



KANSAS CORPORATION COMMISSION 1123583
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 <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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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: 508' 2 7/8 8rd Pipe	Cemented: 62	Hole Size: 5 5/8"

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



Well #: 4W-12
Location: SE SW SE SW S12 T17 R24E
County: Miami
FSL: 60
FEL: 3368
API#: 15-121-29371-00-00
Started: 12-03-12
Completed: 12-04-12

SN: NONE	Packer: NONE	TD: 515' Ft.
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	Top Soil	4	512	Shale
4	5	Clay	TD	515	Lime
42	47	Lime			
49	96	Shale			
9	105	Lime			
6	111	Shale			
11	122	Black Sand (Oil Show)			
15	137	Shale			
5	142	Lime			
49	191	Shale			
7	198	Lime			
15	213	Shale			
29	242	Lime			
6	248	Black Shale			
4	252	Shale (Limey)			Surface 12-03-12
19	271	Lime			Set Time 5:30 PM
4	275	Black Shale			Called 3:15 PM – Talked To Brooke
2	277	Lime			
6	283	Shale			Well TD 515' Ft.
5	288	Lime			Long string 508' 2 7/8" 8rd Pipe
3	291	Shale			Set Time 4:30 PM 12-04-12
4	295	Shale (Limey)			Called 3:30 PM – Talked To Brooke
3	298	Oil Sand (Very Shaley) (Fair Bleed)			
13	311	Shale			
5	316	Sandy Shale			
5	321	Shale			
15	336	Sandy Shale			
89	425	Shale			
1	426	Black Shale			
37	463	Shale			
1	464	Shale (Limey)			
6	470	Shale (Oil Sand Streak)			
1.5	471.5	Oil Sand (Shaley) (Fair Bleed)			
2	473.5	Oil Sand (Fair Bleed) (Black)			
1.5	475	Oil Sand (Water & Some Oil) (Poor Bleed)			
5.5	480.5	Oil Sand (Fair Bleed) (Black)			
1.5	482	Sand (Dy) (Limey)			
1	483	Sand (Dry)			
12	495	Shale			
2	497	Lime			
11	508	Shale (Limey)			



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

Well #: 4W-12
Location: SE SW SE SW S12 T17 R24 E
County: Miami
FSL: 60
FEL: 3368
API#: 15-121-29371-00-00
Started: 12-03-12
Completed: 12-04-12

Core Run #1

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

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	466	0:00	0	Sandy Shale (Some Oil Sand Streak)	466'
1	467	2:00	2		
2	468	3:30	1.5		
3	469	5:30	2		
4	470	7:30	2	Oil Sand Shaley (Fair bleed)	470'
5	471	9:00	1.5		471.5'
6	472	10:30	1.5	Oil Sand (Fair Bleed) (Black)	473.5'
7	473	1:30	1		
8	474	12:30	1	Oil Sand (Water & Some Oil) (Poor Bleed) (Black)	475'
9	475	13:30	1		
10	476	14:00	.5		
11	477	15:00	1	Oil Sand (Fair Bleed) (Black)	480.5'
12	478	16:00	1		
13	479	17:30	1.5		
14	480	18:30	1		
15	481	20:00	.5	Sand (Dry) (Limey)	482'
16	482	21:00	1		
17	483	22:30	.5		
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: **10045770**

Special :
Instructions :

Time: 14:54:09
Ship Date: 11/28/12
Invoice Date: 11/30/12
Due Date: 01/05/13

Sale rep #: MAVERY MIKE

Acct rep code:

Sold To: **BOBCAT OILFIELD SRVC, INC**

Ship To: **BOBCAT OILFIELD SRVC, INC**

C/O BOB EBERHART
30805 COLDWATER RD
LOUISBURG, KS 66053

(913) 837-2823

(913) 837-2823

Customer #: 3570021

Customer PO:

Order By: BOB

paping01

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

INVOICE

OK RE
Burnis
4W-12

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	318.37
				TOTAL	\$4535.17

2 - Customer Copy

