



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: _____



1094843

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 Bbbs.	Gas Mcf	Water Bbbs.	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> <i>(Submit ACO-4)</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	86 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 #: 19-12
Location: NE-NE-SE-SW S24 T16 R21E
County: Miami
FSL: 1320 1325
FEL: 2640 2648
API#: 15-121-29164-00-00
Started: 6/12/12
Completed: 6/13/12

SN: 679'	Packer:	TD: 719'
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	Top Soil	13	627	Shale
7	9	Clay	4	631	Lime
25	34	Lime	7	638	Black Shale
5	39	Black Shale	17	655	Shale (Limey)
11	50	Lime	5	660	Lime
9	59	Shale (Limey)	5	665	Shale
18	77	Lime	1	666	Lime
9	86	Shale	6	672	Shale
3	89	Red Bed	1	673	Lime
15	104	Shale	6	679	Shale
14	118	Lime	2	681	Light Sandy Shale (Oil Sand Streak) (Fair Bleed)
8	126	Shale	2.5	683.5	Oil Sand (Some Shale) (Good Bleed)
6	132	Sand (Dry)	2.5	686	Oil Sand (Some Shale) (Fair Bleed)
7	139	Shale	.5	686.5	Shale (Oil Sand Streak)
10	149	Sand (Dry)	1	687.5	Oil Sand (Very Shaley) (Fair Bleed)
61	210	Shale	2.5	690	Oil Sand (Some Shale) (Good Bleed)
19	229	Lime	8	698	Sandy Shale (Oil Sand Streak)
10	239	Shale	TD	719	Shale
9	248	Sand (Dry)			
17	265	Shale			
5	270	Lime			
2	272	Black Shale			
18	290	Shale			
5	295	Sand (Dry)			
2	297	Shale			
14	311	Lime			
17	328	Shale			Surface 6-12-12 Set Time 11:30am Called 10:15am Becky
8	336	Lime			Longstring 709' 2 7/8 pipe TD 719
3	339	Shale			Set Time 12:30pm 6-13-12 Called 11:15am Judy
18	357	Lime			
5	362	Black Shale			
21	383	Lime			
3	386	Black Shale			
12	398	Lime			
160	558	Shale			
1	559	Lime			
7	566	Shale			
8	574	Lime			
31	605	Shale			
5	610	Lime			
4	614	Oil Sand (Very Shaley) (Poor Bleed)			



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 Box 266, Mound City, Ks 66056
 Cell # 620-363-2683
 Office # 913-795-2991

Well #: 19-12
Location: ^{3 SN} NE-NE-SE-SW S24 T16 R21E
County: Miami
FSL: 1320
FEL: 2640
API#: 15-121-29164-00-00
Started: 6/12/12
Completed: 6/13/12

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	680	0:00	0	Light Sandy Shale (Oil Sand Streak) (Fair Bleed)	680.75'
1	681	2:00	2	Oil Sand (Some Shale) (Good Bleed)	683.50'
2	682	3:30	1.5		
3	683	5:00	1.5		
4	684	6:30	1.5	Oil Sand (Some Shale) (Fair Bleed)	685.75'
5	685	8:00	1.5		
6	686	10:00	2	Shale (Oil Sand Streak)	686.30'
7	687	12:00	2	Oil Sand (Very Shaley) (Fair Bleed)	687.30'
8	688	13:30	1.5	Oil Sand (Some Shale) (Good Bleed)	690.00'
9	689	15:30	2		
10	690	18:00	2.5		
11	691	22:30	4.5	Sandy Shale (Oil Sand Streak)	
12	692	26:00	3.5		
13	693	29:30	3.5		
14	694	33:00	3.5		
15	695	37:00	4		
16	696	41:00	4		
17	697	45:00	4		
18	698	49:00	4		
19	699	53:00	4		
20					

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

Customer Copy

INVOICE

THIS COPY MUST REMAIN AT
MERCHANT AT ALL TIMES!

Page: 1

Invoice: **10041361**

Special :
Instructions :

Time: 13:14:46
Ship Date: 06/05/12
Invoice Date: 06/08/12
Dua Date: 07/05/12

Sale rep #: **MAVERY MIKE**

Accl rep code:

REPRINT

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: BOB

poplmg01

5TH
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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 13-12 6/5
 14-12 6/6
 15-12 6/7
 Coyot 17-12 6/8
 18-12 6/11
 19-12 6/13*

913-837-4153

Faxed originally 6-8-12

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 - Customer Copy

