



KANSAS CORPORATION COMMISSION 1053950
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 #: _____

| 1/19/2011 | 1/24/2011 | 4/28/2011 |
|-----------------------------------|-----------------|---|
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-107-24229-00-00

Spot Description: _____

SE NW SE SE Sec. 5 Twp. 20 S. R. 23 East West

845 Feet from North / South Line of Section

855 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Linn

Lease Name: Harvey Well #: D-6

Field Name: LaCygne-Cadmus

Producing Formation: Peru

Elevation: Ground: 928 Kelly Bushing: 0

Total Depth: 335 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: 327

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: 05/03/2011



1053950

Operator Name: Bobcat Oilfield Services, Inc. Lease Name: Harvey Well #: D-6
 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>267</td> <td>GL</td> </tr> </table> | Name | Top | Datum | Peru | 267 | GL |
| Name | Top | Datum | | | | | |
| Peru | 267 | 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 | 327 | 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 (Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| 3 | 276-281 | Acid 500 gal 7.5% HCL | |
| 3 | 282-286 | | |
| 3 | 286-296 | | |
| | | | |

| | | | |
|---|-----------|---|-----------------------------------|
| 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: _____ _____ |
|---|--|--|

| | | |
|-------------|------------------------------|------------|
| 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 | Cemented: | Hole Size: |
| 327' 2 7/8 | 50 | 5 5/8 |
| BRD | | |

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

| |
|---------------------------------------|
| Well #: D-6 |
| Location: SE-NW-SE-S:5 -T20-S.R.-23 E |
| County: LINN |
| FSL: 825 845 |
| FEL: 625 855 |
| API#: 15-10724229-00-00 |
| Started: 1-19-11 |
| Completed: 1-24-11 |

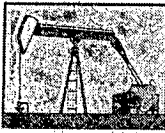
| | | |
|----------|--------------|----------|
| SN: 264 | Packer: | TD: 335' |
| Plugged: | Bottom Plug: | |

Well Log

| TKN | BTM Depth | Formation | TKN | BTM Depth | Formation |
|-----|-----------|---|-----|-----------|-----------|
| 2 | 2 | TOPSOIL | | | |
| 18 | 20 | LIME | | | |
| 4 | 24 | BLACKSHALE | | | |
| 24 | 46 | LIME | | | |
| 3 | 49 | BLACKSHALE | | | |
| 13 | 62 | LIME | | | |
| 1 | 63 | BLACKSHALE | | | |
| 10 | 73 | SANDY SHALE | | | |
| 32 | 105 | SHALE | | | |
| 32 | 137 | SANDY SHALE (DRY SAND STREAKS) | | | |
| 78 | 215 | SHALE | | | |
| 1 | 216 | COAL | | | |
| 6 | 222 | SHALE | | | |
| 6 | 228 | LIME | | | |
| 23 | 251 | SHALE | | | |
| 11 | 262 | LIME (ODOR) | | | |
| 2.5 | 264.5 | SHALE | | | |
| 1.5 | 266 | SANDY SHALE (OIL SAND STEAKS) (WATER) | | | |
| 3 | 269 | OIL SAND (VERY SHALEY) (FAIR BLEED) (SOME WATER) | | | |
| 5.5 | 274.5 | OIL SAND (FAIR BLEED) (SOME SHALE) (OIL & WATER) | | | |
| 2.5 | 277 | OIL SAND (SHALEY) (FAIR BLEED) | | | |
| 2.5 | 279.5 | SANDY SHALE (SOME OIL SAND STREAKS) (POOR BLEED) | | | |
| 1.5 | 281 | OIL SAND (SHALEY) (FAIR BLEED) | | | |
| 1 | 282 | LIME | | | |
| 3 | 285 | OIL SAND (VERY SHALEY) (FAIR BLEED) | | | |
| 1.5 | 286.5 | SANDY SHALE (SOME OIL SAND STEAKS)(POOR BLEED) | | | |
| 1.5 | 288 | OIL SAND (VERY SHALEY) (FAIR BLEED) | | | |
| 6 | 294 | SANDY SHALE (SOME OIL SAND STREAKS)(POOR BLEED) | | | |
| 2 | 296 | OIL SAND (FAIR BLEED) (SOME SHALE) | | | |
| 13 | 309 | SHALE | | | |
| 3 | 312 | COAL | | | |
| 6 | 318 | SHALE | | | |
| 10 | 328 | LIME | | | |
| TD | 335 | SHALE | | | |
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SURFACE: 1-19-11
SET TIME: 4:00 P.M.
CALLED: 1:00 P.M. - LARRY

LONGSTRING: 327' 2 7/8
TD: 335'
CALLED: 1-24-11 - 2:30 P.M. - JUDY
SET TIME: 4:00 P.M.



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

| |
|---------------------------------------|
| Well #: D-6 |
| Location: SE-NW-SE-SE S:5-T:20-R:23 E |
| County: LINN |
| FSL: 825 845 |
| FEL: 625 855 |
| API#: 15-10724229-00-00 |
| Started: 1-19-11 |
| Completed: 1-24-11 |

| | |
|-------------|--------------------------------|
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| OPR #: | 3895 |
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| OPR #: | 4339 |

Core Run # 1

| FT | Depth | Clock | Time | Formation/Remarks | Depth |
|----|-------|-------|------|--|-------|
| 0 | 271 | | | | |
| 1 | 272 | | 1.5 | | |
| 2 | 273 | | 1.5 | | |
| 3 | 274 | | 2.5 | OIL SAND SOME SHALE (OIL AND WATER) (FAIR BLEED) | 274.5 |
| 4 | 275 | | 1 | | |
| 5 | 276 | | 1.5 | | |
| 6 | 277 | | 1 | OIL SAND SHALEY (FAIR BLEED) | 277 |
| 7 | 278 | | 1.5 | | |
| 8 | 279 | | 1.5 | | |
| 9 | 280 | | 1.5 | SANDY SHALE (SOME OIL SAND STREAKS)(POOR BLEED) | 279.5 |
| 10 | 281 | | 1.5 | OIL SAND (SHALEY) (FAIR BLEED) | 281 |
| 11 | 282 | | 3.5 | LIME | 282 |
| 12 | 283 | | 1.5 | | |
| 13 | 284 | | 1.5 | | |
| 14 | 285 | | 1.5 | OIL SAND (VERY SHALEY) (FAIR BLEED) | 285 |
| 15 | 286 | | 2 | | |
| 16 | 287 | | 1.5 | SANDY SHALE (SOME OIL SAND STREAKS) (POOR BLEED) | 286.5 |
| 17 | 288 | | 1.5 | OIL SAND (VERY SHALEY) (FAIR BLEED) | 288 |
| 18 | 289 | | 2 | SANDY SHALE (SOME OIL SAND STREAKS) (POOR BLEED) | |
| 19 | 290 | | 1.5 | | |
| 20 | 291 | | 1.5 | | |

Avery Lumber
 P.O. BOX 88
 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: 10027491 |
| Special : | Time: 10:31:23 |
| Instructions : | Ship Date: 01/04/11 |
| Sale rep #: MAVERY MIKE | Invoice Date: 01/07/11 |
| | Due Date: 02/05/11 |
| 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 (913) 837-2823 |
| Customer #: 3570021 | Customer PO: Order By: |

| ORDER | SHIP | L | U/M | ITEM# | DESCRIPTION | Alt Price/Uom | PRICE | EXTENSION |
|--------|--------|---|-----|-------|----------------------|---------------|---------|-----------|
| 245.00 | 245.00 | L | BAG | CPFC | PORTLAND CEMENT | 7.9900 BAG | 7.9900 | 1967.55 |
| 280.00 | 280.00 | L | BAG | CPPM | POST SET FLY ASH 75# | 5.1000 BAG | 5.1000 | 1428.00 |
| 14.00 | 14.00 | L | EA | CPQP | QUIKRETE PALLETS | 17.0000 EA | 17.0000 | 238.00 |

Harvey D.L.

DIRECT DELIVERY

REPERB TERM

INVOICE

| | |
|---|--|
| FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ SHIP VIA LINN COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION X | Sales total \$3623.55 |
| | Taxable 3623.55 Non-taxable 0.00 Tax # _____ |
| | Sales tax 228.28 |
| TOTAL \$3851.83 | |

1 - Merchant Copy

