

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5363
Name: BEREXCO INC.
Address: P. O. Box 20380
City/State/Zip: Wichita, KS 67208
Purchaser: _____
Operator Contact Person: Bruce Meyer
Phone: (316) 265-3311
Contractor: Name: _____
License: _____
Wellsite Geologist: _____

Designate Type of Completion:
____ New Well ____ Re-Entry Workover
____ Oil ____ SWD ____ SLOW ____ 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: Locke Brothers 2-19
Original Spud Date: 9-15-78 Original Total Depth: _____

____ Deepening ____ Re-perf. Conv. to Enhr./SWD
 Plug Back 3,480' Plug Back Total Depth
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. E-19,454

Spud Date or Date Reached TD Completion Date or Recompletion Date
Feb. 25, 2005

API No. 15 - 141-20049 -00-02
County: Osborne
e2 e2 NW Sec. 19 Twp. 10 S. R. 15 East West
4,060 feet from (S) N (circle one) Line of Section
2,970 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Locke Bros Well #: 2
Field Name: Natoma East
Producing Formation: Lansing-Kansas City

Elevation: Ground: _____ Kelly Bushing: 1,969
Total Depth: 3,585' Plug Back Total Depth: 3,480'
Amount of Surface Pipe Set and Cemented at 325 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 owned with 7-24-07
(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: Forest Bampton
Title: Engineering Technician Date: March 10, 2005
Subscribed and sworn to before me this 10th day of March, 2005

Notary Public: Diana E Plotner
Date Commission Expires: Aug 10, 2007
DIANA E PLOTNER
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 8-10-07

KCC Office Use ONLY
NO Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
VCM UIC Distribution
RECEIVED
MAR 16 2005
KCC WICHITA

Operator Name: BEREXCO INC. Lease Name: Locke Bros Well #: 2
 Sec. 19 Twp. 10 S. R. 15 East West County: Osborne

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 <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 <i>(Submit Copy)</i> 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
SURFACE		8.625		325			
PRODUCTION		4.5		3584			

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 @ 3,480'		

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
		2 3/8"	3,157'	3,157'		
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 (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	

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