

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31280

Name: Birk Petroleum

Address 1: 874 12th Rd SW

Address 2: _____

City: Burlington State: Ks Zip: 66839 + _____

Contact Person: Brian L. Birk

Phone: (620) 364-1311 - office

CONTRACTOR: License # 31280

Name: Birk Petroleum

Wellsite Geologist: None

Purchaser: Coffeyville Resources

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.: _____

05/19/2009 05/20/2009 05/21/2009

Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date

API No. 15 - 031-22428-0000

Spot Description: _____

NW_NE_SE_NW Sec. 22 Twp. 22 S. R. 16 East West

3955 Feet from North / South Line of Section

3263 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Coffey

Lease Name: Klaus Well #: 28

Field Name: Neosho Falls-LeRoy

Producing Formation: Squirrel Sand

Elevation: Ground: 1033 est. Kelly Bushing: _____

Total Depth: 1022 Plug Back Total Depth: 1022

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: 1014

feet depth to: surface w/ 130

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: pump out

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

ATZ-DG-^{sx cmf} 7/11/09

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: 7/14/09

Subscribed and sworn to before me this 14th day of July

20 09

Notary Public: Laura C. Birk

Date Commission Expires: January 22, 2012

KCC Office Use ONLY

N Letter of Confidentiality Received

If Denied, Yes Date: _____

_____ Wireline Log Received

_____ Geologist Report Received

_____ UIC Distribution

KANSAS CORPORATION COMMISSION

 LAURA C. BIRK
Notary Public - State of Kansas
My Appt. Expires 01/22/2012

JUL 16 2009
RECEIVED

Operator Name: Birk Petroleum Lease Name: Klaus Well #: 28
 Sec. 22 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 (Attach Additional Sheets) 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 (Submit Copy) List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum See attached drill log
--	--

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	9 7/8"	7"		40'	Portland	16	Calcium
Long String	5 7/8"	2 7/8"		1014'	Portland	130	

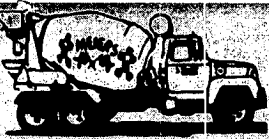
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

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
None	Open hole completion 1014-1022'	Frac w/42 sx sand	1014-1022

KANSAS CORPORATION COMMISSION
JUL 16 2009
RECEIVED

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. <u>6/12/2009</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>8</u>	Gas Mcf <u>5</u>	Water Bbls. _____ Gas-Oil Ratio _____ Gravity _____

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
--	--	--



Meier's Ready Mix, Inc.

Plant
(785) 233-9900

P.O. Box 8477 • 1105 N.W. Lower Silver Lk. Rd. • Topeka, Kansas 66608
FAX # 233-9947

Office
(785) 233-2423

PLANT	TIME	DATE	ACCOUNT	TRUCK	DRIVER	TICKET
		5/21/09				
CUSTOMER NAME				DELIVERY ADDRESS		
Bank Oil				Klaus #28		
PURCHASE ORDER				ORDER #	TAX	SLUMP

LOAD QTY	PRODUCT	DESCRIPTION	ORDERED	DELIVERED	UNIT PRICE	AMOUNT
7.52			(130 bag) 94 lb	12,220 ^{lb}	Cement	
				910	Water	

check 10793

LEAVE PLANT	ARRIVE JOB SITE	START DISCHARGE	FINISH DISCHARGE	ARRIVE PLANT

DRIVER Note here if water has been added and how much.

NOTE

We are not responsible for concrete freezing after placement.

273602

IMPORTANT

We cannot be held responsible for damage caused by our trucks when delivering material beyond the curb-line. Not responsible for quality of concrete if water is added by purchaser.

SUBTOTAL

TAX

TOTAL

PREVIOUS TOTAL

GRAND TOTAL

977.60
51.81
1029.41

Caution:
FRESH CONCRETE
Body or eye contact with fresh (moist) concrete should be avoided because it contains alkali and is caustic.

Received By _____

Meier's Ready Mix

12220
1029.41
12220
Cord

KANSAS CORPORATION COMMISSION

JUL 16 2009

RECEIVED

