



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1164928
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

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

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ 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 #: _____

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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1164928

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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

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				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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

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.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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ALLIED OIL & GAS SERVICES, LLC 059900

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
Medicine Lodge KS
09/10/13

DATE <u>09/09/13</u>	SEC. <u>9</u>	TWP. <u>35E</u>	RANGE <u>12W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>1230AM</u>
LEASE <u>Lois D</u>		WELL# <u>1</u>		LOCATION <u>Hardtner KS, 1 3/4 mi, 1/2 mi North</u>		COUNTY <u>Barber</u>	STATE <u>KS</u>
OLD OR NEW (Circle one) <u>NEW</u>				<u>West into</u>			

CONTRACTOR Beredco #1
 TYPE OF JOB Surface
 HOLE SIZE 17 1/2 T.D. 319
 CASING SIZE 13 3/8 DEPTH 297
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX 250 MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. 20ft
 PERFS.
 DISPLACEMENT 43 1/2 BBLs Fresh H₂O

EQUIPMENT

PUMP TRUCK CEMENTER Jason Thinesch
 # 360/302 HELPER Jake Heard
 BULK TRUCK
 # 421/250 DRIVER Carl Rackley
 BULK TRUCK
 # DRIVER

REMARKS:

OWNER Berexco
CEMENT
 AMOUNT ORDERED 170 sx 65:35:6% Gel + 3% cc + 1/4# Floseal, sx Class A + 3% cc + 2% Gel

COMMON <u>Class A</u>	<u>100 sx @ 17.90</u>	<u>1790.00</u>
POZMIX	@	
GEL	<u>2 sx @ 2240</u>	<u>46.80</u>
CHLORIDE	<u>10 sx @ 64</u>	<u>640.00</u>
ASC	@	
<u>Allied Lt. Wt. Cont. Type 1 Class A mix</u>	@ <u>15.95</u>	<u>2711.50</u>
<u>Floseal</u>	<u>42 lbs @ 2.97</u>	<u>124.74</u>
	@	
	@	
	@	
	@	
	@	
HANDLING <u>30S. 10 cu ft</u>	@	<u>756.65</u>
MILEAGE <u>32S tons x 25 mi x</u>	<u>2.60</u>	<u>845.00</u>
TOTAL		<u>6914.19</u>

SERVICE

DEPTH OF JOB <u>297</u>	
PUMP TRUCK CHARGE	<u>1512.25</u>
EXTRA FOOTAGE	@
MILEAGE <u>25 mi</u>	@ <u>7.70</u> <u>192.50</u>
MANIFOLD + Head	@ <u>275.00</u>
LV <u>25 mi</u>	@ <u>4.40</u> <u>N/C</u>
	@

TOTAL 1979.50

CHARGE TO: Berexco
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

13 3/8

Wooden Plug	<u>1 @</u>	<u>135</u>
Centralizers	<u>3 @ 67.50</u>	
	@	
	@	
	@	

TOTAL 202.50

SALES TAX (If Any) _____
 TOTAL CHARGES 9096.19
 DISCOUNT _____ IF PAID IN 30 DAYS

NET 6543.50

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME _____
 SIGNATURE X [Signature]

ALLIED OIL & GAS SERVICE, LLC 054788

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Med Lodge

DATE <u>9-20-13</u>	SEC. <u>9</u>	TWP. <u>35</u>	RANGE <u>12</u>	CALLED OUT	ON LOCATION	JOB START <u>5:30pm</u>	JOB FINISH <u>6:00pm</u>
LEASE <u>Lois</u>	WELL # <u>D-11</u>	LOCATION			COUNTY <u>Barber</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Beredco #1
 TYPE OF JOB long string
 HOLE SIZE 7 7/8 T.D. 5026
 CASING SIZE 5 1/2 15.5# DEPTH 5026
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX 2500# MINIMUM
 MEAS. LINE SHOE JOINT 42'
 CEMENT LEFT IN CSG. 42'
 PERFS.
 DISPLACEMENT 118 1/2 bbl

OWNER Berexco

CEMENT
 AMOUNT ORDERED 125 6 7/8 6 7/8 gal 1/4 #Flu
200 ASC 6# Kalseal/sk 5 7/8 81-160 + d. foam

COMMON	@		
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC <u>200 5x</u>	@	<u>20.40</u>	<u>4080.00</u>
<u>ALW 125 5x</u>	@	<u>16.50</u>	<u>2062.50</u>
<u>Kalseal 1000#</u>	@	<u>.98</u>	<u>980.00</u>
<u>81-160 94#</u>	@	<u>18.90</u>	<u>1776.60</u>
<u>Defoamer 28#</u>	@	<u>9.80</u>	<u>274.40</u>
<u>Flo Seal 31#</u>	@	<u>2.97</u>	<u>92.07</u>
	@		
	@		
	@		
HANDLING <u>393.79</u>	@	<u>2.48</u>	<u>976.59</u>
MILEAGE <u>16.98/25/2.60</u>			<u>1104.31</u>
			TOTAL <u>11,346.47</u>

EQUIPMENT

PUMP TRUCK CEMENTER Robert V. Kubovich
 # 360/265 HELPER JAKE HEARN
 BULK TRUCK DRIVER Carl Rackley
 # 381/252
 BULK TRUCK DRIVER
 #

REMARKS:

ran 60 5 1/2 15.5# csg circulate for 45 min
ran 60 5 1/2 15.5# csg circulate for 1 hr
pressure check lines to 2500# mix 30 sk in
rat hole 20 sks in mouse hole mix 75 sk of
65/35 6 7/8 gal 1/4 #Flu at 12" and 50 sks at
12.5 then mix 200 sks ASC 6# Kalseal 5 7/8
81-160 and defoamer displace 118 1/2 bbl of
water and plug at 1700'

Thank you

CHARGE TO: Berexco

STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB		<u>5026'</u>	
PUMP TRUCK CHARGE		<u>3099.25</u>	
EXTRA FOOTAGE	@		
MILEAGE <u>25</u>	@	<u>7.70</u>	<u>192.50</u>
MANIFOLD	@	<u>275.00</u>	<u>N/C</u>
<u>L.V. 25</u>	@	<u>4.40</u>	<u>N/C</u>
<u>waiting time 6 hours</u>	@	<u>440.00</u>	<u>N/C</u>
<u>Additional hours 6</u>	@	<u>440.00</u>	<u>2640.00</u>
			TOTAL <u>5931.75</u>

PLUG & FLOAT EQUIPMENT

<u>1- AEU float shoe</u>	@	<u>210.00</u>	
<u>1- latch down plug</u>	@	<u>166.25</u>	
<u>2- Basket</u>	@	<u>161.25</u>	<u>322.50</u>
<u>12- Centralizers</u>	@	<u>33.75</u>	<u>405.00</u>
	@		
			TOTAL <u>1103.75</u>

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME _____

SIGNATURE [Signature]

SALES TAX (If Any) _____
 TOTAL CHARGES 18,656.97
 DISCOUNT _____ IF PAID IN 30 DAYS
NET 13,742.06



ALLIED

CEMENTING CO., LLC
Cementing & Acidizing Services

CEMENTING LOG

STAGE NO. _____

Date 9-20-13 District Med Lodge Ticket No. 54788
 Company Borecco Rig Borecco #1
 Lease Louis Well No. D-11
 County Barber State KS
 Location Hardtner 134E 4N Eint 9 Field _____

CEMENT DATA:
 Spacer Type: _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG _____

CASING DATA: Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size 5 1/2 Type new Weight 15.5 Collar _____

LEAD: Pump Time _____ hrs. Type 65/35 67 gal
4 5/6 Excess _____
 Amt. 125 Sks Yield 1.98 ft³/sk Density 12.5 PPG
 TAIL: Pump Time _____ hrs. Type ASC 6th Colson 1st
5 3/4 51-160 DeFoamer Excess _____
 Amt. 200 Sks Yield 1.57 ft³/sk Density 14.5 PPG
 WATER: Lead 10.9 gals/sk Tail 7.23 gals/sk Total _____ Bbls.

Casing Depths: Top _____ Bottom _____

Pump Trucks Used 360/265 - J-LC H
 Bulk Equip. 381/252 - Carl Rn

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size 7 7/8 T.D. 5026 ft. P.B. to _____ ft.

CAPACITY FACTORS:
 Casing: Bbls/Lin. ft. .0238 Lin. ft./Bbl. 42.01
 Open Holes: Bbls/Lin. ft. .0602 Lin. ft./Bbl. 16.5793
 Drill Pipe: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Annulus: Bbls/Lin. ft. .0309 Lin. ft./Bbl. 32.4065
 Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Perforations: From _____ ft. to _____ ft. Amt. _____

Float Equip: Manufacturer WF-IR
 Shoe: Type AFU float shoe Depth 5026
 Float: Type AF Depth _____
 Centralizers: Quantity 12 Plugs Top _____ Btm. _____
 Stage Collars _____
 Special Equip. _____
 Disp. Fluid Type water Amt. 118 1/2 Bbls. Weight 8.39 PPG
 Mud Type _____ Weight 9 PPG

COMPANY REPRESENTATIVE _____

CEMENTER [Signature]

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
9-19 10:00pm						Arrive on location
9-20 12:00AM						Safety meeting
9:00 AM						Setup
9:00 AM						run 60 ft of 5 1/2 15.5 csg
11:20 AM						circulate hole
12:10 PM						run 61 ft of csg
2:20 PM						circulate hole
3:45 PM	2500#					test lines
3:50 pm			7 1/2 bbl		3 bbl/min	mix 30 st in rat hole of 63/35 67 gal
3:55 pm			5 bbl		2 bbl/min	mix 20 st in mouse hole
4:00 pm	200#		20 bbl		5 1/2 bbl/min	mix 25 st of 65/35 at 12#
	200#				5 1/2	mix 50 st of 65/35 at 12.5#
4:36 pm	1000#		35 bbl		5 1/2	mix 20 st of ASC
4:56 pm	800#		7 1/2 bbl		6 bbl/min	displace with water
4:56 pm	800#		30 bbl		5 1/2 bbl/min	displace
5:00 pm	1700#		14 1/2		3 1/4 bbl/min	displace
						land plug
						release
5:30 pm						wash clean
6:00 pm						tear down
						leave location

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

October 29, 2013

Evan Mayhew
Beren Corporation
2020 N. BRAMBLEWOOD
WICHITA, KS 67206-1094

Re: ACO1
API 15-007-24071-00-00
Lois D 11
NE/4 Sec.09-35S-12W
Barber County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Evan Mayhew

No Samples Till Below
4500

Sh. v. drk. gray to black - carb

Interbedded Limestones & Shales
① Finer. Dalg. lms. tan, crypto. to v.v. fn. xln; w/hvy. has med to coarse wht. calc. xls. & fragm.; sub-calc, sub-succo. to succo; dul. H. to H. yel. fluor.; No cut; abn. PR; Se. to gal. & Tks excel. micro. pp to interxln por & prob. interxln. por

② Slower Dalg. lms. tan, grayish IP's crypto. to v.v. fn. xln; sub-calc sub-succo. & packstr; dul. H. to H. yel. fluor.; No cut; No Vis Por

③ Prob. thin scattered Shales med. to v. drk gray, calc IP's

Prob. Sh. med. to v. drk gray - calc. to v. drk. gray. To black - carb.

Interbedded Limestones & Shales
Similar 4515-4621

Sh. v. drk. gray to black - carb

Interbedded Limestones & Shales
Similar 4515-4621

Sh. v. drk. gray to black - carb

Interbedded Limestones & Shales
① Lms. tan, grayish IP's; crypto. to v.v. fn. xln; sub-calc; sub-succo to Tks, succo & packstr; has ph. xln to m. oolitic to Tks oolitic; dul. yel. to yel. & dul. H. yel to H. yel. fluor.; No cut
No Vis Por

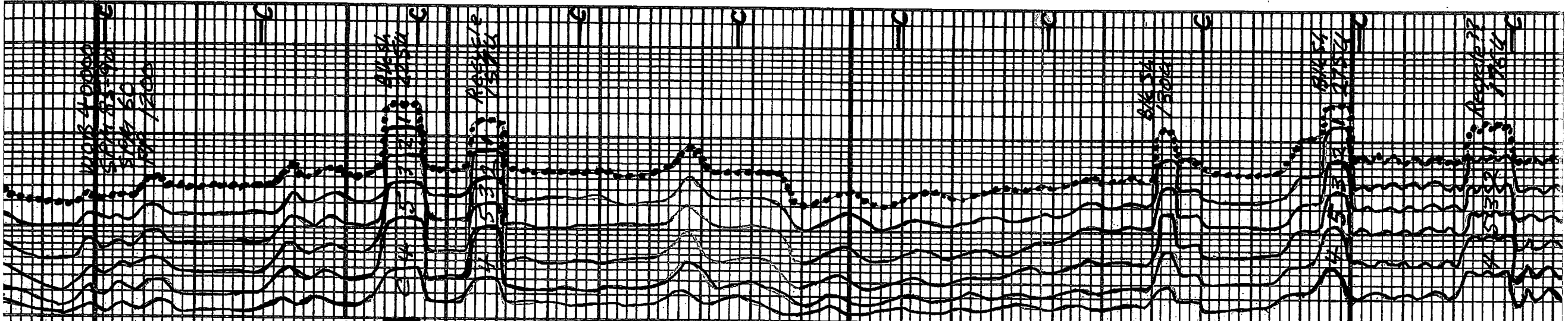
② Lms. grayish tan to H. gray - sh. to P. to v.v. fn. xln;

4500
4515
4530
4545
4560
4575
4590
4605
4620
4635
4650
4665
4680
4695
4710
4725
4740
4755
4770
4785
4800

4500

4600

4700

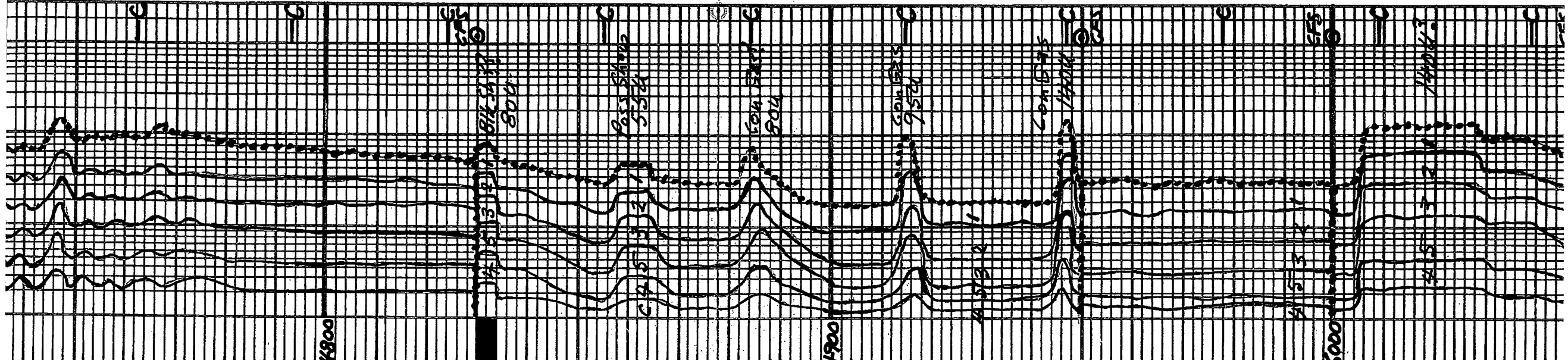


40 Lms. gray sh. to 10 11. gray
 traly. shaly crypto. to v. tu. xln.
 sub-chk. or shly. trs. sub-succo
 + peckston. dul. k. yel. to dul
 yel. fluor. 1P's. No cuts. No 1/3 por.
 ③ Sh. med to v. d. br. gray - sl. to
 extra. calc 1P's
 ④ Sh. drk. gray. to black-carb.

Note: 4790-4800 ft Sample
 There were trs. siltstn.
 H. gray. to brown from oil stn.
 v. dul. yel. fluor. w/ fr. stemming
 cuts; No 1/3 por. and
 4800-4810 Sample few
 piece Qtz siltstn. tan. v. f. to
 fr. w/ trs. med to coarse gr.
 ang. fr. to gd. sort; silt. trs
 chlorite; some clay + silt
 filling. dul. gldn. yel. fluor.
 No cuts; good to excellent
 p.p. micro-por + intergr.
 porosity

Chert, Limestones, Dolomites
 Limestones to Lmy. Dolomites
 ① Chert abn. fresh, wh. to
 off. wht, grayish. 1P's. tr. ans. l.
 to orange + sl. to traly
 weathered chert w/ sptd to
 trs even. Tan, brown to black
 oil stn. i. dul. gldn. yel. fluor. 1P's
 w/ flush to gd. stemming. cuts;
 hvy trs w/ pr. to fr. + silt. trs. w/
 good micro-p.p. por.

② Trs. to 2 by Lmy's Dolomites
 and Lmy. Dolomites
 tan; crypto. to v. tu. xln.
 sub-chk. sub-succo. to suano.
 + packstn. 1P's hvy. trs. w/
 drk. tan to brown oil stn
 spotted w/ trs even stn
 w/ dul. yel. fluor. w/ fr. to
 gd. stemming cuts; trs. por. to fr.
 micro-p.p. por. + poss.
 intergr. por. 1P's



Sh. med. to v. drk. gray. j
splintery IP₃

5100

CAS-B-21

TR 5150

7 7/8 in bits in out
#1 New Smith F 129 990 5150 TD
Dev. Sudw. the ones I could find
1. 2900 3/4 3. 4059 3/4
2. 3398 1/4 4. 4978 1/4
5. 5150 3/4 TD

Circ Points:
1. 4830 3. 5000 5. 5075
2. 4950 4. 5050 6. 5150 TP

DST's None
Daily Drilling Progress:

- 4090 AT 7AM 9-16-13
- 4400 AT 4:50PM 9-16-13
- 4742 AT 7:00AM 9-17-13
- 5075 AT 7:00AM 9-18-13
- 5150 AT 7:00AM 9-19-13

Mud Info:

DATE	9-15 10:30A	9-16 8:30A	9-17 11:30A	9-17 11:55P	9-18 10:00A	9-19 10:30A
Depth	3244	4059	4814	4855	5089	5150
WT	9.0	9.5	9.9	9.5	9.4	9.4
VIS	44	39	36	40	45	41
PV	10	10	12	13	10	8
YP	14	12	13	14	15	12
GS	17/36	10/36	11/38	11/43	17/42	14/44
WL	12.0	15.0	13.8	12.4	9.7	10.8
Cake	1/32	2/32	1/32	1/32	1/32	1/32
PH	9.5	8.0	10.0	9.5	10.5	9.0
CHL	1200	4000	12000	9000	8000	7000
Ca	120	160	120	160	80	100
LCM	0	0	0	1	6	5

OPERATOR Beren Corporation

LEASE Louis "D" NO. 11

ELEVATION 1405 KB RTD 5150

LOCATION

2310' FNL + 481' FEL

SEC. 9

TWP. 35 S

RNG. 12 W

COUNTY

Barber

STATE

KANSAS