



KANSAS CORPORATION COMMISSION 1061586  
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>6/1/2011</u>	<u>6/2/2011</u>	<u>8/30/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-107-24369-00-00

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

SW NE NE SE Sec. 5 Twp. 20 S. R. 23  East  West

2151 Feet from  North /  South Line of Section

529 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 #: D-15

Field Name: LaCygne-Cadmus

Producing Formation: Peru

Elevation: Ground: 879 Kelly Bushing: 0

Total Depth: 318 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: 311

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 Gansior Date: 09/07/2011



1061586

Operator Name: Bobcat Oilfield Services, Inc. Lease Name: NE Baker Well #: D-15  
 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>249</td> <td>GL</td> </tr> </table>	Name	Top	Datum	Peru	249	GL
Name	Top	Datum					
Peru	249	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	311	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	251.0 - 261.0	Acid 500 gal 7.5% HCL	
3	270.0 - 275.0		

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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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:
311' 2 7/8	50	5 5/8
BRD PIPE		

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



Well #: D-15
Location: SW,NE,NE,SE,SST20,SR23,E
County: LINN
FSL: 2,475 2151
REF: 486 529
API#: 15-107-24369-00-00
Started: 6-1-11
Completed: 6-2-11

SN: 247	Packer:	TD: 318'
Plugged:	Bottom Plug:	

## Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	TOPSOIL			
21	22	LIME			
5	27	SHALE			
2	29	BLACKSHALE			
5	34	LIME			
3	37	SHALE			
5	42	LIME			
1	43	BLACKSHALE			
10	53	SHALE (LIMEY)			
35	88	SHALE			
23	111	SANDY SHALE (DRY SAND)			
83	194	SHALE			
1	195	BLACKSHALE			
6	201	SHALE			
7	208	LIME			
24	234	SHALE			
11	243	LIME			
4	247	SHALE			
1	248	SANDY SHALE (OIL SAND STK)			
2	250	OIL SAND (VERY SHALEY)(FAIR BLEED)			
1.5	251.5	OIL SAND (SOME SHALE) (GOOD BLEED)			
.5	252	SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)			
1	253	LIME			
3.5	256.5	OIL SAND (SHALEY) (GOOD BLEED)			
3	259.5	SANDY SHALE (SOME OIL SAND STEAKS) (FAIR BLEED)			
.5	260	LIME			
2	262	SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)			
1	263	OIL SAND (SHALEY) (FAIR BLEED)			
1	264	SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)			
1.5	265.5	OIL SAND (SHALEY) (FAIR BLEED)			
10.5	276	SANDY SHALE (SOME OIL SAND STEAKS)(POOR BLEED)			
2	291	COAL			
4	295	SHALE			
11	306	LIME			
9	315	SHALE			
TD	318	LIME			

SURFACE: 6-1-11  
SET TIME: 4:00 P.M. - JUDY  
CALLED: 12:10 P.M.

LONGSTRING: 311' 2 7/8 BRD PIPE  
TD: 318'  
SET TIME: 2:00 P.M. 6-2-11-RUSSEL  
CALLED: 12:30 P.M.



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

Well #: D-15
Location: SW,NE,NE,SE,S5T20,SR23,E
County: LINN
FSL: 2,175 2151
FEL: 485 529
API#: 15-107-24369-00-00
Started: 6-1-11
Completed: 6-2-11

Lease :	NORTH EAST BAKER
Owner:	BOBCAT OILFIELD SERVICES INC.
OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

# Core Run #1

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	250				
				OIL SAND (SOME SHALE) (GOOD BLEED)	251.5
1	251		1		
				SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)	252
2	252		1		
				LIME	253
3	253		2		
4	254		1.5		
				OIL SAND (SHALEY) (GOOD BLEED)	
5	255		1		
6	256		1.5		256.5
7	257		2		
8	258		1.5	SANDY SHALE (SOME OIL SAND STEAKS) (FAIR BLEED)	
9	259		2		259.5
				LIME	260
10	260		3		
11	261		2	SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)	662
12	262		2	OIL SAND (SHALEY) (FAIR BLEED)	263
13	263		2	SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)	264
14	264		3	OIL SAND (SHALEY) (FAIR BLEED)	265.5
15	265		2		
16	266		2.5		
17	267		3		
18	268		3		
				SANDY SHALE (SOME OIL SAND STEAKS) (POOR BLEED)	
19	269		5		
20	270		3		

**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: 10031065
Special :	Time: 18:38:42
Instructions :	Ship Date: 05/18/11
	Invoice Date: 05/18/11
Sale rep #: MAVERY MIKE	Due Date: 06/05/11
Account code:	
Sold To: BOBCAT OILFIELD SRVC, INC C/O BOB EBERHART 38805 COLDWATER RD LOUISBURG, KS 66059	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
315.00	315.00	L	BAG	CPPC	PORTLAND CEMENT	8.2900 BAG	8.2900	2611.35
200.00	200.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.1000 BAG	5.1000	1020.00
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

913-837-4159  
 NE Baker  
 D-15  
 6-2-11

~~PHONE~~ PHONE ORDER BY TERRY  
 DIRECT DELIVERY

# INVOICE

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$3869.35
SHIP VIA LINN COUNTY				Taxable	3869.35
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
X				Sales tax	243.77
				<b>TOTAL</b>	<b>\$4113.12</b>

1 - Merchant Copy

