

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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: Kansas Zip: 66839 + _____
Contact Person: Brian L. Birk
Phone: (620) 364-1311 Office
CONTRACTOR: License # 31280
Name: Birk Petroleum
Wellsite Geologist: NA
Purchaser: Coffeyville Resources

RECEIVED

MAY 06 2011

KCC WICHITA

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., etc.): NA

If Workover/Re-entry: Old Well Info as follows:

Operator: NA
Well Name: NA

Original Comp. Date: NA Original Total Depth: NA

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
 Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

11/11/10	11/15/10	11/15/10
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 031-22652-00-00

Spot Description:

NW NE NE NW Sec. 23 Twp. 22 S. R. 16 East West
5,135 Feet from North / South Line of Section
3,170 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Coffey

Lease Name: Gilbert Well #: WSW

Field Name: Neosho Falls-LeRoy

Producing Formation: Kansas City

Elevation: Ground: 1033 Kelly Bushing: _____

Total Depth: 575' Plug Back Total Depth: 575

Amount of Surface Pipe Set and Cemented at: 60' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: NA Feet

If Alternate II completion, cement circulated from: 433'
feet depth to: surface w/ 60 sx cmt.

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 #: _____

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

County: _____ Permit #: _____

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.

AFFIDAVIT

I am the affiant and I hereby certify that 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: Agent Date: May 4, 2011

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Dlg Date: 5/11/11

Operator Name: Birk Petroleum Lease Name: Gilbert Well #: WSW
 Sec. 23 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 complete copy of all Electric Wire-line 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Kansas City Lime 433 <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED MAY 06 2011 KCC WICHITA </div>
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CASING RECORD <input checked="" 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 1/4"	8 5/8"	NA	60'	Portland	16	Calcium
Longstring	6 3/4"	4 1/2"	NA	433'	Portland	60	NA

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
NA	Open Hole Completion 433'-575'		

TUBING RECORD:	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. 12/09/10	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.	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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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802 N. Industrial Rd.
P.O. Box 664
Iola, Kansas 66749
Phone: (620) 365-5588

Payless Concrete Products, Inc.



CONDITIONS
Concrete to be delivered to the nearest accessible point under truck's own power. Due to delivery at owner's or intermediary's direction, seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allotted time for unloading trucks is 5 minutes per year. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for strength test when water is added at customer's request.
NOTICE TO OWNER
Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filing of a mechanic's lien on the property which is the subject of this contract.

8-10-70

SOLD TO:

B111/15
B & B COOPERATIVE VENTURES
900 W. FOURTH ST.

B111/15
B & B COOP. VENTURES/BIK OIL
58 W TO F ST IN LEROY N OUT OF
TOWN TO 7TH RD SE E 1/2 MI
S 50 WELL #BILBERT WATER WELL
LEROY, KS

LEROY, MO
66879

DATE	FORMULA	LOAD SIZE	YARDS ORDERED	% CAL	DRIVER/TRUCK	% AIR	PLANT/TRANSACTION
01:21:00p	WELL	6.00 yd	6.00 yd	0.00	JE 32	0.00	
DATE	LOAD#	YARDS DEL	BATCH#	WATER TRIM	SLUMP	TRUCK NUMBER	
11-15-10	1	6.00 yd	14974		4.00 in	28014	

WARNING
IRRITATING TO THE SKIN AND EYES
In case of prolonged contact with skin, wash with water. In case of contact with eyes, flush with water. If irritation persists, get medical attention.
CONCRETE IS A PERISHABLE COMMODITY and BECOMES the PROPERTY of the PURCHASER UPON LEAVING THE PLANT. ANY CHANGES OR CANCELLATION of ORIGINAL INSTRUCTIONS MUST be MADE IN THE OFFICE BEFORE LOADING STARTS.
Customer promises to pay all costs, including reasonable attorneys' fees, incurred in collecting on delinquent accounts.
All accounts not paid within 30 days of delivery will bear interest at the rate of 24% per annum.
Not Responsible for Reactive Aggregate or Color Quality. No Claim Allowed Unless Made at Time Material is Delivered.
A \$25 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks.
Excess Delay Time Charged @ \$50/HR.

PROPERTY DAMAGE RELEASE
(TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE)
Dear Customer-The driver of this truck in presenting this RELEASE to you for your signature is of the opinion that the size and weight of his truck may possibly cause damage to the premises and/or adjacent property if it places the material in this load where you desire it. It is our wish to help you in every way that we can, but in order to do this the driver is requesting that you sign this RELEASE, relieving him and the company from any and all liability for damage that may occur to the premises and/or adjacent property, buildings, sidewalks, driveways, curbs, etc., by the delivery of this material, and that you also agree to help him remove mud from the wheels of his vehicle so that he will not litter the public street. Further, as additional consideration, the undersigned agrees to indemnify and hold harmless the driver of this truck and this supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.
SIGNED
X _____

Excessive Water is Detrimental to Concrete Performance
H₂O Added By Request/Authorized By: _____
GAL X _____
WEIGHMASTER

NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE
LOAD RECEIVED BY:
x *Darin Birk*

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	TENDED PRICE
6.00	WELL	WELL (10 SACKS PER UNIT)	76.00	456.00
2.00	TRUCKING	TRUCKING CHARGE	50.00	100.00

P.C. CK# 6248

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED
305	245		1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER	
LEFT PLANT	ARRIVED JOB	START UNLOADING		TIME DUE
242	220		6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME		DELAY TIME

SubTotal \$ 556.00
Tax % 6.300 35.03
Total \$ 591.03
Order \$ 591.03
ADDITIONAL CHARGE 1 _____
ADDITIONAL CHARGE 2 _____
GRAND TOTAL ▶

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