



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1173502  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
August 2013

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
- Plug Back       Conv. to GSW       Conv. to Producer
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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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

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx)      (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical 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

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1173502

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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

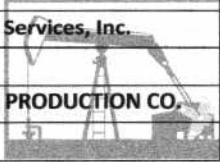
TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

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

<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. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Lease:	Boyscout	
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:	Plugged	Hole Size: 5 5/8"



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

Well #: K4-13
Location: NW, NW, NE, NW: S14-T17-R21E
County: MIAMI
FSL: 5115' FT.
FEL: 3703' FT.
API#: 15-121-29708-00-00
Started: 12-05-2013
Completed: 12-10-2013

SN: NONE	Packer: NONE
Plugged: 60 Sacks Cement	Bottom Plug: 761' To 670'

TD: 761' FT.
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## Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	TOP SOIL & LOOSE ROCK	3	557	LIME
25	26	LIME	16	573	SHALE
5	31	SHALE	4	577	LIME
10	41	SAND (DRY)	6	583	SHALE
70	111	SHALE	4	587	LIME (ODOR)
19	130	LIME	6.5	593.5	SHALE
5	135	SHALE	4.5	598	OIL SAND (SHALEY) (GOOD BLEED)
15	150	SAND (DRY)	1	599	SHALE (OIL SAND STREAK)
9	159	SHALE	67	666	SHALE
4	163	LIME	5	671	SANDY SHALE (SLIGHT OIL SHOW)
21	184	SHALE	11	682	SHALE
2	186	RED BED	2	684	COAL
14	200	SHALE	13	697	SHALE
17	217	LIME	12	709	SANDY SHALE (ODOR)
12	229	SHALE	45	754	SHALE
29	258	LIME	TD	761	BLACK SHALE
3	261	SHALE			
3	264	BLACK SHALE			
23	287	LIME			
3	290	BLACK SHALE			
16	306	LIME			
1	307	BLACK SHALE			
19	326	SHALE			
5	331	SAND (DRY)			
72	403	SHALE			
6	409	SAND (SHALEY) (DRY)			
17	426	SHALE			
1	427	COAL			
9	436	SHALE			
2	438	RED BED			
6	444	SHALE			SET SURFACE PIPE - 12:30 PM - 12/5/2013
3	447	SANDY SHALE			CALLED IN 10:15 AM - TALKED TO BROOKE
2	449	SAND (LIMEY) (DRY)			WELL TD 761' FT.
1	450	OIL SAND (VERY SHALEY) (FAIR BLEED)			SET PLUG AT 761' FT. TO 670' FT.
5	455	OIL SAND (SOME SHALE) (FAIR BLEED)			610' FT. TO 580' FT.
1	456	OIL SAND (SHALEY) (FAIR BLEED)			460' FT. TO 430' FT.
4	460	SHALE			350' FT. TO SURFACE
15	475	LIME			PLUG TIME - 11:30 AM - 12/10/2013
38	513	SHALE			CALLED IN 10:30 AM - TALKED TO MICHELLE
8	521	LIME			
13	534	SHALE			
2	536	LIME			
18	554	SHALE			



1/2 Mile North of Louisburg  
27295 Metcalf Rd.  
P.O. Box 729  
Louisburg, Kansas 66053  
913-837-2955 • 1-800-521-1764

# MOSSMAN LUMBER & COMPANY

*True Value.*

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCE	TERMS	CLERK	DATE	TIME
251		27143	PO # 27199 ORDER # 7701	NET 10%	BR	12/4/13	8:06

S O L D	BOBCAT OIL	S H I P T O	30850 S PLEASANT VALLEY ROAD	DEL. DATE: 11/27/13	TERMS: 11351	BOOK 170853
	30805 COLDWATER ROAD		1/2M WEST SOUTH SIDE			
T O	LOUISBURG, KS 66053			CLERK: PP ROBERT RAYD		* INVOICE *
				TAX : 001 LOUISBURG, KS		ORDER 77016

QUANTITY		UM	SKU	DESCRIPTION	UNITS	PRICE/PER	EXTENSION
SHIPPED	ORDERED						
		EA	PORTLAND	808 SX FLY PEN	240	3.20 /EA	1,248.00
		EA	PORTLAND	240 PORTLAND CEMENT 1/11	240	9.00 /EA	2,160.00
		EA	PALLET	RETURNABLE PALLET	14	15.00 /EA	210.00
		EA	WRAP	PURINNY WRAPPED PALLET	14	5.00 /EA	70.00
		EA	FUEL	FUEL SURCHARGE	1	48.55 /EA	48.55
				TOMY 913-258-0074			

*Boyscout  
K4-13*

** AMOUNT CHARGED TO STORE ACCOUNT **				4,461.14	TAXABLE	4096.55
					NON-TAXABLE	0.00
					SUBTOTAL	4096.55
RECEIVED BY					TAX AMOUNT	364.59
					TOTAL AMOUNT	4461.14