



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1100181

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      Date Reached TD      Completion Date or  
Recompletion Date           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: \_\_\_\_\_

1100181

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  <div style="display: flex; justify-content: space-between;"> <span>Name</span> <span>Top</span> <span>Datum</span> </div>
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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 (Amount and Kind of Material Used)	Depth

TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR.			Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <i>(Submit ACO-5)</i> <input type="checkbox"/> Commingled <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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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 495' 2 7/8 8 Rnd	Cemented: 60 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 #: 6WA-12
Location: NE-NE-SW-NE S21T17R25E
County: Miami
FSL: 3795 3789
FEL: 1455 1425
API#: 15-121-29341-00-00
Started: 10/31/12
Completed: 11/1/12

SN: NONE	Packer:	TD: 500'
Plugged:	Bottom Plug:	

## Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	Top Soil	.5	470	Lime
7	8	Clay	5	475	Sandy Shale
35	43	Lime	15	490	Shale
3	46	Shale	8	498	Lime
1	47	Lime	TD	500	Shale
47	94	Shale			
10	104	Lime			
6	110	Shale			
10	120	Sandy Shale			
1	121	Coal			
24	145	Shale			
3	148	Lime			
4	152	Black Shale			
17	169	Shale			
12	181	Sandy Shale			
7	188	Shale			
8	196	Lime			
16	212	Shale			
33	245	Lime			
7	252	Black Shale			
18	270	Lime			
4	274	Black Shale			
17	291	Lime			
2	293	Black Shale			
100	393	Shale			
7	400	Sandy Shale			
27	427	Shale			Surface 10/31/12 Set Time 3:00pm Called 1:00pm Tayler
2	429	Black Shale			Longstring 495' 2 7/8" 8 Rnd TD 500'
3	432	Light Shale			Set Time 4:00pm Called 3:10pm 11/1/12 Brooke
1	433	Oil Sand (Shaley) (Some Water) (Fair Bleed)			
1.5	434.5	Oil Sand ("Water" & Some Oil) (Poor Bleed)			
2	436.5	Lime			
4	440.5	Oil Sand (Water) (Very Little Oil)			
1	441.5	Sandy Shale			
2.5	444	Oil Sand (Poor Bleed) (Oil & Water)			
2.5	446.5	Sand (Dry)			
15	461.5	Shale			
2.5	464	Oil Sand (Fair Bleed) (Some Shale & Water)			
2	466	Oil Sand (Poor Bleed) (Some Shale)			
2	468	Oil Sand (Poor Bleed) (Some Small Lenses with Slightly Better Bleed)			
1.5	469.5	Oil Sand (Fair Bleed) (Some Shale)			



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

Core Run #1

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

Well #: 6AW-12
Location: NE-NE-SW-NE S21 T17 R25E
County: Miami
FSL: 3795 3789
FEL: 1455 1425
API#: 15-121-29341-00-00
Started: 10/31/12
Completed: 11/1/12

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	433	0:00	0	Oil Sand ("Water" & Some Oil) (Poor Bleed)	4434.5
1	434	2:00	2		
2	435	2:30	.5	Lime	436.5
3	436	5:30	3		
4	437	8:00	2.5	Oil Sand (Water) (Very Little Oil)	440.5
5	438	8:30	.5		
6	439	9:00	.5		
7	440	9:30	.5		
8	441	10:30	1	Sandy Shale	441.5
9	442	11:30	1	Oil Sand (Poor Bleed) (Oil & Water)	444
10	443	12:30	1		
11	444	13:30	1	Sand (Dry)	446.5
12	445	15:30	2		
13	446	17:00	1.5	Shale	
14	447	18:30	1.5		
15	448	20:00	1.5		
16	449	22:00	2		
17	450	23:30	1.5		
18	451	26:00	2.5		
19	452	27:30	1.5		
20	453	29:30	2		



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

Well #: 6AW-12 (2 <sup>nd</sup> Core)
Location: NE-NE-SW-NE S21 T17 R25E
County: Miami
FSL: 3795 3789
FEL: 1455 1425
API#: 15-121-29341-00-00
Started: 10/31/12
Completed: 11/1/12

Core Run #2

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	453	0:00	0	Shale	461.5
1	454	2:30	2.5		
2	455	6:00	3.5		
3	456	10:30	4.5		
4	457	13:00	2.5		
5	458	16:00	3		
6	459	18:00	2		
7	460	19:30	1.5		
8	461	22:00	2.5		
9	462	24:00	2	Oil Sand (Fair Bleed) (Some Shale & Water)	464
10	463	25:00	1		
11	464	26:00	1		
				Oil Sand (Poor Bleed) (Some Shale)	466
12	465	27:00	1		
13	466	28:00	1		
				Oil Sand (Poor Bleed) (Some Small (Lenses) With Slightly Better Bleed)	468
14	467	28:30	.5		
15	468	29:30	1		
				Oil Sand (Fair Bleed) (Some Shale)	469.5
16	469	30:00	.5		
17	470	31:30	1.5	Lime	470
				Sandy Shale	
18	471	33:00	1.5		
19	472	34:30	1.5		
20	473	36:30	2		

**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 :  
Sale rep #: **MAVERY MIKE** Acct rep code:  
Time: 17:41:07  
Ship Date: 10/29/12  
Invoice Date: 10/29/12  
Due Date: 12/05/12

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:

paping01

5TH  
Y 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  
BAW-12**Phone order by Bob  
Direct Delivery***INVOICE**  
913-837-4154

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

**TOTAL \$4620.72****2 - Customer Copy**