy Shale
8	281	Shale	1.5	694.5	Dry Sands (Fractured)
12	293	Sand (Dry)	5.5	700	Sandy shale
2	295	Shale	TD	720	Shale
6	301	Lime			
5	306	Shale			
1	307	Lime			
16	323	Shale			
9	332	Lime			
2	334	Shale			
12	346	Lime			
4	350	Shale (Limey)			Surface 5/2/12 Set Time 6:30pm Called 3:40pm Becky
3	353	Black Shale			
6	359	Shale (Limey)			
20	379	Lime			Longstring 714' 2 7/8" 8 rnd TD 720'
4	383	Black Shale			Set time 5:30pm 5/7/12 Called 3:30pm Mike
16	399	Lime			
164	563	Shale			
10	573	Lime			
20	593	Shale			
2	595	Coal			
5	600	Shale			
2	602	Lime			
3	605	Sandy shale (Oil Show) (Poor Bleed)			



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

Well #: 6-12
Location: NW-SW-NE-NW S24 T16 R21E
County: Miami
FSL: 4560
FEL: 3668
API#: 15-121-29087-00-00
Started: 5/2/12
Completed: 5/8/12

Core Run #1

Lease :	Schendel
Owner:	Bobcat Oilfield Services, Inc.
OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	680	0:00	0	Sandy Shale	681
1	681	3:00	3		
2	682	5:00	2	Oil Sand Oil & Water (Fair Bleed) Some Shale	684
3	683	6:30	1.5		
4	684	8:30	2		
5	685	10:30	2	Oil Sand (Fractured) ("Water")	685.5
6	686	13:00	2.5	Lime	687
7	687	17:00	4		
8	688	21:30	4.5	Sand & Shale (Oil Sand Streaks)	687.5
9	689	25:00	3.5	Oil Sand (Shaley) (Good Bleed)	690
10	690	28:00	3		
11	691	33:30	5.5	Sandy Shale (Oil Sand Streaks)	691
12	692	39:30	6	Sandy Shale	693
13	693	46:00	6.5		
14	694	51:30	5.5	Dry Sand (Fractured)	694.5
15	695	58:00	6.5	Sandy Shale	
16	696				
17	697				
18					
19					
20					

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

Merchant Copy
INVOICE
THIS COPY MUST REMAIN AT
MERCHANT AT ALL TIMES!

Page: 1		Invoice: 10040320	
Special :		Time:	13:55:27
Instructions :		Ship Date:	04/25/12
		Invoice Date:	04/27/12
Sale rep #: MAVERY MIKE	Accl rep code:	Due Date:	06/05/12
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:	

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
280.00	280.00	L	BAG	CPPC	PORTLAND CEMENT	8.8900 BAG	8.8900	2489.20
240.00	240.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.7900 BAG	5.7900	1389.60
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

Schendel
#6-12
5-8-12

Direct Delivery

913-837-4159

INVOICE

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$4116.80
SHIP VIA MIAMI COUNTY				Freight	100.00
RECEIVED COMPLETE AND IN GOOD CONDITION				Taxable	4216.80
X				Non-taxable	0.00
				Tax #	
				Misc + Frgt	100.00
				Sales tax	318.37

TOTAL \$4535.17

1 - Merchant Copy

