

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

File 12/20/09

OPERATOR: License # 3895
Name: Bobcat Oilfield Services, Inc.
Address 1: 30805 Coldwater Rd.
Address 2: _____
City: Louisburg State: KS Zip: 66053 + _____
Contact Person: Bob Eberhart
Phone: (913) 837 - 2823
CONTRACTOR: License # 4339
Name: Jackson, Dale E. & Sue Ellen dba Dale E. Jackson Production Co.
Wellsite Geologist: _____

Purchaser: High Sierra Crude Oil & Marketing, LLC
Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
 Oil _____ SWD _____ SIOW _____
_____ Gas _____ ENHR _____ SIGW _____
_____ CM (Coal Bed Methane) _____ Temp. Abd. _____
_____ Dry _____ Other _____
(Core, WSW, Expl., Cathodic, 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: _____ Plug Back Total Depth _____
_____ Commingled _____ Docket No.: _____
_____ Dual Completion _____ Docket No.: _____
_____ Other (SWD or Enhr.?) _____ Docket No.: _____
7/10/2009 7/13/2009 11/13/2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-107-24071-00-00
Spot Description: NE/4
NE NW NW NE Sec. 8 Twp. 20 S. R. 23 East West
506.7 Feet from North / South Line of Section
215.7 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Linn

Lease Name: Snyder Well #: O-14
Field Name: LaCygne-Cadmus
Producing Formation: Peru
Elevation: Ground: 909 Kelly Bushing: N/A
Total Depth: 321 Plug Back Total Depth: 2
Amount of Surface Pipe Set and Cemented at: 20.5 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 20.5
feet depth to: surface w/ 5 sx cmt.

Drilling Fluid Management Plan AH I NUR 12-21-09
(Data must be collected from the Reserve Pit)
Chloride content: 1500-3000 ppm Fluid volume: 80 bbls
Dewatering method used: on lease
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: *Don Duckell*
Title: Agent Date: 11-20-09
Subscribed and sworn to before me this 20th day of November,
20 09.
Notary Public: *Lane Town*
Date Commission Expires: 5-8-2012



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution

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Operator Name: Bobcat Oilfield Services, Inc. Lease Name: Snyder Well #: O-14
 Sec. 8 Twp. 20 S. R. 23 East West County: Linn

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: GAMMA RAY/NEUTRON/CCL	<input checked="" 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
Surface	8 3/4"	6 1/4"		20.5'	Portland	5	
Completion	5 5/8"	2 7/8"		319	Portland	50	50/50 POZ

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				

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
2	284.0 - 294.0	41 Perfs	284.0 - 294.0	Acid Fracture	

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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

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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Lease:	SNYDER	
Owner:	BOBCAT OILFIELD SERVICES, INC.	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface: 20FT, 6IN	Cemented: 5 SACKS	Hole Size: 8 3/4
Longstring 319 2 7/8	Cemented: 50 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 #:	T-27
Location:	NW-NW-NE, S:8, T:20, S.R.:23, E
County:	LINN
FSL:	506 7
FEL:	21 S 7
API#:	15-107-24071-00-00
Started:	7/10/09
Completed:	7/13/09
TD:	321

SN:	271	Packer:	
Plugged:		Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	TOP SOIL			
2	3	RED CLAY			
21	24	LIME			
4	28	SHALE			
3	31	BLACK SHALE			
21	52	LIME			
4	56	SHALE			
2	58	BLACK SHALE			
2	60	LIME			
6	66	SHALE			
5	71	LIME			
1	72	BLACK SHALE			
41	113	SHALE			
7	120	SAND (DRY)			
9	129	SANDY SHALE			
98	231	SHALE			
5	236	LIME			
24	260	SHALE			
10	270	LIME			
1	271	SHALE			
1	272	OIL SAND (SHALEY) (POOR BLEED) (WATER)			
2	274	OIL SAND (SHALEY) (GOOD BLEED)			
2	276	OIL SAND (GOOD BLEED)			
2	278	OIL SAND (POOR BLEED)			
2	280	OIL SAND (FAIR BLEED)			
1	281	OIL SAND (SHALEY) (FAIR BLEED)			
19.5	300.5	OIL SAND (SEE CORE)			
17.5	318	SHALE			
2	320	COAL			
TD	321	SHALE			

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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: 10009309	
Special :		Time:	18:25:04
Instructions :		Ship Date:	05/18/09
		Invoice Date:	05/20/09
Sale rep #:	MAVERY MIKE	Acct rep code:	
		Due Date:	06/05/09
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: BOB EBERHEART	

REPRINT

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
210.00	210.00	L	BAG	CPPC	PORTLAND CEMENT	7.9900 BAG	7.9900	1677.90
320.00	320.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.1900 BAG	5.1900	1660.80
4.00	4.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	68.00
					SHIPPED 14 PALLETS WITH LOAD RETURNED 10 PALLETS FROM PREVIOUS LOAD ONLY CHARGED FOR 4 PALLETS			

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X	FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER		Sales total	\$3406.70	
	SHIP VIA LINN COUNTY							
	RECEIVED COMPLETE AND IN GOOD CONDITION							
					Taxable	3406.70		
					Non-taxable	0.00	Sales tax	
					Tax #.		180.56	

TOTAL \$3587.26

2 - Customer Copy