



KANSAS CORPORATION COMMISSION 1080077  
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 # 4339  
Name: Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co.  
Address 1: 2449 US HIGHWAY 7  
Address 2:  
City: MAPLETON State: KS Zip: 66754 + 9443  
Contact Person: Dale Jackson  
Phone: ( 620 ) 363-2683  
CONTRACTOR: License # 4339  
Name: Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co.  
Wellsite Geologist: NA  
Purchaser:

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 #:

11/23/2011	11/29/2011	11/29/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-011-23892-00-00  
Spot Description:  
SE NE NW SW Sec. 29 Twp. 23 S. R. 24  East  West  
2145 Feet from  North /  South Line of Section  
4125 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Bourbon  
Lease Name: Jackson Well #: PB5  
Field Name:  
Producing Formation: Mississippi  
Elevation: Ground: 810 Kelly Bushing: 815  
Total Depth: 460 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: 458  
feet depth to: 0 w/ 65' 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: 06/06/2012



1080077

Operator Name: Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co. Lease Name: Jackson Well #: PB5  
 Sec. 29 Twp. 23 S. R. 24  East  West County: Bourbon

**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  Yes  No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey  Yes  No

Cores Taken  Yes  No

Electric Log Run  Yes  No

Electric Log Submitted Electronically  Yes  No  
 (If no, Submit Copy)

List All E. Logs Run:

Log Formation (Top), Depth and Datum  Sample

Name	Top	Datum
Fort Scott Lime	87	
Mississippi Lime	428	

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	9.875	7	10	20	Portland	5	None
Production Casing	5.625	2.875	6	458	Portland	65	None

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

TUBING RECORD: Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. \_\_\_\_\_ Producing Method:  Flowing  Pumping  Gas Lift  Other (Explain) \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	_____ _____ _____

# 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: <b>20024379</b>
Special : <i>Fair Harbor &amp; Jackson</i>	Time: 11:27:00
Instructions :	Ship Date: 10/20/11
Sale rep #: SCOLEMAN STEVE	Invoice Date: 10/20/11
Accl rep code:	Due Date: 10/20/11
Sold To: CASH CUSTOMER - TAXABLE	Ship To: CASH CUSTOMER - TAXABLE
Customer #: *9	Customer PO:
	Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
210.00	210.00	L	BAG	CPPC	PORTLAND CEMENT	9.4410 BAG	9.4410	1982.61
3.00	3.00	L	EA	CPOP	QUIKRETE PALLETS	17.0000 EA	17.0000	51.00

Check # 1181	2182.06	FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$2033.61
		SHIP VIA Customer Pickup					
		RECEIVED COMPLETE AND IN GOOD CONDITION				Taxable	2033.61
Total applied:	2182.06	X				Non-taxable	0.00
						Tax #	
						Sales tax	148.45

**TOTAL \$2182.06**

2 - Customer Copy