



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



1094633

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

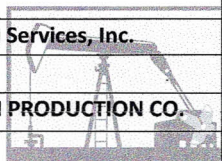
TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

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:	Cemented:	Hole Size:
20' 6"	5	8 3/4
Longstring	Cemented:	Hole Size:
709' 2 7/8	88 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 #: 2-12
Location: NE-NE-SW-SE S24 T16 R21E
County: Miami
FSL: 1320 1303
FEL: 1320 1315
API#: 15-121-29147-00-00
Started: 6/13/12
Completed: 6/14/12

SN: 678'	Packer:	TD: 719'
Plugged:	Bottom Plug:	

## Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	Top Soil	3	630	Lime
13	15	Clay	7	637	Black Shale
11	26	Lime	17	654	Lime
1	27	Clay	4	658	Lime
10	37	Lime	13	671	Shale
5	42	Black Shale	1	672	Lime
10	52	Lime	6	678	Shale
7	59	Shale (Limey)	1	679	Sandy Shale (0.7 Sand Streak)
3	62	Shale	3.5	682.5	Oil Sand (Some Shale) (Poor Bleed) (Some Water)
18	80	Lime	1	683.5	Oil Sand (Shale) (Poor Bleed) (Some Water)
7	87	Shale	1	684.5	Oil Sand (Some Shale) (Fair Bleed) (Some Water)
3	90	Red Bed	2	686.5	Oil Sand (Some Shale) (Poor Bleed) (Some Water)
14	104	Shale	1.5	688	Oil Sand (Some Shale) (Good Bleed) (Some Water)
16	120	Lime	1.5	689.5	Oil Sand (Some Shale) (Good Bleed) (Some Water)
6	126	Shale	.5	690	Lime
6	132	Sand (Dry)	.5	690.5	Oil Sand (Good Bleed) (Some Water)
14	146	Shale	.5	691	Lime
4	150	Sand (Dry)	7	698	Sandy Shale (Oil Sand Streak)
61	211	Shale	TD	719	Shale
20	231	Lime			
6	237	Shale			
11	248	Sand (Dry)			
15	263	Shale			
5	268	Lime			
25	293	Shale			
7	300	Sand (Dry)			
12	312	Lime			Surface 6-13-12 Set Time 2:00pm Called 11:15am Judy
18	330	Shale			Longstring 709' 2 7/8 pipe TD 719
25	355	Lime			Set Time 12:30pm 6-14-12 Called 11:15am Judy
13	368	Black Shale			
17	385	Lime			
4	389	Black Shale			
13	402	Lime			
166	568	Shale			
7	575	Lime			
8	583	Shale			
3	586	Lime			
19	605	Shale			
5	610	Lime			
2.5	612.5	Oil Sand (Limey) (Poor Bleed)			
14.5	627	Shale			



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OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

# Core Run #1

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	679	0:00	0	Oil Sand (Some Shale) (Poor Bleed) (Some Water) Fractured (679.8' - 680.0')	682.60'
1	680	1:00	1		
2	681	3:00	2		
3	682	4:00	1		
4	683	5:30	1.5	Oil Sand (Shaley) (Poor Bleed) (Some Water)	683.30'
5	684	7:00	1.5	Oil Sand (Some Shale) (Fair bleed) (Some Water)	684.60'
6	685	8:30	1.5	Oil Sand (Some Shale) (Poor Bleed) (Some Water)	686.50'
7	686	11:00	2.5		
8	687	13:00	2	Oil Sand (Some Shale) (Fair Bleed) (Some Water)	688.00'
9	688	15:00	2		
10	689	16:00	1	Oil Sand (Some Shale) (Good Bleed) (Some Water)	689.45'
11	690	17:30	1.5	Lime	690.00'
				Oil Sand (Good Bleed) (Some Water)	690.50'
12	691	19:30	2	Lime	691.00'
				Sandy Shale (Oil Sand Streak)	698.00'
13	692	22:00	2.5		
14	693	25:30	3.5		
15	694	29:30	4		
16	695	33:00	3.5		
17	696	36:30	3.5		
18	697	39:30	3		
19	698	43:30	4		
20	699	47:00	3.5	Shale	



**Avery Lumber**  
 P.O. BOX 66  
 MOUND CITY, KS 66056  
 {913} 795-2210 FAX {913} 795-2194

*Copy*

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:	06/14/12
		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> C/O BOB EBERHART 30805 COLDWATER RD LOUISBURG, KS 66053		Ship To: <b>BOBCAT OILFIELD SRVC, INC</b> (913) 837-2823  (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

*Copy 2-12 6/14*

*Direct Delivery*

*913-837-4155*

# INVOICE

<b>X</b>	FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER		Sales total	\$3878.15		
	SHIP VIA MIAMI COUNTY					Freight	100.00	Misc + Frgt	100.00
	RECEIVED COMPLETE AND IN GOOD CONDITION					Taxable	3978.15	Sales tax	300.35
						Non-taxable	0.00		
						Tax #			
<b>TOTAL</b>							<b>\$4278.50</b>		

1 - Merchant Copy

