



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

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 #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ 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: _____ Date: _____



Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input 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

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

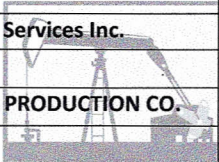
TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

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
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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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Lease:	BURRIS	
Owner:	Bobcat Oilfield Services Inc.	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface:	Cemented:	Hole Size:
20' of 6"	5 Sacks	8 3/4"
Longstring:	Cemented:	Hole Size:
500'FT. OF 2 7/8 8rd	65 SACKS	5 5/8"



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

Well #: 21W-12
Location: NE,NE,SW,SW,S12,T17,R24
County: MIAMI
FSL:1007
FEL: 4187
API#: 15-121-29412-00-00
Started: 1/16/13
Completed: 1/17/13

SN: NONE	Packer: NONE
Plugged:	Bottom Plug:

TD: 505' FT.

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
1	1	Top Soil			
5	6	Clay			
38	44	Lime			
1	45	Clay			
1	46	Lime			
50	96	Shale			
10	106	Lime			
27	133	Shale			
5	138	Lime			
48	186	Shale			
9	195	Lime			
15	210	Shale			
29	239	Lime			
6	245	Black Shale			
4	249	Lime (Shaley)			
18	267	Lime			
3	270	Black shale			
2	272	Lime			
3	275	Shale			SET SURFACE 1/16/13
7	282	Lime			SET TIME 12:30 P.M.
4	286	Shale			CALLED IN 10:30 A.M. TALKED TO JUDY
2	288	Shale (Limey)			WELL TD 505' FT.
3	291	Sandy Shale (Oil Sand Streak)			LONG STRING 500'FT. OF 2 7/8" 8RD PIPE
30	321	Shale			SET TIME 4:00 P.M. 1/17/13
12	333	Sandy Shale			CALLED IN 3:00 P.M. TALKED TO BROOKE
60	393	Shale			
8	401	Sandy Shale (Odor)			
25	426	Shale			
1	427	Black Shale			
27	454	Shale			
10.5	464.5	Oil Sand (Some Shale) (Fair Bleed) (lime Streak) (Oil & Water)			
3.5	468	Oil Sand (Oil & Water) (Shaley)			
1.5	469.5	Oil Sand (Fair Bleed)			
.5	470	Lime			
3	473	Oil Sand (Oil & Some Water) (Good Bleed)			
10	483	Shale			
5	488	Lime			
4	492	Shale			
8	500	Lime (Shaley)			
3	503	Shale			
TD	505	Lime			

Jan. 11. 2013 8:30AM

Avery Lumber 913-795-2194,
Avery Lumber
P.O. BOX 66
MOUND CITY, KS 66056
(913) 795-2210 FAX (913) 795-2194

No. 4022 P. 1

Customer Copy

INVOICE

PLEASE REFER TO INVOICE NUMBER
ON ALL CORRESPONDENCE

Page: 1

Invoice: **10046461**

Special :	Time: 11:16:09
Instructions :	Ship Date: 01/07/13
	Invoice Date: 01/11/13
Sale rep #: MAVERY MIKE	Acct rep code:
	Due Date: 02/05/13

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: CLINT

peping01

5TH
T 28

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
380.00	380.00	L	BAG	CPPC	PORTLAND CEMENT	8.8900 BAG	8.8900	3378.20
240.00	240.00	L	BAG	CPPM	POST SET FLY ASH 75#	5.7900 BAG	5.7900	1389.60
14.00	14.00	L	EA	CPQP	QUIKRETE PALLETS	17.0000 EA	17.0000	238.00

*Burris
2/11/12*

*PHONE ORDER BY CLIENT
DIRECT DELIVERY*

INVOICE

913-837-4154

FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ SHIP VIA MIAMI COUNTY RECEIVED COMPLETE AND IN GOOD CONDITION X	Freight	100.00	Sales total	\$5005.80
	Taxable	5105.80	Misc + Frgt	100.00
	Non-taxable	0.00	Sales tax	385.49
Tax #				

TOTAL \$5491.29

2 - Customer Copy

