

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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OCT 02 2009

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM KCC WICHITA
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 Skid Rig
(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.: _____
09/11/2009 09/23/2009 09/23/2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 207-27505-00-00
Spot Description: _____
NW NW SW NE Sec. 29 Twp. 23 S. R. 15 East West
3660 Feet from North / South Line of Section
2530 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Woodson
Lease Name: Bowers Well #: SWD1
Field Name: Winterschied
Producing Formation: N/A
Elevation: Ground: 1055 est. Kelly Bushing: _____
Total Depth: 380 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: 350
feet depth to: surface w/ 100 *RH-Dlg - 10/5/09* ^{sx cm}

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: Laura C. Birk
Title: Agent Date: 9/29/09
Subscribed and sworn to before me this 29th day of September
20 09.
Notary Public: Laura Birk
Date Commission Expires: January 22, 2012

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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

Operator Name: Birk Petroleum Lease Name: Bowers Well #: SWD1
 Sec. 29 Twp. 23 S. R. 15 East West County: Woodson

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 checked="" type="checkbox"/> Sample Name Top Datum <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED OCT 02 2009 KCC WICHITA </div>
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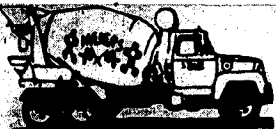
CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9 7/8"	7"		40'	Portland	15	Calcium

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing <input checked="" type="checkbox"/> Plug Back TD _____ Plug Off Zone	surface - 340'	Portland	100	

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: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	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: _____ _____
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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

DATE 9/23/09	ACCOUNT	TRUCK	DRIVER	TICKET
CUSTOMER NAME Berk Oil			DELIVERY ADDRESS Billie's SUD1 Pick up at Plant	
PURCHASE ORDER	ORDER #	TAX	SLUMP	

AD QTY	PRODUCT	DESCRIPTION	ORDERED	DELIVERED	UNIT PRICE	AMOUNT
		100 Bag Cement	4700/2			
					9400	
					700 gallon Water	

LEAVE PLANT	ARRIVE JOB SITE	START DISCHARGE	FINISH DISCHARGE	ARRIVE PLANT
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DRIVER Note here if water has been added and how much.

NOTE
We are not responsible for concrete freezing after placement.

283440

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 752.00
TAX 39.85
TOTAL 791.85
PREVIOUS TOTAL
GRAND TOTAL 791.85

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

Received By _____

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