

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM *AMENDED*
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 31473
Name: BG-5 Inc.
Address: 3939 Ellis Road
City/State/Zip: Rantoul, KS 66079
Purchaser: CMI
Operator Contact Person: Jim Patton
Phone: (785) 241-4016
Contractor: Name: Town Oil
License: 6142
Wellsite Geologist: None

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

<u>11/22/05</u>	<u>11/25/05</u>	<u>12/20/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 059-25106-00-00
County: Franklin
SW-SW-SE Sec. 13 Twp. 18 S. R. 20 East West
3160 feet from S / N (circle one) Line of Section
2420 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Trent Burkdoll Well #: 49B
Field Name: Rantoul
Producing Formation: Squirrel
Elevation: Ground: N/A Kelly Bushing: _____
Total Depth: 785 Plug Back Total Depth: 750
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 785
feet depth to 0 w/ 110 sx cmt.
ACT II WHM 7-19-06

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. R. _____ East West
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 of 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.

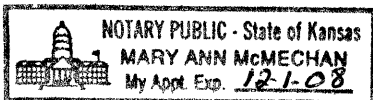
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: [Signature]
Title: Manager Date: 7/14/06
Subscribed and sworn to before me this 14 day of July,
2006.
Notary Public: Mary Ann McMechan
Date Commission Expires: December 1, 2008

KCC Office Use ONLY

NO Letter of Confidentiality Attached
If Denied, Yes Date: _____
YES Wireline Log Received
NO Geologist Report Received
NO UIC Distribution

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Operator Name: BG-5 Inc. Lease Name: Trent Burkdoll Well #: 49B
 Sec. 13 Twp. 18 S. R. 20 East West County: Franklin

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 copy of all Electric Wireline 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 <i>(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 <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>1 st Squirrel</td> <td>644</td> <td>659</td> </tr> <tr> <td>2 nd Squirrel</td> <td>702</td> <td>708</td> </tr> <tr> <td>3 rd Squirrel</td> <td>714.5</td> <td>719.5</td> </tr> </table>	Name	Top	Datum	1 st Squirrel	644	659	2 nd Squirrel	702	708	3 rd Squirrel	714.5	719.5
Name	Top	Datum											
1 st Squirrel	644	659											
2 nd Squirrel	702	708											
3 rd Squirrel	714.5	719.5											

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
Casing	6.75	4.5		750.5	OWC	110	
Surface	12.25	8.625		20	Portland	6	

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
2	644 659		
2	702 708		
2	714.5 719.5		

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 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
	1	n/a	1	28

Disposition of Gas Vented Sold Used on Lease *(If vented, Sumit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

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TICKET NUMBER 4979

LOCATION Ottawa KS

FOREMAN Fred Maden

TREATMENT REPORT & FIELD TICKET
CEMENT

WELL #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1564	T. Burkdoll # 49B	13	14	20	FR
TRUCK #	DRIVER	TRUCK #	DRIVER		
164	Alan				
195	Jason				
372	Fred				

MAILING ADDRESS
B.G.S. Inc.
3939 Ellis Rd
Rosstoul KS 66079

JOB TYPE Long string HOLE SIZE 6 3/4 HOLE DEPTH 780 CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 752 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 4 1/2 plug
 DISPLACEMENT 11.9 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4BPM

REMARKS: Establish Circulation. Mix & Pump 200 # Premium Gcel
Flush Mix & Pump 6.75 BBL Tell tale dye. Follow with
110 SKS OWC Cement. Cement to surface Flush pump
clean. Displace 4 1/2" Rubber plug to casing TD with 11.9
BBL Fresh water Pressure to 600 # PSI Release pressure
to set Float Valve. Check plug depth with measuring
15m
Fred Maden

Town Drilling - Rig Supplied Water

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump	164	765 ⁰⁰
5406	15 mi	MILEAGE Pump Truck	164	45 ⁰⁰
5407	Minimum	Ton Mileage	195	260 ⁰⁰
1126	110 SKS	OWC Cement		1430 ⁰⁰
1118B	4 SKS	Premium Gcel		265 ⁰⁰
4404	1	4 1/2" Rubber Plug		38 ⁰⁰
		Sub Total		2564 ⁰⁰
		Tax @ 6.8%		101 ⁶⁰

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SALES TAX
 ESTIMATED
 TOTAL 2666⁰⁰

AUTHORIZATION _____ TITLE Wo# 201180 DATE _____