



KANSAS CORPORATION COMMISSION 1047848
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 # 4339
Name: Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co.
Wellsite Geologist: N/A
Purchaser: High Sierra Crude Oil

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 #: _____

<u>11/19/2010</u>	<u>11/22/2010</u>	<u>12/28/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-107-24290-00-00
Spot Description: _____
SW NE SE SE Sec. 5 Twp. 20 S. R. 23 East West
690 Feet from North / South Line of Section
343 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Linn
Lease Name: Harvey Well #: E-8
Field Name: LaCygne-Cadmus
Producing Formation: Peru
Elevation: Ground: 902 Kelly Bushing: 0
Total Depth: 342 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 338
feet depth to: 0 w/ 50 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: Deanna Garrison Date: 12/28/2010



1047848

Operator Name: Bobcat Oilfield Services, Inc. Lease Name: Harvey Well #: E-8
 Sec. 5 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 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 checked="" type="checkbox"/> Yes <input 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: none;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Peru</td> <td>276</td> <td>GL</td> </tr> </table>	Name	Top	Datum	Peru	276	GL
Name	Top	Datum					
Peru	276	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	20	Portland	5	
Production casing	5.625	2.875	6	338	Portland/Fly Ash	50	60/40 Poz Mix

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
4	275-284 & 285-282	Acid 500 gal 7.5% HCL	

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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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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: 10025897	
Special :		Time:	15:24:51
Instructions :		Ship Date:	11/10/10
		Invoice Date:	11/18/10
Rate rep #: MAVERY MIKE	Acct rep code:	Disc Date:	12/05/10
Sold To: BOBCAT OILFIELD SRVC,INC C/O BOB EBERHART 80805 COLDWATER RD LOUISBURG, KS 66063		Ship To: BOBCAT OILFIELD SRVC,INC (913) 837-2823	
Customer #: 3570021		Customer PO:	
		Order By: TERRY	

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	AR Price/Uom	PRICE	EXTENSION
280.00	280.00	L	BAG	CPPC	PORTLAND CEMENT	7.9900 BAG	7.9900	2237.20
240.00	240.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.1000 BAG	5.1000	1224.00
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

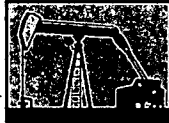
Direct Delivery
Harvey
ES
OKRE

INVOICE

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$3699.20
SHIP VIA LINN COUNTY				Taxable	3699.20
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-Taxable	0.00
X				Tax @	
				Sales tax	233.05
				TOTAL	\$3932.25

2 - Customer Copy





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



Core Run # 1

Lease :	HARVEY
Owner:	BOBCAT OILFIELD SERVICES, INC.
OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

Well #: F-8 SW/NE
Location: E2-SE, SE, S:5, T: 20, S.R.: 23, E
County: LINN
FSL-660- 690
FEL-330- 343
API#: 15-107-24290-00-00
Started: 11-19-10
Completed: 11-22-10

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	274		---		
1	275		3	SANDY SHALE OIL SAND STREAKS (POOR BLEED)	275.5
2	276		2		
3	277		1.5	OIL SAND (SHALEY) (GOOD BLEED)	279
4	278		1		
5	279		3		
6	280		2	OIL SAND (VERY SHALEY) (GOOD BLEED)	281.5
7	281		2.5		
8	282		2.5		
9	283		3	SANDY SHALE (SOME OIL SAND STREAKS) (POOR BLEED)	284.5
10	284		2.5		
11	285		2.5		
12	286		2.5	OIL SAND (VERY SHALEY) (GOOD BLEED)	286
13	287		2	OIL SAND (GOOD BLEED)	286.5
14	288		4	OIL SAND (VERY SHALEY) (GOOD BLEED)	288
15	289		2	SANDY SHALE POOR BLEED	288.5
16	290		2.5	OIL SAND SOME SHALE (GOOD BLEED)	290.5
17	291		3		
18	292		3	SANDY SHALE (OIL SAND STK)	293.5
19	293		4		
20	294		3.5		
				OIL SAND (VERY SHALEY) (POOR BLEED)	

Lease:	HARVEY	
Owner:	BOBCAT OILFIELD SERVICES, INC	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface:	Cemented:	HOLE SIZE:
20FT, 6IN	5 SACKS	8 3/4
Longstring 338 2 7/8 HYDRILL	Cemented: 50	Hole Size: 5 5/8

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

Well #: E-8 SW-NE
Location: E-SE, SE, S:5, T: 20, S.R.: 23, E
County: LINN
FSL-660- 690
FEL-330- 343
API#: 15-107-24290-00-00
Started: 11-19-10
Completed: 11-22-10

SN: NONE	Packer:	TD: 342
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	TOPSOIL			
19	20	LIME			
2	22	SHALE			
6	28	BLACKSHALE			
21	49	LIME			
4	53	BLACKSHALE			
13	66	LIME (SHALEY)			
1	67	BLACKSHALE			
11	78	SANDY SHALE (LIMEY)			
33	111	SHALE			
15	126	SANDY SHALE (DRY SAND STK)			
91	217	SHALE			
1	218	BLACKSHALE			
7	225	SHALE			
5	230	SANDY SHALE (LIMEY)			
24	254	SHALE			
11	265	LIME (ODOR)			
6	271	SHALE			
4.5	275.5	SANDY SHALE (OIL SAND STK)			
3.5	279	OIL SAND (SHALEY) (GOOD BLEED)			
2.5	281.5	OIL SAND (VERY SHALEY) (GOOD BLEED)			
3	284.5	SANDY SHALE (SOME OIL SAND STREAKS) (GOOD BLEED)			
1.5	286	OIL SAND (VERY SHALEY) (GOOD BLEED)			
.5	286.5	OIL SAND (GOOD BLEED)			
1.5	288	OIL SAND (VERY SHALEY) (GOOD BLEED)			
.5	288.5	SANDY SHALE (SOME OIL SAND STREAKS) (POOR BLEED)			
2	290.5	OIL SAND (SOME SHALE) (GOOD BLEED)			
3	293.5	SANDY SHALE (OIL SAND STK)			
1.5	295	OIL SAND (VERY SHALEY) (POOR BLEED)			
3	298	SANDY SHALE (ODOR)			
1	299	OIL SAND (VERY SHALEY) (POOR BLEED)			
3	302	OIL SAND (SHALEY) (FAIR BLEED)			
14	316	SHALE			
2	318	COAL			
3	321	SHALE			
11	332	LIME			
9	341	SHALE			
TD	342	LIME			

**SURFACE: 11-19-10
 CALLED: 2:10 P.M.
 SET TIME: 5:00 P.M. - BECKY**

**LONGSTRING: 338' 2 7/8 HYDRILL
 TD: 342
 SET TIME: 3:30 P.M. 11-22-10- JUDY**