

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

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

ORIGINAL

OPERATOR: License # 8210
Name: Edward E Birk
Address 1: 302 South 16th
Address 2: _____
City: Burlington State: Ks Zip: 66839 + _____
Contact Person: Edward E Birk
Phone: (620) 364-1311
CONTRACTOR: License # 8210
Name: Edward E Birk
Wellsite Geologist: None
Purchaser: Coffayville Resources

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.): _____

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
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____
11/09/2011 11/15/2011 11/15/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 031-23076-00-00
Spot Description: _____
NE SE SW SE Sec. 33 Twp. 21 S. R. 15 East West
340 Feet from North / South Line of Section
1,475 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Coffey
Lease Name: Birkbeck Well #: 4
Field Name: Burlington
Producing Formation: Simpson
Elevation: Ground: 1070 est. Kelly Bushing: 1077
Total Depth: 1943 Plug Back Total Depth: 1941
Amount of Surface Pipe Set and Cemented at: 200 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1941
feet depth to: 2 w/ _____ 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 #: _____

RECEIVED
DEC 30 2011

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: Saura Burt
Title: Agent Date: 12/28/2011

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: Dg Date: 1/3/12

Operator Name: Edward E Birk Lease Name: Birkbeck Well #: 4
 Sec. 33 Twp. 21 S. R. 15 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 checked="" type="checkbox"/> Yes <input 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: Gamma Ray/Neutron	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Base of Kansas City</td> <td>870</td> <td></td> </tr> <tr> <td>Upper Squirrel Sand</td> <td>1191</td> <td></td> </tr> <tr> <td>Mississippian</td> <td>1548</td> <td></td> </tr> <tr> <td>Simpson Sand</td> <td>1942</td> <td></td> </tr> </table>	Name	Top	Datum	Base of Kansas City	870		Upper Squirrel Sand	1191		Mississippian	1548		Simpson Sand	1942	
Name	Top	Datum														
Base of Kansas City	870															
Upper Squirrel Sand	1191															
Mississippian	1548															
Simpson Sand	1942															

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 Casing	12 1/4	8 5/8"		200'	Portland	110	Calcium
Long String	6 3/4"	4 1/2"		1941'	60/40 Pozmix	50	2% gel, 1% Calcium

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
	Open hole 1941-1943'		

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. pending		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 Bbbs.	Gas Mcf	Water Bbbs. 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, I.A.C.

CONDITIONS
Concrete to be delivered to the nearest accessible point over passable road, 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 yard. 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.

SOLD TO:

BB001
B & B COOPERATIVE VENTURES
900 S. FOURTH ST.

BURLINGTON KS
66839

SHIP TO:

B111/10
B & B COOP. VENTURES/BIRK OIL
58 HWY TO 75 N 6 MI TO 10TH
W 1 MI TO LYNX W SD TANKS
LEASE BIRKBECK WELL # 4
BURLINGTON, KS 66839

TIME	FORMULA	LOAD SIZE	YARDS ORDERED		DRIVER/TRUCK	PLANT/TRANSACTION #	
02:52:10p	WELL	11.00 yd	11.00 yd	% CAL 0.00	WK 35	% AIR 0.00	
DATE		LOAD #	YARDS DEL.	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER
11-10-11	To Date Today	1 1	11.00 yd 11.00 yd	19165	6/yd -70.0	4.00 in	30683

**WARNING
IRRITATING TO THE SKIN AND EYES**

Contains Portland Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of Contact With Skin or Eyes, Flush Thoroughly With Water. If Irritation Persists, Get Medical Attention. KEEP CHILDREN AWAY.

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 TELEPHONED to the OFFICE BEFORE LOADING STARTS.

The undersigned promises to pay all costs, including reasonable attorneys' fees, incurred in collecting any sums owed.

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 the 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 this supplier from any responsibility from any 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

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
11.00	WELL	WELL (10 SACKS PER UNIT)	76.00	836.00
3.00	TRUCKING	TRUCKING CHARGE	50.00	150.00

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED
			1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER 6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	
	LEFT PLANT	ARRIVED JOB		TIME DUE
	3:07	3:52		
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME		DELAY TIME

SubTotal \$	986.00
Tax % 6.300	62.12
Total \$	1048.12
Order \$	1048.12
ADDITIONAL CHARGE 1	
ADDITIONAL CHARGE 2	
GRAND TOTAL	

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DEC 30 2011
KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 33407
LOCATION Eureka
FOREMAN Steve Reed

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

FIELD TICKET & TREATMENT REPORT

CEMENT APT # 15-031-23076

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-15-11	1519	Birkeck #4	33	R1S	15E	Coffey
CUSTOMER Edward E. Birk			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 302 S. 16 th ST.			485	Alan M		
CITY Burlington			667	Allen B		
STATE KS						
ZIP CODE 66839						

JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 1943' CASING SIZE & WEIGHT 4 1/2 11.60
 CASING DEPTH 1941' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 136# SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 30.25 bbls DISPLACEMENT PSI 400* MIX PSI Bump plug 1000* RATE _____

REMARKS: Safety Meeting. Rig up to 4 1/2 casing. Pump 5 bbls Fresh water. Pressure up. Set Packer shoe 1100'. Pump 5 bbls Fresh water. Mix 50 sks 60/40 po2 mix cement w/ 2% Gel, 1% Cacl2 AT 12-6# per gal. Wash out pump & line. Release plug. Displace with 30.25 bbls Fresh water. Final pumping Pressure 400' Bump Plug 1000'. Wait 2 min Release Pressure. Plug held.
Job complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	50	MILEAGE	4.00	200.00
1131	50 SKS	60/40 po2 mix Cement	11.95	597.50
1118B	85#	Gel 2%	.20	12.00
1102	40#	Cacl2 1%	.70	28.00
5407		Ton mileage Bulk Truck	m/c	330.00
4251	1	4 1/2 x 6 3/4 Packer Shoe (Type A)	1323.00	1323.00
4129	3	4 1/2 Centralizer	42.00	126.00
4404	1	4 1/2 Top Rubber Plug	45.00	45.00
			RECEIVED	
			DEC 30 2011	
			KCC WICHITA	
			SubTotal	3641.50
			SALES TAX	134.60
			ESTIMATED TOTAL	3776.10

Ravin 3737

AUTHORIZATION _____

TITLE Taxi Pusher

DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form