



KANSAS CORPORATION COMMISSION 1049011  
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     SLOW
- 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>12/8/2010</u>	<u>12/9/2010</u>	<u>12/28/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-107-24274-00-00

Spot Description: \_\_\_\_\_

NW NE SW SE Sec. 5 Twp. 20 S. R. 23  East  West  
1,168 Feet from  North /  South Line of Section  
1,812 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Linn

Lease Name: Harvey Well #: B-3

Field Name: LaCygne-Cadmus

Producing Formation: Peru

Elevation: Ground: 947 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: 337

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: 01/14/2011

*Reed*



1049011

Operator Name: Bobcat Oilfield Services, Inc. Lease Name: Harvey Well #: B-3  
 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-collapse: collapse;"> <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>277</td> <td>GL</td> </tr> </table>	Name	Top	Datum	Peru	277	GL
Name	Top	Datum					
Peru	277	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	337	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
<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
3	286-296, 297-300	Acid 500 gal 7.5% HCL	
4	300-307	Acid 500 gal 7.5% HCL	

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 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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Lease :	HARVEY	
Owner:	BOBCAT OILFIELD SERVICES, INC.	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface:	Cemented:	Mole Size:
20FT, 6IN	5 SACKS	8 3/4
Longstring	Cemented:	Mole Size:
337' 2 7/8	50	5 5/8
8RD		
HYDRILL		

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

Well #: B-3
Location: NW, NE, SW, SE, S:5, T20, SR23, E
County: LINN
FSL: 1-155 1168
FEL: 1-845 1312
API#: 15-107-24274
Started: 12-8-10
Completed: 12-9-10

SN: 275'	Packer:	TD: 342
NONE		
Plugged:	Bottom Plug:	

### Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	TOPSOIL			
30	32	LIME			
4	36	SHALE			
4	40	BLACKSHALE			
19	59	LIME			
6	65	BLACKSHALE			
12	77	LIME (FLOW) (GAS & WATER)			
1	78	BLACKSHALE			
14	96	SANDY SHALE			
23	119	SHALE			
17	136	SANDY SHALE			
89	225	SHALE			
1	226	SHALE BLACK			
8	234	SHALE			
6	240	LIME (SANDY)			
21	261	SHALE			
11	272	LIME (SHALE) (ODOR)			
3	275	SHALE (ODOR)			
2	277	SANDY SHALE (OIL SAND STK)			
2	279	OIL SAND (SHALEY) ( POOR BLEED) ( WATER)			
6	285	OIL SAND (POOR BLEED) (WATER) (VERY LITTLE OIL)			
1	286	LIME			
1.5	287.5	OIL SAND (OIL & WATER) (GOOD BLEED)			
1	288.5	OIL SAND (OIL & SOME WATER) ( GOOD BLEED)			
5	293.5	OIL SAND (SOME SHALE) ( GOOD BLEED)			
.5	294	SANDY SHALE			
2	296	OIL SAND (SHALEY) ( GOOD BLEED)			
1	297	SANDY SHALE			
1	298	OIL SAND (SOME SHALE) ( GOOD BLEED)			
.5	298.5	OIL SAND (SHALEY) ( GOOD BLEED)			
2.5	301	OIL SAND (SOME SHALE) ( GOOD BLEED)			
4	305	SANDY SHALE ( OIL SAND STK)			
2.5	307.5	OIL SAND (SHALEY) (FAIR BLEED)			
13.5	321	SHALE			
3	324	COAL			
5	329	SHALE			
6	335	LIME			
TD	342	SHALE			

**SURFACE: 12-8-10**  
**SET TIME: 4:00 P.M.**  
**CALLED: 1:15 P.M. - BECKY**

**LONGSTRING: 337' 2 7/8 8RD TD 342'**  
**SET TIME: 2:00 P.M. - 12-9-10**  
**CALLED 12:45 P.M. - RUSSEL**



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



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

# Core Run # 1

Well #: B-3
Location: NW, NE, SW, SE, S:5, T20, SR23, E
County: LINN
FSL: <del>1,155</del> 1168
FEL: <del>1,845</del> 1812
API#: 15-107-24274
Started: 12-8-10
Completed: 12-9-10

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	281		-----		
1	282		1	OIL SAND "WATER" (VERY LITTLE OIL)	285
2	283		1.5		
3	284		1.5		
4	285		1.5		
5	286		2	LIME	286
6	287		1	OIL SAND (OIL & WATER) (GOOD BLEED)	287.5
7	288		1.5		
8	289		1.5	OIL SAND (OIL & SOME WATER) ( GOOD BLEED)	288.5
9	290		1.5	OIL SAND (SOME SHALE) (GOOD BLEED)	293.5
10	291		1.5		
11	292		1.5		
12	293		1.5		
13	294		2.5		
				SANDY SHALE	294
14	295		2	OIL SAND (SHALEY) ( GOOD BLEED)	296
15	296		2.5		
16	297		3.5	SANDY SHALE	297
17	298		2	OIL SAND (SOME SHALE ) (GOOD BLEED)	298
18	299		1.5	OIL SAND (SHALEY) (GOOD BLEED)	298.5
				OIL SAND (SOME SHALE) (GOOD BLEED)	
19	300		1.5		
20	301				

**Avery Lumber**  
 P.O. BOX 66  
 MOUND CITY, KS 66056  
 (913) 795-2210 FAX (913) 795-2194

Merchant Copy  
**INVOICE**  
 THIS COPY MUST REMAIN AT  
 MERCHANT AT ALL TIMES!

Page: 1	Invoice: <b>10028414</b>
Special Instructions :	Time: 08:51:39
Sale rep #: MAVERY MIKE	Ship Date: 11/26/10
Acct rep code:	Invoice Date: 11/30/10
	Due Date: 01/05/11
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
Customer #: 3570021	Customer PO: Order By: TERRY

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
350.00	350.00	L	BAG	CPPC	PORTLAND CEMENT	7.8900 BAG	7.8900	2786.50
160.00	160.00	L	BAG	CPPM	POST SET FLY A8H 75#	6.1000 BAG	5.1000	816.00
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

913.837.4154

Direct Delivery 11-29-10

ORDERED BY PHONE

Terry

# INVOICE

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$3850.50
SHIP VIA LINN COUNTY				Taxable	3850.50
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	.242.58

**TOTAL \$4093.08**

1 - Merchant Copy

