



**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: \_\_\_\_\_



1086925

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
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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

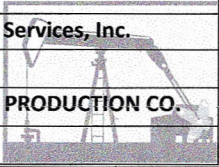
TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

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
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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 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: _____ _____
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Lease:	Cayot	
Owner:	Bobcat Oilfield Services, Inc.	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface: 20' 6"	Cemented: 5	Hole Size: 5 5/8
Longstring None	Cemented: Plugged 80	Hole Size: 5 5/8



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

Well #: 7-12
Location: NW-NE-SW-SE S24 T16 R21E
County: Miami
FSL: 1320
FEL: 1760
API#: 15-121-29152-00-00
Started: 6/18/12
Completed: 6/19/12

SN:	Packer:	TD: 719'
Plugged: 80 Sacks	Bottom Plug: TD 645-11 sacks 400' surface- 69 sacks	

## Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	Top Soil	6	605	Lime
9	11	Clay	3	608	Oil Sand (Some Shale) (Fair Bleed)
21	32	Lime	13	621	Shale
6	38	Black Shale	3	624	Lime
10	48	Lime	21	645	Shale (Limey)
9	57	Shale (Limey)	7	652	Lime
20	77	Lime	5	657	Shale
3	80	Shale	1	658	Lime
3	83	Red Bed	6	664	Shale
14	97	Shale	2	666	Lime
17	114	Lime	3	669	Shale
5	119	Shale	3	672	Sandy Shale (Oil Sand Streak)
4	123	Sand (Dry)	3	675	Lime
13	136	Shale	2	677	Oil Sand (Some Shale) (Poor Bleed) (Water)
4	140	Sand (Dry)	.5	677.5	Lime
9	149	Shale	1	678.5	Sandy Shale (Oil Sand Streak)
7	156	Sandy Shale	2.5	681	Oil Sand (Some Shale) (Poor Bleed) (Water)
51	207	Shale	.5	681.5	Lime
20	227	Lime	2	683.5	Sandy Shale (Oil Sand Streak)
6	233	Shale	.5	684	Oil Sand (Some Shale) (Good Bleed) (Some Water)
10	243	Sand (Dry)	3.5	687.5	Sandy Shale (Oil Sand Streak)
15	258	Shale	TD	719	Shale
6	264	Lime			
13	277	Shale			
8	285	Shale (Limey)			
10	295	Sand (Dry)			
12	307	Lime			Surface 6-18-12 Set Time 10:30am Called 10:30am Judy
18	325	Shale			Plugged 6-19-12 TD 719
25	350	Lime			Time 11:00am Called 9:30am Ryan
7	357	Black Shale			
2	359	Shale (Limey)			
20	379	Lime			
4	383	Black Shale			
13	396	Lime			
111	507	Shale			
3	510	Sandy Shale (Oil Sand Streak)			
52	562	Shale			
9	571	Lime			
6	577	Shale			
1	578	Lime			
21	599	Shale			



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# Core Run #1

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

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	671	0:00	0	Sandy Shale (Oil Sand Streak)	671.8'
1	672	3:00	3	Lime	674.8'
2	673	6:00	3		
3	674	9:00	3		
4	675	11:30	2.5	Oil Sand (Some Shale) (Poor Bleed) (Water)	677.0'
5	676	14:00	2.5		
6	677	16:00	2		
				Lime	677.5'
7	678	19:00	3	Sandy Shale (Oil Sand Streak)	678.6'
8	679	22:30	3.5	Oil Sand (Some Shale) (Poor Bleed) (Water)	681.3'
9	680	25:00	2.5		
10	681	27:00	2		
				Lime	681.65'
11	682	30:00	3	Sandy Shale (Oil Sand Streak)	683.6'
12	683	33:30	3.5		
13	684	36:30	3	Oil Sand (Some Shale) (Good Bleed) (Some Water)	684.1'
14	685	41:00	4.5	Sandy Shale (Oil Sand Streak)	687.5'
15	686	45:00	4		
16	687	49:30	4		
17	688	53:30	4.5	Shale	
18	689	58:00	4.5		
19	690	1:02:30	4.5		
20	691	1:07:00	4.5		



Copy

**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: <b>10041609</b>	
Special :		Time:	13:43:45
Instructions :		Ship Date:	08/14/12
		Invoice Date:	06/18/12
Sale rep #: MAVERY MIKE		Acct rep code:	Due Date: 07/05/12
Sold To: <b>BOBCAT OILFIELD SRVC, INC</b>		Ship To: <b>BOBCAT OILFIELD SRVC, INC</b>	
C/O BOB EBERHART		(913) 837-2823	
30805 COLDWATER RD			
LOUISBURG, KS 66053		(913) 837-2823	
Customer #: 3570021	Customer PO:	Order By:	

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
175.00	175.00	L	BAG	CPPC	PORTLAND CEMENT	8.8900 BAG	8.8900	1555.75
360.00	360.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.7900 BAG	5.7900	2084.40
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

*Coyot  
7-12 Plug  
6/19*

*Direct Delivery*

**INVOICE**  
913-837-4155

FILLED BY		CHECKED BY		DATE SHIPPED	DRIVER	Sales total		\$3878.15	
SHIP VIA		MIAMI COUNTY		RECEIVED COMPLETE AND IN GOOD CONDITION		Freight	100.00	Misc + Frgt	100.00
<b>X</b>						Taxable	3978.15	Sales tax	300.35
						Non-taxable	0.00		
						Tax #			

**TOTAL \$4278.50**

1 - Merchant Copy

