

* Correction *

Attention: Naomi James
* Updating well status to active and
correcting well type to producer (oil)

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
July 2014

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 Service, Inc.

Address 1: 602 W. Amity, Suite 103

Address 2: _____

City: Louisburg State: KS Zip: 66053 + _____

Contact Person: Rob Eberhart

Phone: (913) 837-5199

CONTRACTOR: License # 4339

Name: Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co.

Wellsite Geologist: N/A

Purchaser: Coffeyville Resources

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

10/02/2009 10/06/2009 11/18/2009

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

API No. 15 - 107-24112-00-00

Spot Description: NE/4

NW_SE_NW_NE Sec. 8 Twp. 20 S. R. 23 East West

4,332 Feet from North / South Line of Section

1,725 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: Linn

Lease Name: Snyder Well #: Q-17S

Field Name: LaCygne-Cadmus

Producing Formation: Peru

Elevation: Ground: 917 Kelly Bushing: N/A

Total Vertical Depth: 341 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 20.5 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 20.5

feet depth to: surface w/ 5 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 #: _____

INSTRUCTIONS: The original form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. If confidentiality is requested and approved, side two of this form will be held confidential for a period of 2 years. Rules 82-3-130, 82-3-106 and 82-3-107 apply. Drill Stem Test, Cement Tickets and Geological Well Report must be attached.

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.

Signature: [Signature]

Title: Secretary Date: 8-26-2014

KCC Office Use ONLY

Confidentiality Requested

Date: _____

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III

Approved by: NJ

Received
KANSAS CORPORATION COMMISSION

8-28-14
AUG 28 2014

CONSERVATION DIVISION
WICHITA, KS

Date: 8-29-14

Operator Name: Bobcat Oilfield Service, Inc. Lease Name: Snyder Well #: Q-17S
 Sec. 8 Twp. 20 S. R. 23 East West County: Linn

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) 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 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
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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
Surface	8.75	6.25		20.5	Portland	5	
Completion	5.625	2.875		338	Portland	50	50/50 POZ

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				

Did you perform a hydraulic fracturing treatment on this well? Yes No (If No, skip questions 2 and 3)
 Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No (If No, skip question 3)
 Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No (If No, fill out Page Three of the ACO-1)

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
2	279-299 82 Perfs	279-299 Acid Fracture	

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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. 12/01/2009		Producing Method: <input type="checkbox"/> Flowing <input checked="" 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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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MIDWEST SURVEYS
 LOGGING - PERFORATING - CONSULTING SERVICES
 P.O. Box 68, Osawatomie, KS 66064
 913 / 755 - 2128

GAMMA RAY / NEUTRON / CCL

File No.

API # 15-107-24,112

Company **Bobcat Oilfield Service, Inc.**
 Well **Snyder No. Q-17S**
 Field **Cadmus - LaCygne**
 County **Linn** State **Kansas**

Location		Other Services	
4325' FSL & 1685' FEL NW-SE-NW-NE		Perforate	
Sec. 8	Twp. 20s	Rge. 23e	Elevation
Permanent Datum	GL	Elevation	NA
Log Measured From	GL	K.B.	NA
Drilling Measured From	GL	D.F.	NA
		G.L.	NA

Date	10-07-2009		
Run Number	One		
Depth Driller	341.0		
Depth Logger	334.8		
Bottom Logged Interval	332.8		
Top Log Interval	20.0		
Fluid Level	Full		
Type Fluid	Water		
Density / Viscosity	NA		
Salinity - PPM Cl	NA		
Max Recorded Temp	NA		
Estimated Cement Top	0.0		
Equipment No.	Location	104	Osawatomie
Recorded By	Gary Windisch		
Witnessed By	Bob Eberhart		

RUN		BORE-HOLE RECORD			CASING RECORD		
No.	BIT	FROM	TO	SIZE	WGT.	FROM	TO
One	8.75"	0.0	20.0	6.00"		0.0	20.0
Two	5.625"	20.0	341.0	2.875"		0.0	338.0

<< Fold Here >>>

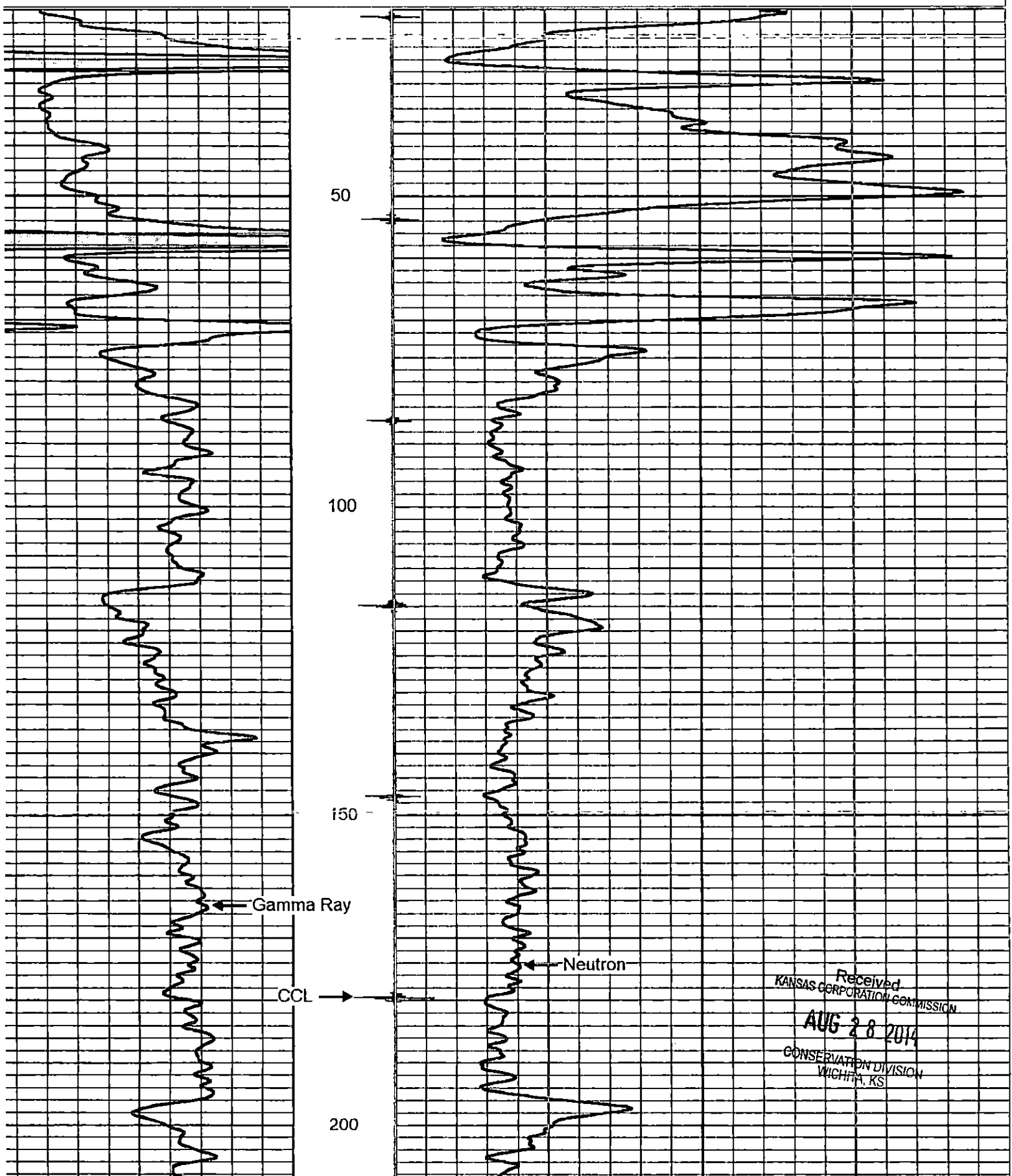
All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Comments

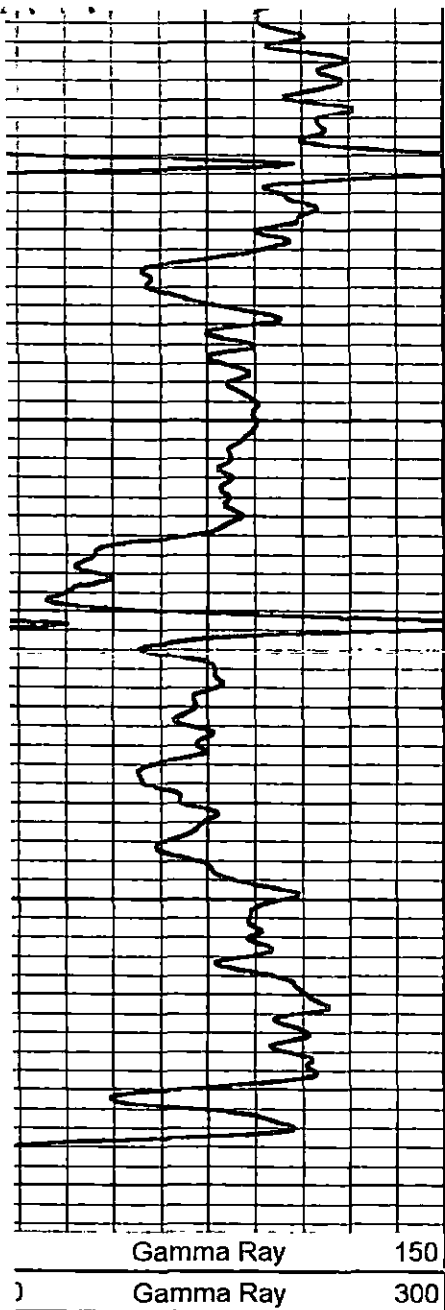
Drilling Contractor :
 Jackson Drilling Company

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AUG 28 2014
 CONSERVATION DIVISION
 WICHITA, KS

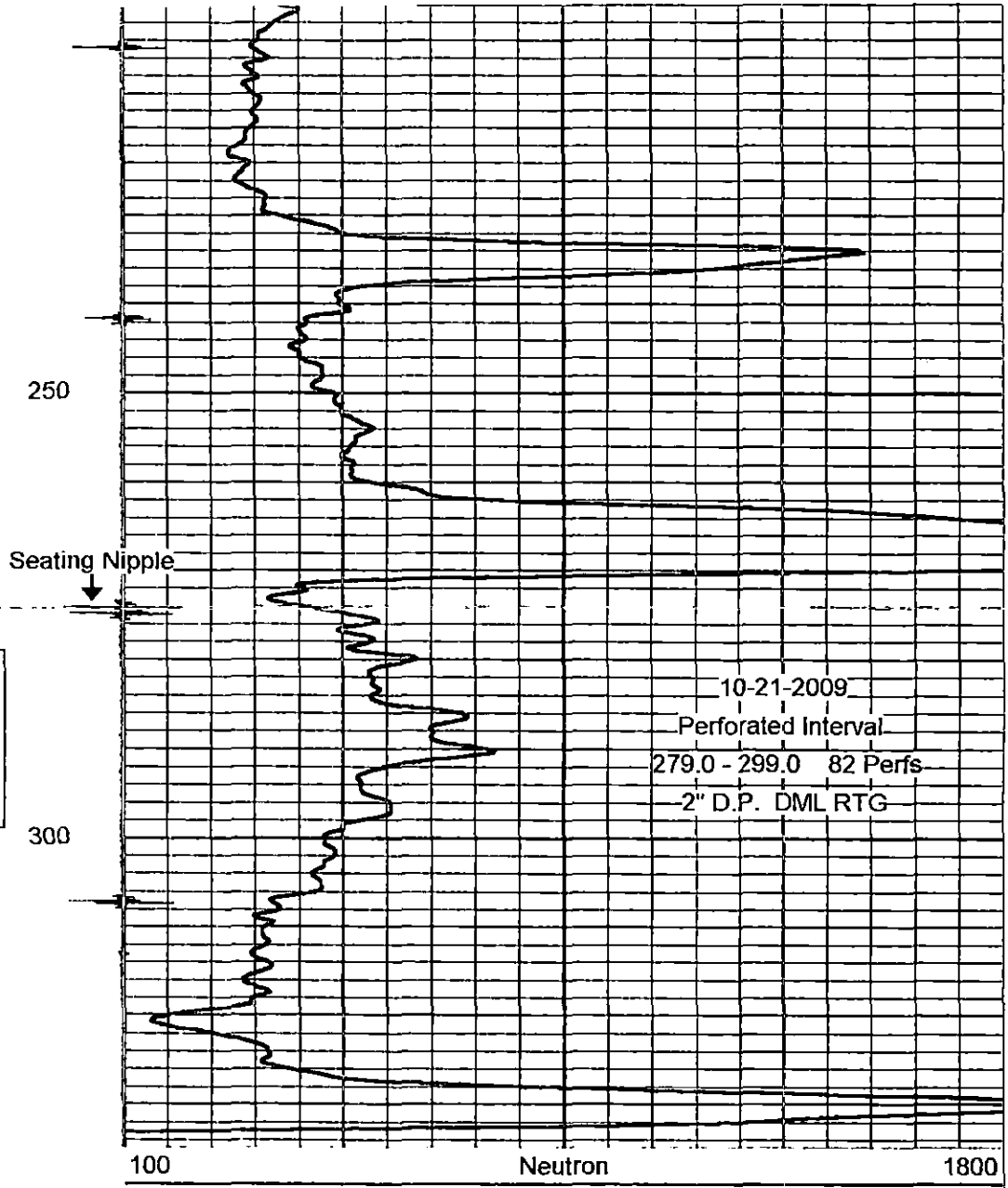
Gamma Ray	150	100	Neutron	1800
0	Gamma Ray	300		



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WICHITA, KS



Gamma Ray 150
 Gamma Ray 300



250

Seating Nipple

300

100

Neutron

1800

10-21-2009
 Perforated Interval
 279.0 - 299.0 82 Perfs
 2" D.P. DML RTG

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