



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: _____



1094662

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

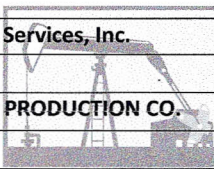
TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

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: 37' of 6"	Cemented: 6 sacks	Hole Size: 8 3/4
Longstring 716' 2 7/8 8 rnd	Cemented: 86 sacks	Hole Size: 5 5/8



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

Well #: 5-12
Location: SE-SE-SW-SE S24 T16 R21E
County: Miami
FSL: 165 162
FEL: 1320 1311
API#: 15-121-29150-00-00
Started: 7/12/12
Completed: 7/13/12

SN: 686'	Packer:	TD: 719'
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	Top Soil	3	702	Oil Sand (Some Shale) (Fair Bleed)
32	34	Clay	4	706	Sandy Shaley (Oil Sand Streak) (Poor Bleed)
23	57	Lime	4	710	Sandy Shale
5	62	Black Shale	TD	719	Shale
13	75	Lime			
9	84	Shale (Limey)			
17	101	Lime			
23	124	Shale			
15	139	Lime			
3	142	Shale			
15	157	Sandy Shale (Started taking			
17	174	Sand (Dry) Fluid)			
58	232	Shale			
20	252	Lime			
29	281	Shale			
6	287	Lime			
22	309	Shale			
10	319	Sand (Dry)			
13	332	Lime			
16	348	Shale			
25	373	Lime			
10	383	Shale			
21	404	Lime			
4	408	Shale			
12	422	Lime			
159	581	Shale			
8	589	Lime (Sealed Off)			Surface 7-12-12 Set Time 12:30pm Called 10:30am Judy
28	617	Shale			Longstring 716' 2 7/8 8 rnd 7-12-12 TD 719'
6	623	Lime			Set Time 2:15pm Called 1:15pm Judy
2	625	Oil Sand (Very Shaley) (Poor Bleed) (Flowing)			
15	640	Shale			
3	643	Lime			
20	663	Shale (Limey)			
6	669	Lime (Shaley)			
15	684	Shale (Limey)			
3	687	Sandy Shale (Oil Sand Streak)			
1	686	Oil Sand (Some Shale) (Poor Bleed)			
1.5	689.5	Oil Sand (Some Shale) (Fair Bleed)			
1.5	691	Sandy Shale (Oil Sand Streak) (Fractured) (Limey)			
5.5	696.5	Oil Sand (Very Shaley) (Poor Bleed)			
2.5	699	Oil Sand (Shaley) (Fair Bleed)			



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Well #: 5-12 <i>W W E</i>
Location: SE -SE-SW-SE S24 T16 R21E
County: Miami
FSL: 165 <i>162</i>
FEL: 1320 <i>1311</i>
API#: 15-121-29150-00-00
Started: 7/12/12
Completed: 7/13/12

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	688	0:00	0	Oil Sand (Some Shale) (Fair Bleed)	689.7'
1	689	1:30	1.5		
2	690	3:30	2	Sandy Shale (Oil Sand Streak) (Limey) (Fractured)	
3	691	5:30	2	--6am	
4	692	11:00	5.5		
5	693	19:00	8		
6	694			--Wedged	
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Avery Lumber

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

Customer Copy

Copy

INVOICE

PLEASE REFER TO INVOICE NUMBER
 ON ALL CORRESPONDENCE

Page: 1		Invoice: 10042058	
Special :		Time:	09:17:02
Instructions :		Ship Date:	07/05/12
		Invoice Date:	07/06/12
Sale rep #:	MAVERY MIKE	Accl rap code:	
		Due Date:	08/05/12
Sold To: BOBCAT OILFIELD SRVC, INC		Ship To: BOBCAT OILFIELD SRVC, INC	
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
350.00	350.00	L	BAG	CPPC	PORTLAND CEMENT	8.8900 BAG	8.8900	3111.50
160.00	160.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.7900 BAG	5.7900	926.40
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

Copy 5/12 7/12

DIRECT DELIVERY

913-837-4159

INVOICE

FILLED BY		CHECKED BY	DATE SHIPPED	DRIVER	Sales total		\$4275.90	
SHIP VIA		MIAMI COUNTY			Freight	100.00	Misc + Frgt	100.00
RECEIVED COMPLETE AND IN GOOD CONDITION					Taxable	4375.90	Sales tax	330.38
X					Non-taxable	0.00		
					Tax #			

TOTAL \$4706.28

2 - Customer Copy

