



KANSAS CORPORATION COMMISSION 1123591
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: _____



1123591

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

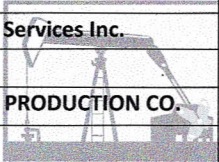
TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Lease:	Burris	
Owner:	Bobcat Oilfield Services Inc.	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface:	Cemented:	Hole Size:
20' of 6"	5 Sacks	8 3/4'
Longstring:	Cemented:	Hole Size:
487'Ft. Of 2 7/8 8rd	60 Sacks	5 5/8'



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



Well #: 9W-12
Location: NW NE SW SW S12 T17R24E
County: Miami
FSL: 1310
FEL: 4525
API#: 15-121-29376-00-00
Started: 12-13-12
Completed: 12-17-12

SN: NONE	Packer: NONE	TD: 490'FT
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	Top Soil	TD	490	Lime (Odor)
6	7	Clay			
24	31	Lime			
49	80	Shale			
11	91	Lime			
5	96	Shale			
11	107	Sand (Dry)			
13	120	Shale			
5	125	Lime			
21	146	Shale			
10	156	Shale (Oil Sand Streaks)			
3	159	Shale			
1	160	Oil Sand (Shaley) (Fair Bleed)			
10	170	Shale			
9	179	Lime			Surface 12-13-12
14	193	Shale			Set Time 5:00 PM
29	222	Lime			Called In 3:00 PM – Talked To Brooke
6	228	Black Shale			
21	249	Lime			Well TD – 490' Ft.
4	253	Black Shale			Long string 487'Ft. Of 2 7/8" 8rd Pipe
1	254	Lime			Set Time 3:00 PM – On 12-17-12
6	260	Shale			Called In 1:45 PM – Talked To Brooke
6	266	Lime			
4	270	Shale			
2	272	Shale (Limey)			
4	276	Sandy Shale (Odor)			
17	293	Shale			
19	312	Sand (Dry)			
62	374	Shale			
11	385	Sandy Shale (Odor)			
23	408	Shale			
1	409	Black Shale			
28	437	Shale			
11.5	448.5	Oil Sand (Some Shale) (Water) (Very Little Oil)			
2.5	451	Oil Sand (Some Shale) (Fair Bleed) (Slight Show Of Water)			
1.5	452.5	Oil Sand (Some Shale) (Fair Bleed) (Oil & Slight Show Of Water) (Fractured)			
3.5	456	Oil Sand (Oil & Water) (Some Shale) (Fair Bleed)			
1	457	Sandy Shale (Oil Sand Streaks) (Poor Bleed)			
8	465	Shale			
8	473	Lime			
12	485	Shale (Limey)			



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 Cell # 620-363-2683
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Lease :	Burris
Owner:	Bobcat oilfield Services Inc.
OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

Core Run #1

Well #: 9W-12
Location: NW NE SW SW S12 T17 R24 E
County: Miami
FSL: 1310
FEL: 4525
API#: 15-121-29376-00-00
Started: 12-13-12
Completed: 12-17-12

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	439	0:00	0	Oil Sand ("Water") (Very Little Oil)	
1	440	1:00	1		
2	441	2:00	1		
3	442	3:30	1.5		
4	443	5:00	1.5		
5	444	6:00	1		
6	445	7:30	1.5		
7	446	9:00	1.5		
8	447	10:30	1.5		
9	448	12:00	1.5		
10	449	13:30	1.5	Oil Sand (Some Shale) (Fair Bleed) (Slight Show Of Water)	
11	450	14:30	1		
12	451	16:30	2	Oil Sand ((Some Shale) (Oil & Slight Shaow Of Water) (Fractured)	451'
13	452	18:00	1.5		
14	453	19:30	1.5		
15	454	21:00	2	Oil Sand (Oil & Water) (Some Shale) (Fair Bleed)	
16	455	22:30	1		
17	456	24:00	1.5		
18	457	25:30	1.5		
19	458	29:30	4	Sandy Sahal (Oil Sand Streaks) (Poor Bleed)	457'
				Shale	

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: **10046133**

Special :	Time: 13:37:55
Instructions :	Ship Date: 12/17/12
	Invoice Date: 12/17/12
Sale rep #: MAVERY MIKE	Due Date: 01/05/13
Acct rep code:	

Sold To: BOBCAT OILFIELD SRVC, INC	Ship To: BOBCAT OILFIELD SRVC, INC
C/O BOB EBERHART	(913) 837-2823
30805 COLDWATER RD	
LOUISBURG, KS 66053	(913) 837-2823

Customer #: 3570021 Customer PO: Order By:

popimg01

6YH
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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

*Burnis
9W-12*

*Phone order by Bob
Direct Delivery*

INVOICE

913-837-4159

FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ SHIP VIA MIAMI COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION X									
	Freight	100.00	Sales total		\$4116.80				
	Taxable	4216.80	Misc + Frgt		100.00				
	Non-taxable	0.00	Sales tax		318.37				
Tax #									

TOTAL \$4535.17

2 - Customer Copy

