



KANSAS CORPORATION COMMISSION 1046720
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 # 3895
Name: Bobcat Oilfield Services, Inc.
Address 1: 30805 COLD WATER RD
Address 2: _____
City: LOUISBURG State: KS Zip: 66053 + 8108
Contact Person: Bob Eberhart
Phone: (913) 285-0873
CONTRACTOR: License # 33715
Name: Town Oilfield Service
Wellsite Geologist: N/A
Purchaser: High Sierra Crude Oil

API No. 15 - 15-121-28777-00-00
Spot Description: _____
NE SE SE NW Sec. 14 Twp. 17 S. R. 21 East West
3,140 Feet from North / South Line of Section
2,786 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Miami
Lease Name: Boyscout Well #: D1-10
Field Name: Paola-Rantoul
Producing Formation: 1st Squirrel
Elevation: Ground: 1022 Kelly Bushing: 0
Total Depth: 818 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 21 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 809
feet depth to: 0 w/ 115 sx cmt.

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.): _____

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 #: _____

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 #: _____
10/04/2010 10/05/2010 10/05/2010
Spud Date or Date Reached TD Completion Date or Recompletion Date

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: Deanna Garrison Date: 11/19/2010



1046720

Operator Name: Bobcat Oilfield Services, Inc. Lease Name: Boyscout Well #: D1-10
 Sec. 14 Twp. 17 S. R. 21 East West County: Miami

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 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, 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 <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>1st Squirrel</td> <td>647</td> <td>GL</td> </tr> <tr> <td>2nd Squirrel</td> <td>716</td> <td>GL</td> </tr> </table>	Name	Top	Datum	1st Squirrel	647	GL	2nd Squirrel	716	GL
Name	Top	Datum								
1st Squirrel	647	GL								
2nd Squirrel	716	GL								

CASING RECORD <input type="checkbox"/> New <input checked="" 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 casing	8.75	6.25	8	21	Portland	3	None
Production casing	5.625	2.875	6	809	Portland/Fly Ash	115	60/40 Poz mix/2% gel

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	647-652	Acid 250 gal. 7.5% HCL	
4	716-722	Acid 250 gal. 7.5% HCL	
	647-652 and 716-722	40 sacks sand	

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 <i>(Explain)</i> _____	
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 checked="" 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> _____	PRODUCTION INTERVAL: _____ _____
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Miami County, KS
 Well: Boyscout D1-10
 Lease Owner: Bobcat

Town Oilfield Service, Inc.
 (913) 837-8400

Commenced Spudding:
 10/4/2010

WELL LOG

Thickness of Strata	Formation	Total Depth
2	Soil	2
10	Clay	12
10	Shale	22
35	Lime	57
7	Shale	64
16	Lime	80
80	Shale	160
23	Lime	183
7	Sand	190
3	Shale	193
2	Lime	195
17	Shale	212
2	Lime	214
39	Shale	253
9	Lime	262
18	Shale	280
27	Lime	307-Winterset
9	Shale	316
21	Lime	337-Bethany Falls
5	Shale	342
2	Lime	344-KC
9	Shale	353
3	Lime	356-Hertha
4	Shale	360
1	Lime	361
136	Shale	497
4	Sand	501-Oil, Little Oil, 20% Oil
2	Sandy Lime	503
2	Lime	505
130	Shale/Shells	635
3	Lime	638
8	Sandy Shale	646
5	Sand	651-Good Bleed, Solid
2	Sand	653-Good, 50%+
7	Sandy Shale	660-No Show
56	Shale	716
6	Sandy Shale	722-Oil, 10-20% Sand, Little Bleed
28	Sandy Shale	750-No Show
6	Sandy Shale	756-Odor, No Bleed
57	Sandy Shale	813-No Show



TICKET NUMBER 27183
 LOCATION Ottawa KS
 FOREMAN Fred Mader

PO Box 884, Chanute, KS 66720
 620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT
 CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/5/10	1448	Bay Scout # D-110	NW 14	17	21	MI
CUSTOMER Bobcat Oilfield Serv.			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 30805 Coldwater Rd			506	Fred	Safety, Mktg.	
CITY STATE ZIP CODE Louisburg KS 66092			368	Ken	KH	
			510	Derek	DDM	

JOB TYPE Logstring HOLE SIZE 5 7/8 HOLE DEPTH 815' CASING SIZE & WEIGHT 2 3/8" 10 RD
 CASING DEPTH 809' DRILL PIPE Pin in TUBING @ 804' OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 2 1/2" Plug
 DISPLACEMENT 4.67 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish circulation. Mix + Pump 100# Premium Gel
Flush. Mix + Pump 113 SKS 60/40 PM Mix Cement 29 gal.
Cement to surface. Flush pump + lines & clean. Displace
2 1/2" Rubber plug to Pin in casing w/ 4.67 BBL Fresh water.
Pressure to 700# PSI. Shut in casing.

Fred Mader

Customer Supplied N2O

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925.00
5406	20 mi	MILEAGE Pump Truck on lease		NK
5402	809'	Casing footage		NK
5407	6 Minimum	Ton Miles		157.50
1131	113 SKS	60/40 PM Mix Cement		1252.50
1118B	298#	Premium Gel		579.60
4402	1	2 1/2" Rubber Plug		23.00
		WD# 237114		
			7.55%	SALES TAX 103.07
				ESTIMATED TOTAL 2550.33

Revin 3737

AUTHORIZATION _____ TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.