

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. _____

06/21/2006 6/28/2006 08/01/2006
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 031-22215-0000
County: Coffey
NE SW NE NW Sec. 31 Twp. 22 S. R. 16 East West
1146 feet from S (N) (circle one) Line of Section
1696 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Mathias Well #: 3
Field Name: Crandall
Producing Formation: Squirrel
Elevation: Ground: 1043.48' Kelly Bushing: _____
Total Depth: 1152 Plug Back Total Depth: 1130'
Amount of Surface Pipe Set and Cemented at 41' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 41'
feet depth to Surface w/ 16 sx cmt.

Drilling Fluid Management Plan
(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: Laura C. Birk
Title: Agent Date: 9/21/06
Subscribed and sworn to before me this 21st day of September,
2006.
Notary Public: Linda K. Birk
Date Commission Expires: February 1, 2008

LINDA K. BIRK
Notary Public - State of Kansas
My Appt. Expires 02/01/2008

KCC Office Use ONLY

N Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: Birk Petroleum Lease Name: Mathias Well #: 3
 Sec. 31 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 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 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>Kansas City</td> <td>454</td> <td>584</td> </tr> <tr> <td>Little Osage Lime</td> <td>687</td> <td>710</td> </tr> <tr> <td>Black Jack Creek (black shale)</td> <td>681</td> <td>687</td> </tr> <tr> <td>Pleasington Shale</td> <td>731</td> <td>928</td> </tr> <tr> <td>Squirrel Sand</td> <td>1094.5</td> <td>1108</td> </tr> <tr> <td>Lower Squirrel Sand</td> <td>1138</td> <td>1140</td> </tr> <tr> <td>T.D.</td> <td>1152</td> <td></td> </tr> </table>	Name	Top	Datum	Kansas City	454	584	Little Osage Lime	687	710	Black Jack Creek (black shale)	681	687	Pleasington Shale	731	928	Squirrel Sand	1094.5	1108	Lower Squirrel Sand	1138	1140	T.D.	1152	
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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
Surface	10 5/8"	7"	17	41'	Portland A	16	50 lbs calcium, 1 sx drill mud
Long String	5 5/8"	2 7/8"	n/a	1130'	Thickset	135	K01-Seal, Gel flush

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 (Amount and Kind of Material Used)	Depth
2	1094 - 1100'	Frac: 5000 lbs 20/40 Sand	1130

TUBING RECORD		Size 2 7/8"	Set At 1130'	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 08/03/2006		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. 2 bbls	Gas Mcf	Water Bbls. 10 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____



CONSOLIDATED
OIL WELL
SERVICES, INC.
 AN INFINITY COMPANY

REMIT TO
 Consolidated Oil Well Services, Inc.
 Dept. 1228
 Denver, CO 80256

MAIN OFFICE
 P.O. Box 884
 Chanute, KS 66720
 620/431-9210 • 1-800/467-8676
 FAX 620/431-0012

INVOICE

Invoice # 206609

Invoice Date: 06/30/2006 Terms: Page 1

BIRK, ED
 302 S. 16TH ST.
 BURLINGTON KS 66839
 (620)364-2745

MATHIAS #3
 10217
 06-28-06

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	135.00	14.6500	1977.75
1110A	KOL SEAL (50# BAG)	650.00	.3600	234.00
1118A	S-5 GEL/ BENTONITE (50#)	200.00	.1400	28.00
4402	2 1/2" RUBBER PLUG	1.00	18.0000	18.00
Description		Hours	Unit Price	Total
463	CEMENT PUMP	1.00	800.00	800.00
463	EQUIPMENT MILEAGE (ONE WAY)	45.00	3.15	141.75
491	TON MILEAGE DELIVERY	337.50	1.05	354.38

RECEIVED
SEP 22 2006
KCC WICHITA

Parts:	2257.75	Freight:	.00	Tax:	119.65	AR	3673.53
Labor:	.00	Misc:	.00	Total:	3673.53		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK
 P.O. Box 1453 74005
 918/338-0808

EUREKA, Ks
 820 E. 7th 67045
 620/583-7664

OTTAWA, Ks
 2631 So. Eisenhower Ave. 66067
 785/242-4044

GILLETTE, WY
 300 Enterprise Avenue 82716
 307/686-4914

THAYER, Ks
 8655 Dorn Road 66776
 620/839-5269

CONSOLIDATED OIL WELL SERVICES, INC.

P.O. BOX 884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER 10217

LOCATION Eureka

FOREMAN Brad Butler

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-28-06	1519	Mathias #3	31	22s	16E	Coffey
CUSTOMER Birk Petroleum			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 874 12th Rd.			463	Alan		
CITY Burlington			491	Dusty		
STATE Ks.		ZIP CODE				

JOB TYPE Logging HOLE SIZE 5 7/8" HOLE DEPTH 1152' CASING SIZE & WEIGHT _____
 CASING DEPTH 1130' DRILL PIPE _____ TUBING 2 7/8" - 10 Rd OTHER _____
 SLURRY WEIGHT 13 2/16 SLURRY VOL 40 Bbl. WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 6 1/2 Bbls DISPLACEMENT PSI 500 PSI 1000 close in RATE _____

REMARKS: Safety Meeting: Rig up to 2 7/8" Tubing. Break circulation with fresh water. Pumped 10 Bbl. Gel Flush. Pumped 20 Bbl. water Spacer. Mixed 135 sks. Thick Set cement w/ 5 # P/SK of KOI-SEAL @ 13 2/16 P/SK. Shut down - wash out pump lines - Drop Plug - Displace Plug with 6 1/2 Bbls water. Final pumping @ 500 PSI. Landed Plug @ 1000 PSI. Close Tubing in with 1000 PSI. Good cement returns to surface with 7 Bbl. slurry. Job complete - Tear down.

"Thank you"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		
5406	45	MILEAGE		
		RECEIVED SEP 22 2006	800.00	800.00
1126 A	135 sks.	Thick Set cement	3.15	141.75
1110 A	650 lbs.	KOI-SEAL 5 # P/SK	14.65	19,77.75
			.36	234.00
1118 A	200 lbs.	Gel Flush	.14	28.00
5407A.40	7.5 Ton	45 miles - Bulk Truck (B'ville)	1.05	354.38
4402	1	2 7/8" Top Rubber Plug	18.00	18.00
		Sub Total		3553.88
		SALES TAX		119.45
		ESTIMATED TOTAL		3673.53

AUTHORIZATION Witnessed by Ed Birk

206609 / 1200653
TITLE owner

DATE _____