

STATE OF KANSAS
STATE CORPORATION COMMISSION
100 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-081-20501-00-00

LEASE NAME Miller Trust

WELL NUMBER 1-31

660 Ft. from S Section Line

1980 Ft. from W Section Line

SEC. 31 TWP. 30 RGE. 33W (E) or (W)

COUNTY Haskell

Date Well Completed 10-07-1988

Plugging Commenced 3-24-04

Plugging Completed 3-24-04

RECEIVED
APR 05 2004
KCC WICHITA

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR BEREXCO, INC.

ADDRESS P.O. Box 20380 Wichita, Kansas 67202

PHONE# (316) 265-3311 OPERATORS LICENSE NO. 5363

Character of Well Oil

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on _____ (date)

by Kevin Strube (KCC District Agent's Name).

Is ACO-1 filed? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 5790'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
<u>Synt. Prod</u>			<u>1853</u>	<u>8-5/8"</u>	<u>1853'</u>	<u>None</u>
<u>CIBP</u>			<u>5118</u>	<u>4-1/2"</u>	<u>5118'</u>	<u>2010'</u>
				<u>4830</u>		

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs are used, state the character of same and depth placed, from _____ feet to _____ feet each set.
Set CIBP @4831' with 2 sacks cement on top. Cut 4-1/2" casing loose @2010', pulled up to 1880', pumped 15 sacks gel and 50 sacks cement, pulled up to 650', pumped 5 sacks gel and 40 sacks cement, pulled up to 50' and circulated 20 sacks cement, 60/40 pos, 6% gel. Plugging Complete.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 Chase, Kansas 67524

Name of Party Responsible for Plugging Fees: Berexco, Inc.

State of Kansas County of Rice, ss.

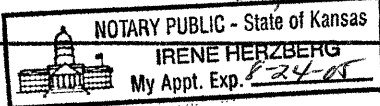
Mike Kelso (Employee of Operator) or (Operator)
above-described well, being first duly sworn on oath, says: That I have knowledge of the facts and statements, and matters herein contained and the log of the above-described well as filed to the same are true and correct, so help me God.

(Signature) [Signature]

(Address) P. O. Box 467 Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 2nd. day of April, 2004

My Commission Expires:



Notary Public

Form CP
Revised 05-