

API NUMBER 15065 22518-00-00

LEASE NAME Cox A

WELL NUMBER 4

TYPE OR PRINT
 NOTICE: Fill out completely
 and return to Cons. Div. E/2 NE NW Ft. from S Section Line
 office within 30 days.

 Ft. from E Section Line

LEASE OPERATOR Berexo, Inc.

SEC. 26 TWP. 9S SE. 21 or (W)

ADDRESS Box 723

COUNTY Graham

PHONE# (913) 628-6101 OPERATORS LICENSE NO. 5363

Date Well Completed 6-20-89

Character of Well Oil

Plugging Commenced 11-25-96

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

Plugging Completed 11-25-96

The plugging proposal was approved on 11-25-96 (date)

by Herb Steiner (KCC District Agent's Name).

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

Producing Formation Depth to Top Bottom T.D. 3813

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
	Surface	0	266	8 1/2"	-	-
	Casing	0	3813	5 1/2"	-	-

2/3/96
 Dec 02

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
Work to 5 1/2" mud 295 ft. 60/40 per - 1070 gal. with 50 # balls - mat. press 1000 #. Shut in 500 #. Work to 8 1/2" - 11-25-96. 60 #.

Name of Plugging Contractor Berexo, Inc. License No. 5363

Address Box 723 Hays, Ks. 67601

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

STATE OF Kansas COUNTY OF Ellis, ss.

Mr. Ted Crawford (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 that the same are true and correct, so help me God.

NOTARY PUBLIC - State of Kansas
 ROSEMARY SMITH
 My Appt. Exp. 5-1-1991

(Signature) Ted Crawford
 (Address) Box 723 Hays, Ks. 67601

SUBSCRIBED AND SWORN TO before me this 27 day of November, 19 91

Rosemary Smith Notary Public
5-1-1991

My Commission Expires: 5-1-1991
 USE ONLY ONE SIDE OF EACH FORM