STATE OF KANSAS WELL PLUGGING RECORD STATE CORPORATION COMMISSION K.A.R.-82-3-117 API NUMBER __ 15 065 20651-0000 200 Colorado Derby Building Michita, Kansas 67202 LEASE NAME Law C TYPE OR PRINT WELL NUMBER _____1 NOTICE: Fill out completely and return to Cons. Div. _____ Ft. from S Section Line office within 30 days. NW SE NW Ft. from E Section Line LEASE OPERATOR Berexco. Inc. SEC. 34 TWP. 9 RGE. 23 (E) or (W) COUNTY ____Graham ADDRESS Box 723 Hays, Kansas 67601 PHONE (913) 628 6101 OPERATORS LICENSE NO. 5363 Date Well Completed 1/74 Character of Well Oil Plugging Commenced 10-26-94 (OII, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed 10-26-04 Herb Deines (KCC District Agent's Name). Is ACO-1 filed?______If not, is well log attached?____ Producing Formation ______ Depth to Top_____ Bottom______T.D. 4000 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 248 Surface 8 5/8 3095 Casing Describe in detail the manner in which the well was plugged, indicating where the mud fluid w placed and the method or methods used in introducing it into the hole. If cement or other plu vere used, state the character of same and depth placed, from feet to feet each se Perf. 2 holes at 2380, 1950, 1240. Poorbov 8 5/8 to 4. Run tubing to 280s. Spot 75 sk, 60/40 pos, 8% gel with 200# hulls. Tubing at 1/15'. Mix 100 sk, with 300# hulls. Circ. to surface. Pull tubing. Hook to 8 5/8 mix 50sk, 100# max, 50# shut in. Hook to 45 mix 19 ck 150# may 50# Shut in License No CHARLESON MUSSION Name of Plugging Contractor_____ Rerexco, Inc. STATE CONFORM A . 94 Address Box 723 Hays, Kansas 67601 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ____ Berexco, Inc. STATE OF Kansas County of Ellis Mr. Ted Crawford (Employee of Operator) or (Operator) above-described well, being first duly sworn on oath, says: That I have knowledge of the fact: statements, and matters herein contained and the log of the above described well as filled the the same are true and correct, so help me God. the same are true and correct, so help me God. NOTARY PUBLIC-State of Kansas (Signature)___ ROSEMARY SMITH (Address) BN 723 My Appl. Exp. 5-1-1995

SUBSCRIBED AND SWORN TO before me this ____ day of ____

USE ONLY ONE SIDE OF EACH FORM

Revised 05-8