

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

~~15-159-70445-00-00~~

Operator: License # 5363
Name: BEREXCO INC
Address: P O BOX 2030 (2020 NO BRAMBLEWOOD)
City/State/Zip: WICHITA, KS 67208
Purchaser: WEST WICHITA GAS GATHERING
Operator Contact Person: BRIAN WASINGER
Phone: (316) 265-3311
Contractor: Name: BEREXCO INC
License: 5363
Wellsite Geologist: N/A

RECEIVED

NOV 17 2003

KCC WICHITA

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: BEREXCO INC
Well Name: GILLEN #3
Original Comp. Date: 01/24/1964 Original Total Depth: 3683
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

Spud Date or Date Reached TD 08/20/2003 Completion Date or Recompletion Date

API No. 15 - DRILLED IN 1964 15-159-19153-00-01
County: RICE
SE SW NW Sec. 2 Twp. 21 S. R. 9 East West
2310 3026 4428 feet from S (circle one) Line of Section
990 4428 feet from E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: GILLEN Well #: 3
Field Name: TOBIAS
Producing Formation: LANSING KANSAS CITY
Elevation: Ground: 1678 Kelly Bushing: 1683
Total Depth: 3683 Plug Back Total Depth: 3423
Amount of Surface Pipe Set and Cemented at 200 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 ALT 1 WITHM 4/12/03
(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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: [Signature]
Title: PRODUCTION ENGINEER Date: 11/13/2003
Subscribed and sworn to before me this 13th day of November, 2003.
Notary Public: [Signature]
Date Commission Expires: 2007



KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: BEREXCO INC Lease Name: GILLEN Well #: 3
 Sec. 2 Twp. 21 S. R. 9 East West County: RICE

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

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	# Sacjs Used	Type and Percent Additives
SURFACE	12 1/4	8 5/8	24	200	COMMON	175	2% GEL, 2 SX CC, 1 SX AMMONIA CL
PRODUCTION	7 7/8	5 1/2	14	3454	COMMON	200	

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				

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
	CIBP @3290	2 SX CEMENT ON TOP OF PLUG	3290
4	2938-44	500 GAL 15% ACID, 250 GAL KCL WTR	2938-44

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8		2894'	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
11/07/2003		<input checked="" 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
	0	50	0		

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled **2938-44**
 (If vented, Submit ACO-18.) Other (Specify) ...