

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACC-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 31473
Name: BC5 INC
Address: 3939 ELLIS Rd

City/State/Zip KANTOUL, KS 66079

Purchaser: CRUDE MARKETING

Operator Contact Person: JIM PATTON

Phone (785) 241-4016

Contractor: Name: TOWN OIL CO

License: 6142

Wellsite Geologist: N/A

Designate Type of Completion

- New Well Re-Entry Workover
- Oil SWD SICW Temp. Abd.
- Gas ENHR SIGW
- Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover: **RECEIVED**

Operator: MAR 29 2005

Well Name: KCC WICHITA

Comp. Date Old Total Depth

- Deepening Re-perf. Conv. to Inj/SWD
- Plug Back PBTD
- Commingled Docket No.
- Dual Completion Docket No.
- Other (SWD or Inj?) Docket No.

Spud Date Date Reached TD Completion Date 8-10-2004

API NO. 15- 059-24991-00-00

County FRANKLIN Apr. 70'S + 20'W of
-N2-N2-SW Sec. 21 Twp. 15 Rge. 20 NE

2240 Feet from SW (circle one) Line of Section

1300 Feet from NW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name LEACH Well # #16

Field Name KANTOUL

Producing Formation SQUIRREL

Elevation: Ground 66 KB 62

Total Depth 762 PSTD

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
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 No.

 Quarter Sec. Twp. S Rng. E/W

County Docket No.

INSTRUCTIONS: An original and two copies of this 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. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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 Trout Burkholder

Title Owner Date 3-10-05

Subscribed and sworn to before me this 10th day of March, 2005.

Notary Public Mary Ann McMechan

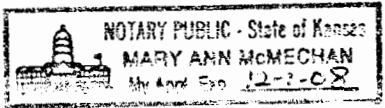
Date Commission Expires 12-1-08

K.C.C. OFFICE USE ONLY

F NO Letter of Confidentiality Attached
 C Wireline Log Received
 C Geologist Report Received

Distribution

 KCC SWD/Rep NGPA
 KGS Plug Other
 (Specify)



Operator Name BG-5 Lease Name Leach Well # 16

Sec. 21 Twp. 15 Rge. 20 East West
County FRANKLIN

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.) Yes No

Samples Sent to Geological Survey Yes No

Core Samples Taken Yes No

Electric Log Run (Submit Copy.) Yes No

Submit All E.Logs Gamma Ray / Neutron
CLL

Log Formation (Top), Depth, and Datum Sample

Name Squirrel Top Datum

CASING RECORD New Used

Report all strings set-conductor, surface, intermediates, 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
	<u>5 7/8</u>	<u>2 1/8</u>		<u>760</u>	<u>Solsol/por mix</u>	<u>93</u>	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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

CEMENTING RECORD Size Set At Packer At Liner Run Yes No

Date of First, Resumed Production, SLD or Inj. 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

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, submit ACC-18.) Other (Specify) _____