



KANSAS CORPORATION COMMISSION 1067400
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>9/7/2011</u>	<u>9/8/2011</u>	<u>12/29/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-107-24416-00-00

Spot Description: _____
NE NW SE SW Sec. 5 Twp. 20 S. R. 23 East West
1014 Feet from North / South Line of Section
3332 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Linn
Lease Name: South Baker Well #: K-7

Field Name: LaCygne-Cadmus
Producing Formation: Peru

Elevation: Ground: 853 Kelly Bushing: 0
Total Depth: 280 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: 278
feet depth to: 0 w/ 45 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 Garris Date: 01/05/2012



1067400

Operator Name: Bobcat Oilfield Services, Inc. Lease Name: South Baker Well #: K-7
 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 Name Top Datum Peru 221 GL
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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	
Productin casing	5.625	2.875	6	278	Portland/Fly Ash	45	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	241-251	Acid 250 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:	SOUTH 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:
278 2 7/8	45	5 5/8

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



Well #: K-7
Location: NE 1/4, S2, SE, SW, S:5, T:20,
S:R.:23, E
County: LINN
FSL: 990 1014
FEL: 3300 3332
API#: 15-107-24416-00-00
Started: 9-7-11
Completed: 9-8-11

SN:	Packer:	TD: 280
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	TOP SOIL			
6	6	LOOSE ROCKS & TOP SOIL			
2	8	LIME			
6	14	SHALE			
6	20	LIME			
3	23	BLACK & SHALE (SOME GAS)			
10	33	SHALE (LIMEY)			
137	170	SHALE			
1	171	BLACK SHALE			
10	181	SHALE			
6	187	LIME			
19	206	SHALE (SOME GAS)			
2	208	LIME			
4	212	SHALE			
6	218	LIME			
1	219	SHALE (LIMEY)			
1	220	LIGHT SANDY SHALE (OIL SAND STRKS)			
4	224	OIL SAND (SHALEY) (FAIR BLEED)			
1.5	225.5	OIL SAND (GOOD BLEED)			
1	226.5	LIME			
12.5	239	OIL SAND (SOME SHALE) (GOOD BLEED) (LITTLE SHOW OF WATER)			
4	243	OIL SAND (SOME SHALE) (GOOD BLEED)			
2	245	OIL SAND (VERY SHALEY) (GOOD BLEED)			
4	249	OIL SAND (SOME SHALE) (GOOD BLEED)			
1	250	OIL SAND (VERY SHALEY) (FAIR BLEED)			
1	251	OIL SAND (SOME SHALE) (FAIR BLEED)			
2	253	SANDY SHALE (OIL SAND STRKS)			
16	269	SHALE			
2	211	COAL			
5	276	SHALE			
TD	280	LIME			

SURFACE: 9-7-11
 SET TIME: 3:30PM
 CALLED: 12:45PM- LEVI
 LONGSTRING: 278' 2 7/8, 8RD PIPE, TD:280
 SET TIME: 2:00PM, 9-8-11
 CALLED: 12:30PM



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

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

Core Run #1

Well #: K-7 <i>NW</i>
Location: <i>NE</i> N2, SE, SW, S:5, T:20, S.R.:23, E
County: LINN
FSL: 999 <i>1014</i>
FEL: 3800 <i>3332</i>
API#: 15-107-24416-00-00
Started: 9-7-11
Completed: 9-8-11

FT	Depth	Clock	Time	Formation/Remarks	Depth
0	220				
1	221		1.5		
2	222		1.5		
3	223		2.5		
4	224		1.5	OIL SAND (SHALEY) (FAIR BLEED)	224
5	225		2	OIL SAND (GOOD BLEED)	225.5
6	226		4	LIME	226.5
7	227		2.5		
8	228		2.5		
9	229		1.5		
10	230		2		
11	231		2		
12	232		2		
13	233		2		
14	234		3		
15	235		3.5		
16	236		3		
17	237		1.5		
18	238		1.5		
19	239		1.5	OIL SAND (SOME SHALE) (GOOD BLEED) (A LITTLE WATER SHOW)	239
20	240		1.5		
				OIL SAND (SOME SHALE) (GOOD 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: 10034199
Special :	Time: 15:48:03
Instructions :	Ship Date: 09/08/11
	Invoice Date: 09/08/11
Sale rep #: MAVERY MIKE	Accr rep code:
	Due Date: 10/05/11
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	CPPC	PORTLAND CEMENT	8.2900 BAG	8.2900	2031.05
280.00	280.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.1000 BAG	6.1000	1428.00
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

*South Baker
K-7
9-8-11*

*DIRECT DELIVERY
PHONE ORDER BY TERRY*

INVOICE

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$3697.05
SHIP VIA LINN COUNTY				Taxable	3697.05
RECEIVED COMPLETE AND IN GOOD CONDITION					
X				Tax #	
				Sales tax	232.91
				TOTAL	\$3929.96

1 - Merchant Copy

