



KANSAS CORPORATION COMMISSION 1094797
OIL & GAS CONSERVATION DIVISION

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 # _____

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: _____



1094797

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:
700' 2 7/8	85 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 #: 12-12
Location: NE-SW-NW-SE S24 T16 R21E
County: Miami
FSL: 1760 1746
FEL: 2200-2219
API#: 15-121-29159-00-00
Started: 6/22/12
Completed: 6/23/12

SN: 668'	Packer:	TD: 719'
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	Top Soil	3	571	Lime
5	7	Clay	21	597	Shale
19	26	Lime	4	601	Lime
1	27	Clay	3	604	Oil Sand (Shaley) (Poor Bleed)
2	29	Lime	16	620	Shale
4	33	Black Shale	3	623	Lime
12	45	Lime	14	637	Shale (Limey)
8	53	Shale (Limey)	3	640	Lime
18	71	Lime	9	649	Shale (Limey)
6	77	Shale	2	651	Lime
3	80	Red Bed	5	656	Shale (Limey)
16	96	Shale	2	658	Lime
16	112	Lime	6	664	Shale
19	131	Sandy Shale	1	665	Lime
7	138	Sand (Dry)	6	671	Shale
63	201	Shale	1.5	672.5	Oil Sand (Limey) (Poor Bleed)
21	222	Lime	6	678.5	Oil Sand (Some Shale) (Fair Bleed) (Some Water)
8	230	Shale	1.5	680	Oil Sand (Some Shale (Poor Bleed) (Some Water)
5	235	Sand (Dry)	.5	680.5	Oil Sand (Shaley) (Fair Bleed) (Some Water)
20	255	Shale	.5	681	Sandy Shale
5	260	Lime	2	683	Oil Sand (Very shaley) (Fair Bleed) (Some Water)
21	281	Shale	5	688	Sandy Shale
8	289	Sand (Dry)	TD	719	Shale
2	291	Shale			
9	300	Lime			
4	304	Shale			
1	305	Lime			Surface 6-22-12 Set Time 1:00pm Called 12:00pm Alan
17	322	Shale			Longstring 700' 2 7/8 pipe TD 719
23	345	Lime			Set Time 12:00pm 6-25-12 Called 10:30am Becky
9	354	Black Shale			
4	358	Shale (Limey)			
19	377	Lime			
4	381	Black Shale			
12	393	Lime			
106	499	Shale			
5	504	Sandy shale (Oil sand Streak)			
35	539	Shale			
5	544	Lime			
15	559	Shale			
6	656	Lime			
8	573	Shale			



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County: Miami
FSL: 4760 1746
FEL: 2200 2219
API#: 15-121-29157-00-00
Started: 6/22/12
Completed: 6/25/12

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	673	0:00	0	Oil Sand (Some Shale) (Fair Bleed) (Some Water)	678.6'
1	674	1:30	1.5		
2	675	3:00	1.5		
3	676	4:30	1.5		
4	677	6:30	2		
5	678	8:00	1.5		
6	679	9:00	1	Oil Sand (Some Shale) (Poor Bleed) (Some Water)	679.8'
7	680	11:00	2	Oil Sand (Shaley) (Fair Bleed) (Some Water)	680.6'
8	681	13:30	2.5	Sandy Shale	681.2'
9	682	15:30	2	Oil Sand (Very Shaley) (Fair Bleed) (Some Water)	683.0'
10	683	18:00	2.5	Sandy Shale	688.0'
11	684	21:30	3.5		
12	685	25:30	4		
13	686	29:30	4		
14	687	33:30	4		
15	688	37:30	4		
16	689	41:30	4	Shale	
17	690	45:30	4		
18	691	49:30	4		
19	692	53:00	3.5		
20					

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: 10041829	
Special :		Time:	09:37:22
Instructions :		Ship Date:	06/22/12
		Invoice Date:	06/28/12
Sale rep #: MAVERY MIKE	Acct rep code:	Due Date:	08/05/12
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
245.00	245.00	L	BAG	CPPC	PORTLAND CEMENT	8.8900 BAG	8.8900	2178.05
280.00	280.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.7900 BAG	5.7900	1621.20
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

Coyot
12-12
6/23

913-837-4159

INVOICE

FILLED BY _____ SHIP VIA MIAMI COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION X	CHECKED BY _____	DATE SHIPPED _____	DRIVER _____		Sales total \$4037.25	
					Freight 100.00	Misc + Frgt 100.00
					Taxable 4137.25	Sales tax 312.36
				Non-taxable 0.00		
				Tax # _____		

TOTAL \$4449.61

1 - Merchant Copy

