

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>10/27/05</u>	<u>11/1/05</u>	<u>12/07/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 059-25095-00-00
 County: Franklin
SE NE NW Sec. 13 Twp. 18 S. R. 20 East West
815 feet from S / N (circle one) Line of Section
2200 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Flora Well #: F29
 Field Name: Rantoul
 Producing Formation: Squirrel
 Elevation: Ground: N/A Kelly Bushing: _____
 Total Depth: 790 Plug Back Total Depth: 755.8
 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.
ALT II WITHM 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: May Ann McMech
 Date Commission Expires: Dec 1 2008

KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
 JUL 17 2006
 KCC WICHITA

✓
 128-08

Side Two

Operator Name: BG-5 Inc. Lease Name: Flora Well #: F29
 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>1st Squirrel</td> <td>656</td> <td>672</td> </tr> <tr> <td>2nd Squirrel</td> <td>708</td> <td>715</td> </tr> <tr> <td>3rd Squirrel</td> <td>714</td> <td>730</td> </tr> </table>	Name	Top	Datum	1st Squirrel	656	672	2nd Squirrel	708	715	3rd Squirrel	714	730
Name	Top	Datum											
1st Squirrel	656	672											
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3rd Squirrel	714	730											

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		755.8	50/50	97	
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	656 672		
2	708 715		
2	724 750		

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 <i>(Explain)</i>			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	1	n/a	2		28

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other *(Specify)*

RECEIVED

JUL 17 2006

KCC WICHITA

1110 STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

LOCATION Ottawa
FOREMAN Alan Mader

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-1-05	1564	Flora #29	13	18	20	Fr
CUSTOMER 66.5			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 3939 Ellis Rd			386	Blannad		
CITY Rantoul			368	Casken		
STATE KS			122	Joe pol		
ZIP CODE 66079						
JOB TYPE <u>long string</u>	HOLE SIZE <u>6 3/4</u>	HOLE DEPTH <u>782</u>	CASING SIZE & WEIGHT <u>4 1/2</u>			
CASING DEPTH <u>757</u>	DRILL PIPE	TUBING	OTHER			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING			
DISPLACEMENT <u>11.6</u>	DISPLACEMENT PSI <u>600</u>	MIX PSI <u>200</u>	RATE <u>4 bpm</u>			
REMARKS: <u>Established rate Mixed & pumped 25x gal followed by 5 bbl water. Mixed & pumped 6 bbl dye marker followed by 105x 50/50 po2, 3# kol-seal, 6% salt, 2% gel, 1/4# flo-seal. Circulated dye to surface. Flushed pump clean. Pump 4 1/2 rubber plug to TD of casing. Circulated cement to surface. Well held 600 PSI. Set float.</u>						

Driller supplied water

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	765.00
5406	15	MILEAGE pump truck	368	45.00
5407	min	ton miles	122	260.00
5402	757	casing footage		N/C
1118B	6	premium gel		39.78
1110A	11	kol-seal		185.90
1111	330 #	granulated salt		92.40
1107	1	flo-seal		42.75
1124	97	50/50 po2		732.35
44041	1	4 1/2 rubber plug		38.00
			Sub	2201.11
RECEIVED				
JUL 17 2006				
KCC WICHITA				
			6.8%	SALES TAX 76.9
				ESTIMATED TOTAL 2278.11

AUTHORIZATION _____

TITLE WO# 200812

DATE Alan Mader