

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

WELL PLUGGING RECORD  
K.A.R.-62-3-117

API NUMBER 15-163-03129-00-01

LEASE NAME McClay

WELL NUMBER 4 Ini.

990' Ft. from S Section Line

330' Ft. from <sup>W</sup>E Section Line

SEC. 12 TWP. 9S RGE. 17 (E) or (W)

COUNTY Rooks

Date Well Completed 8-24-7

Plugging Commenced 7-13-04

Plugging Completed 7-13-04

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

LEASE OPERATOR Beredco, Inc.

ADDRESS P.O. Box 723 Hays, KS 67601

PHONE (785) 628-6101 OPERATORS LICENSE NO. 5147

Character of Well Injection

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

The plugging proposal was approved on \_\_\_\_\_ (date)

by Herb Dernes

Is ACO-1 filed? yes if not, is well log attached? \_\_\_\_\_

Producing Formation \_\_\_\_\_ Depth to Top \_\_\_\_\_ Bottom \_\_\_\_\_ T.D. \_\_\_\_\_

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

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 plug were used, state the character of same and depth placed, from feet to feet each set.

Rig up Move in 2 3/8 tbg. Run 36 jts tag fish @ 1090. Set tbg. @ 1075. Rig up Allied. Tbg.

plugged. Press to 2000# could not pump thru. Pull to 1042 - jar w/ rig - unplugged. Mix 120 SX 60/40

Poz 1090 gel @ 1042' circ to surface in 2 3/8 X 5 1/2 annulus. Tie into 5 1/2 CS9. Mix 100 SX 60/40

poz 1090 gel w/ 500# hulls. Max press 1000# SF @ 450#. Tie to surf pipe. Mix 80 SX 60/40 Poz 1090

gel Max press 200#. Shut in @ 150# Well plugged @ 12:20 pm Witness by Pat Staab KCC Hays

Name of Plugging Contractor Express Well Ser. License No. 6426

Address Victoria, KS

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Berexco, Inc.

STATE OF Kansas COUNTY OF Ellis, ss.

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

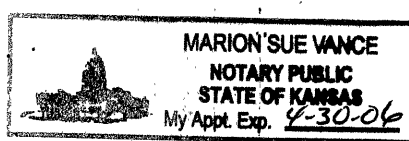
(Signature) Dennis Kirmer

(Address) P.O. Box 723 Hays, KS

SUBSCRIBED AND SWORN TO before me this 14<sup>th</sup> day of July, 2004

Marion Sue Vance  
Notary Public

My Commission Expires: 4-30-06



Form CP-1  
Revised 05-88

*Bum*