



KANSAS CORPORATION COMMISSION 1123577  
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      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: \_\_\_\_\_



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
---	---

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
-----------------------------------	-----------	---------	-------------	---------------	---------

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
---	--	--

Lease:	Burris	
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: 504' 2 7/8rd	Cemented: 60	Hole Size: 5 5/8

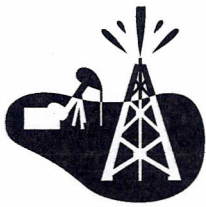
Dale Jackson Production Co.  
Box 266, Mound City, Ks 66056  
Cell # 620-363-2683  
Office # 913-795-2991

Well #: 1W-12
Location: SW SE SW SW S12 T17R24E
County: Miami
FSL: 60
FEL: 4370
API#: 15-121-29368-00-00
Started: 11-28-12
Completed: 11-29-12

SN: NONE	Packer:	TD: 510'
Plugged:	Bottom Plug:	

## Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	Top Soil	5	504	Shale
7	8	Clay	TD	510	Lime(Oil show)
31	39	Lime			
57	90	Shale			
11	101	Lime			
15	126	Shale			
5	131	Lime			
49	180	Shale			
8	188	Lime			
15	203	Shale			
28	231	Lime			
3	234	Black Shale			
4	238	Light Shale			
7	245	Shale(Limey)			
14	259	Lime			Surface 11-28-12
5	264	Black Shale			Set Time 12:00 PM
2	266	Lime			Called 11:05 AM Brooke
5	271	Shale			
5	276	Lime			
5	281	Shale(Limey)			Longstring 504' 2 7/8" 8rd TD 510'
3	284	Sandy Shale(oil sand stk)			Set Time 4:30 PM 11-29-12
14	298	Shale			Called 3:20 PM Brooke
23	321	Sand(dry)(taking fluid)			
100	421	Shale			
2	423	Black Shale			
31	454	Shale			
2	456	Shaley(Limey)			
2	458	Shale(oil sand stk)(oil show)			
3	461	Oil sand Shaley(Fair Bleed)			
3	464	Oil sand(water)(some oil)			
2.5	466.5	Oil sand limey(oil &water) Fair Bleed			
0.5	467	Lime			
1	468	Oil sand("water") (some oil) (Poor Bleed)			
2.5	470.5	Oil sand ( oil &water) (Fair Bleed)			
2	472.5	Oil sand (water)(some oil)(Poor Bleed)			
1.5	474	Oil sand (oil &water)(Fair Bleed)			
10	484	Shale			
4	488	Lime			
3	491	Shale			
7	498	Lime(Shaley)			
1	499	Coal			



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

Well #: 1W-12
Location: SW SE SW SW S12 T17 R24 E
County: Miami
FSL: 60
FEL: 4370
API#: 15-121-29368-00-00
Started: 11-28-12
Completed: 11-29-12

Lease :	Burris
Owner:	Bobcat oilfield Services Inc.
OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

# Core Run #1

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	460				
1	461		1	Oil sand (shaley) Fair Bleed	461
2	462		1		
3	463		1/2	Oil sand "water" & (some oil)	464
4	464		1		
5	465		1	Oil sand Limey (oil & water/ Fair Bleed)	466 1/2
6	466		1/2		
7	467		1 1/2	Lime	467
8	468		1/2	Oil sand ("water/some oil poor bleed)	468
9	469		1/2		
10	470		1/2	Oil sand (oil & water/ Fair Bleed)	470 1/2
11	471		1/2	Oil sand (water) (some oil/ Poor Bleed)	472 1/2
12	472		1/2		
13	473		1	Oil sand (oil & water/ Fair Bleed)	474
14	474		1/2		
15	475		2 1/2		
16	476		2 1/2		
17	477		2 1/2	Shale	
18	478		2 1/2		
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: <b>10045770</b>	
Special :		Time:	14:54:09
Instructions :		Ship Date:	11/28/12
		Invoice Date:	11/30/12
Sale rep #: MAVERY MIKE	Acct rep code:	Due Date:	01/05/13
Sold To: <b>BOBCAT OILFIELD SRVC,INC</b>	Ship To: <b>BOBCAT OILFIELD SRVC,INC</b>		
C/O BOB EBERHART	(913) 837-2823		
30805 COLDWATER RD			
LOUISBURG, KS 66053	(913) 837-2823		
Customer #: 3570021	Customer PO:	Order By: BOB	

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

NOTE

OK RE

DIRECT DELIVERY  
PHONE ORDER BY BOB

913-837-4159

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
				Sales tax	

**TOTAL \$4535.17**

2 - Customer Copy

