

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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>10/04/05</u>	<u>10/12/05</u>	<u>11/30/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 059-25090-00-00
 County: Franklin
SE SE NE NE Sec. 13 Twp. 18 S. R. 20 East West
4030 feet from (S) N (circle one) Line of Section
165 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 #: T68
 Field Name: Rantoul
 Producing Formation: Squirrel
 Elevation: Ground: N/A Kelly Bushing: _____
 Total Depth: 802E Plug Back Total Depth: 779.7
 Amount of Surface Pipe Set and Cemented at 21 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 802
 feet depth to 0 w/ 95 sx cmt.
ACTIL WHM 7-28-06

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.: _____

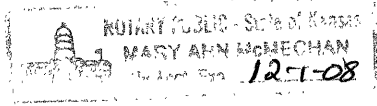
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Inspector Date: 7/14/06
 Subscribed and sworn to before me this 14 day of July
2006
 Notary Public: Mary Ann McMechan
 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

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Operator Name: BG-5 Inc. Lease Name: Trent Burkdoll Well #: T68
 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:	<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>680</td> <td>689</td> </tr> <tr> <td>2nd Squirrel</td> <td>748</td> <td>754</td> </tr> </table>	Name	Top	Datum	1st Squirrel	680	689	2nd Squirrel	748	754
Name	Top	Datum								
1st Squirrel	680	689								
2nd Squirrel	748	754								

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 1/2	13	779.7	50/50	95	
Surface	12.25	8 5/8		21	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	680 689		
2	748 754		

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	5		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) _____

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8-15-1998 10:18PM FROM

CONSOLIDATED OIL WELL SERVICES, INC.
211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 4942
LOCATION Ottawa
FOREMAN Alan Maden

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-2-05	1564	Trent Bankdoll #T-18	13	18	20	Fr
CUSTOMER 56-5			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 3939 Ellis Rd			386	Almad		
CITY Bentou			1104	Ricard		
STATE KS			122	Matman		
ZIP CODE 66079						

JOB TYPE Long string HOLE SIZE 6 3/4 HOLE DEPTH 802 CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 781 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 12.2 DISPLACEMENT PSI 1000 MIX PSI 200 RATE 5 bpm

REMARKS: Established circulation. Mixed & pumped 4x gel followed by 5 bbl water. Mixed & pumped 7 bbl dye marker followed by 108 ex 50/50 pro. 5# kol seal, 6% salt with flo-seal. Circulated dye to surface. Flushed pump clean. Pumped 4 1/2 rubber plug to TD of casing. Circulated cement to surface. Well held 1000 PSI. Set float.

Used Towns water

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	164	765.00
5406	15	MILEAGE pump	164	45.00
5402	781'	Casing footage	164	NC
5407	min	ten miles		260.00
1107	1	flo-seal		42.75
110A	11	kol seal		185.90
1111	324	granulated salt		90.72
1118B	8	Premium gel		53.04
1124	95	50/50 pro		717.25
4404	1	4 1/2 rubber plug		38.00
		Sub		2197.66
		RECEIVED		
		JUL 27 2006		
		6.8%	SALES TAX	76.68
			ESTIMATED TOTAL	2274.34

KCC WICHITA

TITLE WO# 200224

DATE _____

AUTHORIZATION _____