



KANSAS CORPORATION COMMISSION 1096973
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 # 31280
Name: Birk, Brian L. dba Birk Petroleum
Address 1: 874 12TH RD SW
Address 2: _____
City: BURLINGTON State: KS Zip: 66839 + 9255
Contact Person: Brian L Birk
Phone: (620) 364-5875
CONTRACTOR: License # 31280
Name: Birk, Brian L. dba Birk Petroleum
Wellsite Geologist: None
Purchaser: Coffeyville 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 #: _____

09/11/2012 09/12/2012 09/12/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-031-23372-00-00

Spot Description: _____

SW NW NE NE Sec. 29 Twp. 22 S. R. 17 East West
4785 Feet from North / South Line of Section
1155 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Coffey

Lease Name: Hazen A Well #: I-2

Field Name: Parmely

Producing Formation: Squirrel

Elevation: Ground: 1093 Kelly Bushing: 1093

Total Depth: 1027 Plug Back Total Depth: 1027

Amount of Surface Pipe Set and Cemented at: 41 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 1012

feet depth to: 0 w/ 120 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 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 Garrison Date: 10/17/2012



1096973

Operator Name: Birk, Brian L. dba Birk Petroleum Lease Name: Hazen A Well #: 1-2
 Sec. 29 Twp. 22 S. R. 17 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 type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" 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>Squirrel Sand</td> <td>1015</td> <td>+69</td> </tr> </table>	Name	Top	Datum	Squirrel Sand	1015	+69
Name	Top	Datum					
Squirrel Sand	1015	+69					

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	9.875	7.0	17	41	Portland	11	Calcium
Long string	6.125	2.875	6.5	1012	Portland	120	

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 <i>(Amount and Kind of Material Used)</i>	Depth
0	open hole 1015-1027		

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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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BIRK PETROLEUM
 874 12TH RD SW
 BURLINGTON, KS 66839
 620-364-1311 - OFFICE, 620-364-6646 - CELL

WELL CEMENTING

SERVICE TICKET

COUNTY CF? DATE: 09/12/12
 CITY _____

CHARGE TO Birk Petroleum
 ADDRESS _____ CITY _____ ST _____ ZIP _____
 LEASE & WELL NO. Hazen A #1-2 CONTRACTOR Company Tools
 KIND OF JOB Cement long string SEC _____ TWP _____ RG _____
 DIR. TO LOC. _____ OLD NEW

QUANTITY	MATERIAL USED	SERV. CHG
<u>120 Sx</u>	<u>Portland Cement</u>	
	BULK CHARGE	
	BULK TRK. MILES	
	PUMP TRK. MILES	
	PLUGS	
	TOTAL	

T.D. 1027" CSG. SET AT 1012' VOLUME _____
 SIZE HOLE 6 1/8" TBG SET AT _____ VOLUME _____
 MAX. PRESS. _____ SIZE PIPE 2 7/8" long string
 PLUG DEPTH _____ PKER DEPTH _____ PLUG USED _____

TIME FINISHED: _____
 REMARKS: Connect to pipe. Pump Cement into well. Good circ to surface. Job complete

NAME _____

 CEMENTER OR TREATER _____ OWNER'S REP. [Signature]

522 N. Industrial Rd.
P.O. Box 654
Lela, Kansas 67449
Phone: 620/255-5555



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 loading 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.

COOPERATIVE VENTURES
300 S. 5TH ST.

BURLINGTON KS
66839

SHIP TO:
BII278
B & B COOP. VENTURES/BIRK OIL
58 W. TO WAYSIDE RD N 1 MI TO
5TH RD W 1/2 MI
WELL# HAZEN A #12
LE ROY, KS 66857

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	% CHL	DRIVER/TRUCK	% AIR	PLANT/TRANSACTION #
10:07:14a	WELL	12.00 yd	12.00 yd	0.00	JH 31	0.00	COFCO

DATE	LOAD #	YARDS DEL	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER
09-12-12 o Date oday	4 1	48.00 yd 12.00 yd	122008	G/yd 0.0	4.00 in	32560

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 road 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 the RELEASE relieving him and the supplier from any responsibility for 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 the 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 _____

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
12.00	WELL	WELL (10 SACKS PER UNIT)	12.00	51.00
12.00	MIX & HAUL	MIXING & HAULING	12.00	25.00
2.50	TRUCKING	TRUCKING CHARGE	2.50	50.00

570.41135

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED	Subtotal
			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		1037.00
					Tax 7.6300 65.33
					Total \$ 1102.33
					Order \$ 1102.33
					ADDITIONAL CHARGE 1
					ADDITIONAL CHARGE 2
					GRAND TOTAL