



KANSAS CORPORATION COMMISSION 1056914
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 #: _____

5/3/2011	5/4/2011	6/24/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-107-24357-00-00

Spot Description: _____
NE NW NW SE Sec. 5 Twp. 20 S. R. 23 East West
2324 Feet from North / South Line of Section
2308 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Linn

Lease Name: NE Baker Well #: C-10

Field Name: LaCygne-Cadmus

Producing Formation: Peru

Elevation: Ground: 917 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 cmf.

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 Garcia Date: 06/27/2011



1056914

Operator Name: Bobcat Oilfield Services, Inc. Lease Name: NE Baker Well #: C-10
 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>264</td> <td>GL</td> </tr> </table>	Name	Top	Datum	Peru	264	GL
Name	Top	Datum					
Peru	264	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
<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
3	270-298	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:	NORTH EAST BAKER	
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
8RD		

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

Well #: C-10
Location: N2,NW,NW,SE,SS,T20,SR23,E
County: LINN
FSL: 2,325- 2324
FEL: 2,310- 2308
API#: 15-107-24357-00-00
Started: 5-3-11
Completed: 5-4-11

SN: NONE	Packer:
Plugged:	Bottom Plug:

TD: 335'

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	TOPSOIL			
21	22	LIME			
3	25	SHALE			
3	28	BLACKSHALE			
2	30	SHALE			
18	48	LIME			
2	50	SHALE			
2	58	BLACKSHALE			
3	55	LIME			
4	59	SHALE			
7	66	LIME			
1	67	BLACKSHALE			
10	77	SHALE (LIMEY)			
33	110	SHALE			
7	117	SANDY SHALE			
96	213	SHALE			
1	214	BLACKSHALE			
9	223	SHALE			
8	231	LIME			
20	251	SHALE			
1	252	LIME			
3	255	SHALE			
8.5	263.5	LIME (FAIR BLEED)			
2	265.5	OIL SAND (VERY SHALEY) (POOR BLEED)			
3	268.5	OIL SAND (SHALEY) (FAIR BLEED)			
1	269.5	OIL SAND (GOOD BLEED)			
1	270.5	OIL SAND (SHALEY) (GOOD BLEED)			
8.5	279	OIL SAND (GOOD BLEED)			
5	279.5	OIL SAND (FRACTURED) (GOOD BLEED)			
3.5	283	OIL SAND (SOME SHALE) (GOOD BLEED)			
4.5	287.5	OIL SAND (SHALEY) (GOOD BLEED)			
1	288.5	SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)			
1	289.5	OIL SAND (VERY SHALEY) (FAIR BLEED)			
2.5	292	SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)			
5.5	297.5	OIL SAND (SHALEY) (FAIR BLEED)			
14.5	312	SHALE			
2	314	COAL			
4	318	SHALE			
11	329	LIME			
TD	355	SHALE			

SURFACE: 5-3-11
SET TIME: 4:00 P.M. - JUDY
CALLED: 11:15 A.M.

LONGSTRING: 327' 2 7/8 8RD PIPE
TD: 335'
SET TIME: 2:30 P.M. -5-4-11
CALLED: 12:45 P.M.



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

Well #: C-10 ATE
Location: N2,NW,NW,SE,S5,T20,SR23,E
County: LINN
FSL: 2,325 2324
FEL: 2,310 2308
API#: 15-107-24357-00-00
Started: 5-3-11
Completed: 5-4-11

Lease :	NORTH EAST BAKER
Owner:	BOBCAT OILFIELD SERVICES INC.
OPR #:	9895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

Core Run #1

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	272				
1	273		1		
2	274		1		
3	275		1.5	OIL SAND (GOOD BLEED)	
4	276		1.5		
5	277		1		
6	278		1.5		
7	279		1.5	OIL SAND (FRACTURED) GOOD BLEED	279 279.5
8	280		2		
9	281		1.5	OIL SAND (SOME SHALE) (GOOD BLEED)	
10	282		5		283
11	283		1		
12	284		2.5		
13	285		2	OIL SAND (SHALEY) (GOOD BLEED)	
14	286		2		
15	287		1.5		287.5
16	288		3.5	SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)	288.5
17	289		4	OIL SAND (VERY SHALEY) (FAIR BLEED)	289.5
18	290		2	SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)	
19	291		3.5		292
20	292		4.5		
21	293		3.5	OIL SAND (SHALEY) (FAIR BLEED)	

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: **10030661**

Special : Time: 10:18:53
 Instructions : Ship Date: 05/02/11
 Invoice Date: 05/06/11
 Sale rep #: **SCOLEMAN STEVE** Acct rep code: Due Date: 06/05/11

Sold To: **BOBCAT OILFIELD SRVC,INC** Ship To: **BOBCAT OILFIELD SRVC,INC**
 C/O BOB EBERHART (913) 837-2823
 30808 COLDWATER RD
 LOUISBURG, KS 66053 (913) 837-2823

Customer #: 3570021 Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	AR Price/Uom	PRICE	EXTENSION
280.00	280.00	L	BAG	CPPC	PORTLAND CEMENT	8.2900 BAG	8.2900	2321.20
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 ORDERED BY TERRY FRIDAY THE 6TH, 1ST THING								

*OK R.L.
 NE Baker
 C-10
 5-4-11*

INVOICE

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$3783.20
SHIP VIA LINN COUNTY				Taxable	3783.20
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	238.34

TOTAL \$4021.54

1 - Merchant Copy

