



KANSAS CORPORATION COMMISSION 1072032  
OIL & GAS CONSERVATION DIVISION

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 # 31473  
Name: BG-5, Inc.  
Address 1: 3939 ELLIS RD  
Address 2: \_\_\_\_\_  
City: RANTOUL State: KS Zip: 66079 + 9090  
Contact Person: Scott Burkdoll  
Phone: ( 785 ) 869-3860  
CONTRACTOR: License # 31473  
Name: BG-5, Inc.  
Wellsite Geologist: NA  
Purchaser: \_\_\_\_\_

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SLOW  
 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 #: \_\_\_\_\_

11/29/2011	12/1/2011	1/12/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-059-25796-00-00  
Spot Description: \_\_\_\_\_  
NW NW NE SW Sec. 1 Twp. 16 S. R. 20  East  West  
2488 Feet from  North /  South Line of Section  
3844 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Franklin  
Lease Name: Ferguson Well #: 10  
Field Name: Leloup  
Producing Formation: Bartlesville  
Elevation: Ground: 985 Kelly Bushing: 0  
Total Depth: 798 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 43 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 0  
feet depth to: 43 w/ 11 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 1500 ppm Fluid volume: 80 bbls  
Dewatering method used: Evaporated  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Permit #: \_\_\_\_\_

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.

Submitted Electronically

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: Deanna Gerrits Date: 01/25/2012



1072032

Operator Name: BG-5, Inc. Lease Name: Ferguson Well #: 10  
 Sec. 1 Twp. 16 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 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:  GammaRay/Nuetron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum GammaRay
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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	9	7	10	43	Portland	11	50/50 POZ
Completion	5.6250	2.8750	8	775	Portland	115	50/50 POZ

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ 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
3	694.5-704.5	2" DML RTG	10

<b>TUBING RECORD:</b>	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. _____	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 _____

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-3)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Franklin County, KS  
Well: Ferguson # 10  
Lease Owner: BG-5

Town Oilfield Service, Inc. commenced Spudding 11/29/2011:  
(913) 837-8400

WELL LOG

Thickness of Strata	Formation	Total Depth
35	Soil/Clay	35
18	Clay	53
5	Lime	58
4	Shale	62
16	Lime	78
7	Shale	85
10	Lime	95
8	Shale	103
17	Lime	120
40	Shale	160
25	Lime	185
72	Shale	257
27	Lime	284
9	Shale	293
5	Lime	298
29	Shale	327
6	Lime	333
12	Shale	345
1	Lime	346
15	Shale	361
8	Lime	369
2	Shale	371
13	Lime	384
11	Shale	395
22	Lime	417
3	Shale	420
12	Lime	432
155	Shale	587
3	Lime	590
2	Sand	592
12	Shale	604
6	Lime	610
13	Shale	623
2	Lime	625
5	Shale	630
15	Lime	645
7	Shale	652
3	Lime	655
9	Shale	664
4	Lime	668





**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 33132

LOCATION Ottawa KS

FOREMAN Fred Mader

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12/11	1564	Ferguson # 10	NW 1	16	20	FR
CUSTOMER B G S Inc.						
MAILING ADDRESS 3939 Ellis Rd			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Rantoul			500	FREMAO	Safety Mtg	
STATE KS			368	ARLMCD	ARMI	
ZIP CODE 66079			369	CASHEN	CK	
			510	KEICAR	KC	

JOB TYPE Long string HOLE SIZE 6 3/4 HOLE DEPTH 798 CASING SIZE & WEIGHT 4 1/2"  
 CASING DEPTH 779 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 4 1/2" Plug  
 DISPLACEMENT 12.3 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 BPM

REMARKS: Establish pump rate. Mix + Pump 100# Premium Gel Flush.  
Mix + Pump 80 BBL Tall tale dye. Mix + Pump 115 sks  
50/50 Por Mix Cement 2% Gel 1/2" Pheno Seal/sk. Flush  
pump & lines clean. Displace 4 1/2" Rubber plug to casing  
TD w/ 12.3 BBLs Fresh water. Pressure to 600# PSI  
Release pressure to set float valve. Shut in casing.

TOS Drilling. (Chad)

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1030 <sup>00</sup>
5406	15 mi	MILEAGE	368	60 <sup>00</sup>
5402	775'	Casing footage		N/C
5407	Minimum	Ten Miles	510	350 <sup>00</sup>
5502C	1 1/2 hrs	80" BBL Vac Truck	369	135 <sup>00</sup>
1124	115 sks	50/50 Por Mix Cement		1259 <sup>20</sup>
118B	294#	Premium Gel		61 <sup>24</sup>
1107A	58#	Pheno Seal		74 <sup>82</sup>
440H	1	4 1/2 Rubber Plug		45 <sup>00</sup>
			7.67%	SALES TAX
				ESTIMATED
				TOTAL
				112 <sup>39</sup>
				3128 <sup>20</sup>

**SCANNED**

246267

AUTHORIZATION [Signature] TITLE \_\_\_\_\_ 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.