



KANSAS CORPORATION COMMISSION 1100158
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: _____



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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Lease:	Orest Jones	
Owner:	Bobcat Oilfield Services, Inc.	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface: 20' of 6"	Cemented: 5 sacks	Hole Size: 8 3/4
Longstring 447' 2 7/8 8 Rnd	Cemented: 61 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 #: 2W-12
Location: NE-SW-NW-NE S21T17R25E
County: Miami
FSL: 4425
FEL: 2095
API#: 15-121-29270-00-00
Started: 10/29/12
Completed: 10/30/12

SN: None	Packer:	TD: 460'
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	Top Soil			
6	7	Clay			
34	41	Lime			
51	92	Shale			
9	101	Lime			
7	108	Shale			
13	121	Sandy Shale			
1	122	Coal			
21	143	Shale			
2	145	Lime			
4	149	Black Shale			
22	171	Shale			
10	181	Sandy Shale			
8	189	Shale			
8	197	Lime			
16	213	Shale			
31	244	Lime			
7	251	Black Shale			
20	271	Lime			
4	275	Black Shale			
15	290	Lime			
2	292	Black Shale			
98	390	Shale			
10	400	Sandy Shale			
22	422	Shale			
2	424	Black Shale			
2	426	Light Shale			Surface 10/29/12 Set Time 4:30pm Called 2:45am Brooke
2	428	Oil Sand (Fair Bleed)			Longstring 457' 2 7/8 8 Rnd TD 460'
1	429	Oil Sand (Water & Some Oil)			Set Time 3:30pm Called 2:10pm 10/3/12 Brooke
.5	429.5	Lime			
1	430.5	Oil Sand (Water & Some Oil)			
1	431.5	Sandy Shale / Oil Sand Streaks (Fair Bleed)			
1	432.5	Oil Sand / Oil Tucker (Fair Bleed)			
2	434.5	Lime (Sandy) (No Oil)			
1.5	436	Lime (Fractured)			
2.5	438.5	Oil Sand (Oil & Water) (Fair Bleed)			
2.5	441	Dry Sand			
17	458	Shale			
TD	460	Sand (Dry) (Shaley)			



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

Well #: 2W-12
Location: NE-SW-NW-NE S21 T17 R25E
County: Miami
FSL: 4425 4378
FEL: 2095 2065
API#: 15-121-29270-00-00
Started: 10/29/12
Completed: 10/30/12

Core Run #1

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

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	427	0:00	0	Oil Sand (Fair Bleed)	428'
1	428	0:50	.5		
2	429	1:50	1	Oil Sand (Water & Some Oil)	429'
3	430	3:00	1.50	Lime	429.6'
4	431	4:00	1	Oil Sand (Water & Some Oil)	430.6'
5	432	5:00	1	Sandy Shale (Oiln Sand Streak) (Fair Bleed)	431.6'
6	433	6:00	1	Oil Sand (Oil & Water) (Fair Bleed)	432.6'
7	434	8:50	2.5	Lime (Sandy) (No Oil)	434.6'
8	435	12:50	4	Lime (Fractured)	436'
9	436	16:00	3.5		
10	437	18:00	2	Oil Sand (Oil & Water) (Fair Bleed)	438.6'
11	438	20:00	2		
12	439	22:00	2	Dry Sand	
13	440	24:00	2		
14	441	27:00	3		
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

INVOICE

PLEASE REFER TO INVOICE NUMBER
ON ALL CORRESPONDENCE

Page: 1

Invoice: **10045141**

Special :
Instructions :

Time: 17:41:07

Ship Date: 10/29/12

Invoice Date: 10/29/12

Due Date: 12/05/12

Sale rep #: MAVERY MIKE

Acct rep code:

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:

popimg01

5TH
T 27

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
315.00	315.00	L	BAG	CPPC	PORTLAND CEMENT	8.8900 BAG	8.8900	2800.35
200.00	200.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.7900 BAG	5.7900	1158.00
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

*Jones
2W-12*

*Phone order by Bob
Direct Delivery*

INVOICE

913-837-4184

FILLED BY		CHECKED BY	DATE SHIPPED	DRIVER	Sales total		\$4196.35	
SHIP VIA		MIAMI COUNTY			Freight	100.00	Misc + Frgt	100.00
X		RECEIVED COMPLETE AND IN GOOD CONDITION			Taxable	4296.35	Sales tax	324.37
					Non-taxable	0.00		
					Tax #			

TOTAL \$4620.72

2 - Customer Copy

