

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm ACO-1
October 2008
Form Must Be TypedWELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASEOPERATOR: License # 32145Name: Tom Baugher *BY B OIL RECOVERY SP*Address 1: 27914NE2250RD

Address 2: _____

City: Greeley State: KS Zip: 66033 + _____Contact Person: Tom BaugherPhone: (785) 867-2413CONTRACTOR: License # 33734Name: hat drilling, llc

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

☐ New Well ☐ Re-Entry ☐ Workover☒ Oil ☐ SWD ☐ SIOW☐ Gas ☐ ENHR ☐ SIGW☐ CM (Coal Bed Methane) ☐ Temp. Abd.☐ 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. ☐ Conv. to SWD☐ Plug Back: _____ Plug Back Total Depth☐ Commingled _____ Docket No.: _____☐ Dual Completion _____ Docket No.: _____☐ Other (SWD or Enhr.?) _____ Docket No.: _____11-4-08 11-05-08 11-5-08Spud Date or
Recompletion Date Date Reached TD Completion Date or
Recompletion DateAPI No. 15 - 003-24595-000

Spot Description: _____

nw .nw .nw .nw Sec. 16 Twp. 21 S. R. 20 ☒ East ☐ West5115 Feet from ☐ North / ☒ South Line of Section5051 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SWCounty: andersonLease Name: Kirk Well #: B-2Field Name: bushcityshoestringProducing Formation: squirrelElevation: Ground: n/a 1102 Kelly Bushing: _____Total Depth: 845 Plug Back Total Depth: 840Amount of Surface Pipe Set and Cemented at: 20 FeetMultiple 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 Alt II NR 3-6-09
(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: Tom Baugher

Title: _____ Date: _____

Subscribed and sworn to before me this 29th day of January20 09Notary Public: Dena McDanielDate Commission Expires: 04-26-2009Dena McDaniel
Notary Public - State of KansasMy comm. expires 04-26-2009

KCC Office Use ONLY

☒ Letter of Confidentiality ReceivedIf Denied, Yes ☐ Date: _____☒ Wireline Log Received☐ Geologist Report Received **RECEIVED**
KANSAS CORPORATION COMMISSION☐ UIC Distribution**FEB 06 2009****CONSERVATION DIVISION**
WICHITA, KS

Side Two

Operator Name: Tom Baugher Lease Name: Kirk Well #: B-2
 Sec. 16 Twp. 21 S. R. 20 ☒ East ☐ West County: anderson

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 ☐ Yes ☒ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☒ Yes ☐ No

Electric Log Run ☒ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

GAMMA RAY/NEUTRON/

CCCL

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum

see Attach Logs

KANSAS CORPORATION COMMISSION

FEB 27 2009

RECEIVED

CASING RECORD ☐ New ☒ 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
<u>Surf.</u>	12.25	8.625		20.0	portland	6	
<u>Prod.</u>	5.625	2.875		840	portland	128	2% gel.

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	775.0-785.0 21perfs		
2	793.0-796.0 7perfs		
TUBING RECORD: Size: <u>2.875</u> Set At: <u>840.0</u> Packer At:		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>n/a</u>		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. <u>n/a</u>	Gas Mcf <u>0</u>	Water Bbls. Gas-Oil Ratio Gravity <u>n/a</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)		METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____		PRODUCTION INTERVAL: _____ _____
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

TICKET NUMBER 19843
LOCATION Dt Fawc
FOREMAN Alan Mader

DATE		CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-5-08		3160	Kink B-2	16	21	20	AL
CUSTOMER B+B Oil Recovery							
MAILING ADDRESS 27914 NE2250 Rd							
CITY Greeley		STATE KS	ZIP CODE 66033	TRUCK #	DRIVER	TRUCK #	DRIVER
				516	Alam M		
				368	B:112		
				370	Ken H		
				303	Gerid J		
JOB TYPE	long string	HOLE SIZE	5 7/8	HOLE DEPTH	845	CASING SIZE & WEIGHT	2 7/8
CASING DEPTH	840	DRILL PIPE		TUBING		OTHER	
SLURRY WEIGHT		SLURRY VOL		WATER gal/sk		CEMENT LEFT IN CASING	195
DISPLACEMENT		DISPLACEMENT PSI		MIX PSI		RATE	46 bpm
REMARKS: Checked casing depth. Mixed & pumped 100# gel followed by 128 gr 50150 ppz 2% gel. Circulated cement. Flushed pump. Pumped plug to casing TP. Well held 800 PSI. Closed valves.							

Adam Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5901	1	PUMP CHARGE		925.
5906	25	MILEAGE		9125
5402	840'	casing footage		
5407	mileage	for mileage		315.00
3502C	2	80 val		200.00
1118B	315	sel		53.55
1184	125 sk	50/150 potz		1218.75
4402	1	2 1/2 plug		23.00
				2826.80
RECEIVED KANSAS CORPORATION COMMISSION				
FEB 16 2009				
CONSERVATION DIVISION WICHITA, KS				
G. B. J.				Sales Tax \$205

Ravin 3737

AUTHORIZATION

TITLE

DATE _____

SALES TAX	88.08
ESTIMATED TOTAL	2914.6