



KANSAS CORPORATION COMMISSION 1062801
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>7/5/2011</u>	<u>7/6/2011</u>	<u>10/19/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-107-24401-00-00
Spot Description: _____
SE NE NE SW Sec. 5 Twp. 20 S. R. 23 East West
2152 Feet from North / South Line of Section
2795 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Linn
Lease Name: North Baker Well #: D-8
Field Name: LaCygne-Cadmus
Producing Formation: Peru
Elevation: Ground: 900 Kelly Bushing: 0
Total Depth: 320 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: 313
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: 10/25/2011



1062801

Operator Name: Bobcat Oilfield Services, Inc. Lease Name: North Baker Well #: D-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>253</td> <td>GL</td> </tr> </table>	Name	Top	Datum	Peru	253	GL
Name	Top	Datum					
Peru	253	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	313	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	256-272	Acid 500 gal 7.5% HCL	
3	275.5-285.5		

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:	NORTH 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:
313 2 7/8	50	5 5/8

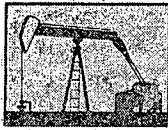
Dale Jackson Production Co.
 Box 266, Mound City, Ks 66056
 Cell # 620-363-2683
 Office # 913-795-2991

Well #: D-8
Location: SE-NE-NE, S:5, T:20, S.R.: 23, E
County: LINN
FSL: 2175 2152
FEL: 2805 2795
API#: 15-107-24401-00-00
Started: 7-5-11
Completed: 7-6-11

SN: 250'	Packer:	TD: 320
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	TOP SOIL			
9	10	LIME (CLAY STR)			SURFACE: 7-5-11
5	15	SHALE			SET TIME: 4:00PM
2	17	BLACK SHALE			CALLED: 1:15PM
2	19	SHALE			LONGSTRING: 313' 2 7/8 8RD PIPE, TD: 320
19	38	LIME			SET TIME: 2:30PM, 7-6-11-LEVI
2	40	SHALE			CALLED: 11:00PM
2	42	BLACK SHALE			
3	45	LIME			
5	50	SHALE (LIMEY)			
4	54	LIME			
1	55	BLACK SHALE			
13	68	SHALE (LIMEY)			
31	99	SHALE			
5	104	SANDY SHALE (DRY SAND)			
102	206	SHALE			
1	207	BLACK SHALE			
6	213	SHALE			
7	220	LIME			
20	240	SHALE			
10	250	LIME			
1	251	SHALE			
1	252	SANDY SHALE (ODOR) (GAS)			
6	258	OIL SAND (SOME SHALE) (WATER & OIL) (FAIR BLEED)			
7.5	265.5	OIL SAND (SOME SHALE) (GOOD BLEED)			
2	267.5	OIL SAND (LIMEY) (GOOD BLEED)			
2	269.5	OIL SAND (GOOD BLEED)			
1	270.5	SANDY SHALE (SOME OIL SAND STRKS) (POOR BLEED)			
1.5	272	OIL SAND (GOOD BLEED)			
3	275	SANDY SHALE (OIL SAND STRKS)			
4	279	OIL SAND (VERY SHALEY) (FAIR BLEED)			
3	282	OIL SAND (SOME SHALE) (GOOD BLEED)			
0.5	282.5	LIME			
3.5	286	OIL SAND (FAIR BLEED)			
14	300	SHALE			
2	302	COAL			
4	306	SHALE			
5	315	LIME			
TD	320	SHALE			



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

Core Run #1

Well #: D-8
Location: SE-NE-NE, S:5, T:20, S.R.: 23, E
County: LINN
FSL: 2475 2152
FEL: 2805 2795
API#: 15-107-24401-00-00
Started: 7-5-11
Completed: 7-6-11

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

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	252				
1	253		1.5		
2	254		1.5		
3	255		2		
4	256		1		
5	257		1		
6	258		2	OIL SAND (SOME SHALE) (WATER & OIL) (FAIR BLEED)	258
7	259		2		
8	260		2.5		
9	261		3		
10	262		3.5		
11	263		2		
12	264		2.5		
13	265		3	OIL SAND (SOME SHALE) (GOOD BLEED)	265.5
14	266		2.5		
15	267		3	OIL SAND (LIMEY) (GOOD BLEED)	267.5
16	268		5		
17	269		6	OIL SAND (GOOD BLEED)	269.5
18	270		2	SANDY SHALE (SOME OIL SAND STKS) (POOR BLEED)	270.5
19	271		1.5		
20	272		1.5	OIL SAND (GOOD BLEED)	

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: 10032294
Special :	Time: 13:50:18
Instructions :	Ship Date: 08/28/11
Site rep #: MAVERY MIKE	Invoice Date: 07/01/11
Acci rep code:	Due Date: 08/05/11
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: TERRY

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt 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	GPPM	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

*North Baker
Dis
7-6-11*

*PHONE ORDER BY TERRY
DIRECT DELIVERY*

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
				Tax #	

TOTAL \$4021.54

2 - Customer Copy

