

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

OPERATOR: License # 31473
Name: BG-5 Inc.
Address 1: 3939 Ellis Road
Address 2: _____
City: Rantoul State: KS Zip: 66079 + _____
Contact Person: Jimmie Patton
Phone: (785) 241-4016
CONTRACTOR: License # 6142
Name: Town Oil Company
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.: 1/21/10
1/20/10 1/21/10 Not Completed
Spud Date or Date Reached TD Completion Date or Recompletion Date
Recompletion Date per oper-rec-log

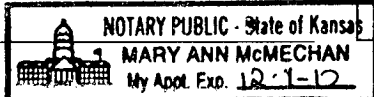
API No. 15 - 059-25480-00-00
Spot Description: _____
NE NE NENW Sec. 13 Twp. 18 S. R. 20 East West
80 Feet from North / South Line of Section
2570 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Franklin
Lease Name: Flora Well #: FR1
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: N/A 1054 Kelly Bushing: _____
Total Depth: 780 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 744
feet depth to: 0 w/ 108 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: n/a ppm Fluid volume: _____ bbls
Dewatering method used: _____
Location of fluid disposal if hauled offsite:
Operator Name: n/a
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: [Signature]
Title: President Date: 10-8-10
Subscribed and sworn to before me this 8 day of October,
20 10.
Notary Public: Mary Ann McMechan
Date Commission Expires: 12-1-12



KCC Office Use ONLY
N Letter of Confidentiality Received
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution
Alt 2 - Dig - 10/15/10 **RECEIVED**
OCT 14 2010

KCC WICHITA

CONSOLIDATED
Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

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

INVOICE

Invoice # 232773
Invoice Date: 01/25/2010 Terms: Page 1

BG-5 INC.
3939 ELLIS ROAD
RANTOUL KS 66079
(785) 869-3860

FLORA #F-1
22520
NW 13-18-20 FR
01/21/2010

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	108.00	9.2500	999.00
1118B	PREMIUM GEL / BENTONITE	287.00	.1600	45.92
1107A	PHENOSEAL (M) 40# BAG)	56.00	1.0800	60.48
4402	2 1/2" RUBBER PLUG	1.00	22.0000	22.00
	Description	Hours	Unit Price	Total
368	CEMENT PUMP	1.00	870.00	870.00
368	EQUIPMENT MILEAGE (ONE WAY)	15.00	3.45	51.75
368	CASING FOOTAGE	744.00	.00	.00
369	80 BBL VACUUM TRUCK (CEMENT)	2.00	94.00	188.00
510	MIN. BULK DELIVERY	1.00	296.00	296.00

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Parts: 1127.40 Freight: .00 Tax: 76.66 AR
Labor: .00 Misc: .00 Total: 2609.81
Subt: .00 Supplies: .00 Change: .00

Signed _____ Date _____

BARTLESVILLE, OK 918/338-0808
ELDORADO, KS 316/322-7022
EUREKA, KS 620/583-7664
GILLETTE, WY 307/686-4914
MCALISTER, OK 918/426-7667
OTTAWA, KS 785/242-4044
THAYER, KS 620/839-5269
WORLAND, WY 307/347-4577

184, Chanute, KS 66720
31-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1/21/10	1564	Flora # F-1	NW 13	18	20	FR
CUSTOMER			TRUCK #			
B G-5 Inc			506	Fred		
MAILING ADDRESS			368	Ken		
3939 Ellis Rd			369	Chuck		
CITY			510	Arlen		
Rantoul						
STATE						
KS						
ZIP CODE						
66079						

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 750' CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 744' DRILL PIPE _____ TUBING _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING 2 1/2 Plug
 DISPLACEMENT 4.3 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish circulation. Mix + Pump 100# Premium G. & L. Flush. Mix + Pump 111 SKS 50/50 Poz Mix Cement 2% Gel 1/2# Pheno Seal per sack. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber Plug to casing TD. Pressure to 800# PSI. Release pressure to set + float valve. Shut in casing.

TOS Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		870.00
5406	15 mi	MILEAGE Pump Truck		517.50
5402	744'	Casing Footage		N/C
5407	Minimum	Ton Miles		296.00
55029	2 hrs	80 BBL Vac Truck		188.00
1124	108 SKS	50/50 Poz Mix Cement		999.00
1118B	287	Premium Gel		45.92
1107A	56 #	Pheno Seal		60.48
4402	1	2 1/2" Rubber Plug		22.00

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WO 232773

6.8% SALES TAX 76.66
ESTIMATED TOTAL 2609.87

Ravin 3737

AUTHORIZATION Scott Burkholder was here. TITLE _____

DATE _____

Operator Name: BG-5 Inc. Lease Name: Flora Well #: FR1
 Sec. 13 Twp. 18 S. R. 20 East West County: Franklin

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 checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: <u>GammaRay/Neutron per oper. - KCC-Dlg</u>	<input checked="" 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>2nd Squirrel</td> <td>700</td> <td>708</td> </tr> <tr> <td>3rd Squirrel</td> <td>715</td> <td>721</td> </tr> </table>	Name	Top	Datum	2nd Squirrel	700	708	3rd Squirrel	715	721
Name	Top	Datum								
2nd Squirrel	700	708								
3rd Squirrel	715	721								

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	12	6 1/4		20	Portland	5	
Casing	6 7/8	4 1/2		744	50/50 Pos/	108	Bentonite Phe

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

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 Perfs	700-708	n/a	
2	715-721		
			RECEIVED OCT 14 2010 KCC WICHITA

TUBING RECORD: <u>n/a</u>	Size: _____ Set At: _____ Packer At: _____	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 2/15/10	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. <u>1</u>	Gas Mcf <u>n/a</u>	Water Bbls. <u>2</u>	Gas-Oil Ratio	Gravity <u>29</u>
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input checked="" type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>24 hours</u>
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