

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 31280  
Name: Birk Petroleum  
Address: 874 12th Rd SW  
City/State/Zip: Burlington, Ks 66839  
Purchaser: Coffeyville Resources  
Operator Contact Person: Brian L. Birk  
Phone: ( 620 ) 364-5875  
Contractor: Name: Edward E. Birk  
License: 8210  
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. \_\_\_\_\_

12/18/2006 12/22/2006 12/27/2006  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 031-22258-0000  
County: Coffey  
NE SE SW Sec. 16 Twp. 22 S. R. 16  East  West  
970 feet from (S) N (circle one) Line of Section  
1970 feet from (W) E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Juanita Wright Well #: 7  
Field Name: LeRoy North  
Producing Formation: Squirrel  
Elevation: Ground: 1007.97 Kelly Bushing: \_\_\_\_\_  
Total Depth: 1042' Plug Back Total Depth: Surface  
Amount of Surface Pipe Set and Cemented at 40' 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 PLA BR 6/18/07  
(Data must be collected from the Reserve Pit)  
Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used Evaporation  
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: Linda K. Birk  
Title: Agent Date: January 19, 2007  
Subscribed and sworn to before me this 19th day of January  
2007  
Notary Public: Laura C. Birk  
Date Commission Expires: January 22, 2008

LAURA C. BIRK  
Notary Public - State of Kansas  
My Appt. Expires 01/22/2008

KCC Office Use ONLY  
N Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
RECEIVED  
MAR 29 2007  
KCC WICHITA

Operator Name: Birk Petroleum Lease Name: Juanita Wright Well #: 7  
 Sec. 16 Twp. 22 S. R. 16  East  West County: Coffey

**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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Squirrel Top 1023' Datum Dry
--	--

CASING RECORD <input type="checkbox"/> New <input checked="" 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	10 5/8	7"		40'	Portland A	20'	2 Sx Calcium

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 checked="" type="checkbox"/> Plug Off Zone	1042/Surface	60/40 Poz Mix	70	240 lbs 4% Gel

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

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 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	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input checked="" type="checkbox"/> Other (Specify) <input type="checkbox"/> Plugged	

RECEIVED  
 MAR 29 2007  
 KCC WICHITA

48-1214033  
 Shop # 620 437-2661  
 Cellular # 620 437-7582  
 Office # 316 685-5908  
 Office Fax # 316-685-5926  
 Shop Address: 3613A Y Road  
 Madison, KS 66860

Hurricane Truck Services, Inc.  
 P.O. Box 782228  
 Wichita, KS 67278-2228

Cement and Acid  
 Service Ticket  
 T 1722

DATE 12-27-06

COUNTY Coffey CITY \_\_\_\_\_

CHARGE TO Bick Petroleum  
 ADDRESS 874 12<sup>th</sup> Rd S.W. CITY Burlington ST Ks. ZIP 66839  
 LEASE & WELL NO. Juanita Wright #7 CONTRACTOR CO. Tools  
 KIND OF JOB P.T.A. SEC. 16 TWP. 22s RNG. 16E  
 DIR. TO LOC. \_\_\_\_\_

OLD  NEW

Quantity	MATERIAL USED	Serv. Charge	
			600.00
70	SKs 60/40 Pozmix cement		518.70
240	lbs Gel 4%		43.20
	BULK CHARGE		
M/L	BULK TRK. MILES		200.00
35	PUMP TRK. MILES		96.25
	PLUGS		
		5.3% SALES TAX	29.78
		TOTAL	1487.93

T.D. 1042' CSG. SET AT \_\_\_\_\_ VOLUME \_\_\_\_\_  
 SIZE HOLE 5 5/8" TBG SET AT \_\_\_\_\_ VOLUME \_\_\_\_\_  
 MAX. PRESS. \_\_\_\_\_ SIZE PIPE \_\_\_\_\_  
 PLUG DEPTH \_\_\_\_\_ PKER DEPTH \_\_\_\_\_  
 PLUG USED 60/40 Pozmix cement w/ 4% Gel TIME FINISHED 12:30 p.m.

REMARKS: Set Cement + Plugs as follows: RECEIVED  
10 SKs at 1040' MAR 29 2007  
10 SKs at 600' KCC WICHITA  
50 SKs at 250' To Surface

EQUIPMENT USED

NAME <u>Heath Watts</u>	UNIT NO. <u>185</u>	NAME <u>Tommy #186 - Dan</u>	UNIT NO. _____
<u>Brad Butler</u>	CEMENTER OR TREATER	<u>Called by Brian</u>	OWNER'S REP.