KANSAS CORPORATION COMMISSION SURE PIPE VIAS: [All		*CORRECTION(S)
NOTICE OF INTENT TO DRILL Note Apply for Well Class Note that the provision of the property of the Community of the provision of the pro	For KCC Use: KANSAS CORPO	RATION COMMISSION SURE PIPE WAS: ALT I FORM C-1
NOTICE OF INTENT TO DRILL Note Apply for Well Class Note that the provision of the property of the Community of the provision of the pro	Effective Date: 12-17-2008 OIL & GAS CON	SERVATION DIVISION SURF DEPTH WAS December 2002
Must be approved by KCC five (5) days prior to commencing with Depth Dep		
Spot	SGA? Yes No	All blanks must be Filled
Spot	Must be approved by KCC fiv	e (5) days prior to commencing wind RRECTED
POPERATOR: Licensee, 3963 Name: Berexcoline. Address: P.O. Box 20380 Name: Berexcoline. Centacl Person, Jeremy Erus. Phone, 315: 255-311 CONTRACTOR: Licensee, 5147 Name: Berexcoline. Weil Drilled For. Weil Class: Oo Enh Rec Infield Muld Rolary M		
Secretary Secr	Expected Spud Date	970.
DEFEATOR Lecensed 9000 Name: Bereacol Directions Per Name: Berea	montn day year	
Name: Bereck Oinc. New York Service New York	OPERATOR: License# 5363	toot it of decitori
Address: P.O. Box 20380 Contact Person, Jersey Exp. Prone: 319-268-3311 ContractOrol. Learness 5147 Name: Beredoo Inc. Well Drilled For: Well Class: Type Equipment: Pied Name: Don West Lease Name: Hart Unit Pied Name: Don West Pi	Name: Berexco Inc.	reet from VE / W Line of Section
Collystancy (p. Microbials, KS 67208 (Moter Locate veil on the Section Plat on reverse situs) Contract Person, Service (p. 14 p. 285-3311	Address: P.O. Box 20380	Is SECTION Regular Irregular?
Country Person, 310-365-311 CONTRACTOR: Licenser, 5147 Name, Beredoo Inc. Well brilled For. Well class: Type Equipment: One Selentic Cable Other Other Other Other Other Ordinal Competion as follows: Operator: Well kinne: Directional, Deviated of Horizontal wellbore? With Kame: Directional, Deviated of Horizontal wellbore? Well well well well proposed zone: Will Cores be taken? Well Cores be taken? If ver, wertical depth: Storm for Location: Will Cores be taken? If ver, tree wertical depth: Will Cores be taken? If ver, tree were well will core provided the well of the well and eventual plugging of this well will core provided the well of the well and	City/State/Zip: Wichita, KS 67208	
Field Mame: Don Weet Spaced Field? Spaced Field? Target Formation(s): Mealesterpol Meale	Contact Person: Jeremy Ensz	County: Hodgeman
Special Content Special Co	Phone: 316- 265-3311	Lease Name: Hart Unit Well #: 1
Name Beredoo Inc. Well Drilled For Well Class: Type Equipment: Well Drilled For Well Class: Type Equipment: Well Attached to original Name: For Name:	51/17	Field Name: Don West
Well Drilled For Well Class: Type Equipment: Ground Surface Elevation: 250 Set (Declaration of Pooled Link Absched to original) Ground Surface Elevation: 250 Set (Declaration of Pooled Link Absched to original) Ground Surface Elevation: 250 Set (Declaration of Pooled Link Absched to original) Seismic;	CONTRACTOR: License#	
Ground Surface Elevation: 290 feet MSL Ground Surface Elevatio	Name: Defeace file.	Target Formation(s): Mississippi
Ground Surface Filevation: 2005 Gas Storage Pool Ext. Air Rotary Wildows Wi	Well Drilled For: Well Class: Type Equipment:	
Gas Storage Pool Ext. Gable		
GWNO Disposal Wildcat Cable Selamic; if of Holes Other Debt Other Selamic; if of Holes Other Selamic; if of Holes Other Selamic; if of Holes Other Selamic; if OWWC: old well information as follows: Selamic; Selamic; if OWWC: old well information as follows: Selamic; Se		
Seismic; # of Holes Other		
Depth to bottom of usation water 1 2 2 2 2 2 2 2 2 2		
If OWWO: old well information as follows: Operator: Operator: Well Name: Original Completion Date: Original Total Depth:: Directional, Deviated or Horizontal wellbore? If Yes, Yue vertical depth:: Bottom Hole Location: KCC DKT e:: Well Visit we vertical depth:: Bottom Hole Location: KCC DKT e:: Well Visit we spring the state of the deviation of the post of the state of the state of the state of the state of the post of the state of th		
Length of Conductor Pipe required: Projected Total Depth: Mississippi		Surface Pipe by Alternate: 1 2
Well Name: Original Completion Date: Original Confidence or Horizontal Well Date Date Date Date: Original Completion Date: Original Condition Date: Original Condition Date: Original Completion Date: Original Condition Date: Original Condi	If OWWO: old well information as follows:	
Formation at Total Depth: Mississippi	Operator:	
Original Completion Date:Original Total Depth:		A.P. a.t. a.t. a.t.
If Yes, true vertical depth::	Original Completion Date:Original Total Depth:	Formation at local Depth.
If Yes, true vertical depth:	Directional Deviated or Horizontal wellbore?	
Note: Apply for Permit with DWR		
Will Cores be taken? If Yes, proposed zone: Will Cores be taken? Will Cores be taken? If Yes, proposed zone: Will Cores be taken? Will Cores be taken? If Yes, proposed zone: If Yes, 2009 FECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED Receive: 7000 Receiv		
The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 el. eq 7 2009 It is agreed that the following minimum requirements will be met:		
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Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. In all cases, NOTIFY district office prior to any cementing. I hereby certify that the statements made herein are true and to the best of my knowledge and belief. Date: July 05, 2009 Signature of Operator or Agent: For KCC Use ONLY API # 15 - 083 - 2 536 - 0660 Conductor pipe required NON feet Minimum surface pipe required Approved by: Limit 2 12 - 08 7 - 7 - 2009 This authorization void if drilling not started within months of approval date.) Spud date: Agent: Agent: Date: July 05, 2009 Signature of Operator or Agent: File Drill Pit Application (form CDP-1) with Intent to Drill; File Completion Form ACO-1 within 120 days of spud date; File acreage attribution plat according to field proration orders; Notify appropriate district office 48 hours prior to workover or re-entry; Submit plugging report (CP-4) after plugging is completed; Obtain written approval before disposing or injecting salt water. If this permit has expired (See: authorized expiration date) please check the box below and return to the address below. Well Not Drilled - Permit Expired Signature of Operator or Agent: Date:	5. The appropriate district office will be notified before well is either pl	ugged or production casing is cemented in;
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I hereby certify that the statements made herein are true and to the best of my knowledge and belief. Date: July 05, 2009	Or pursuant to Appendix "B" - Eastern Kansas surface casing order	of #133,891-C, which applies to the RCC district of area, alternate in cementing.
Signature of Operator or Agent: Sign	·	
For KCC Use ONLY API # 15 - 003 - 2/586 - 0060 Conductor pipe required NON feet Minimum surface pipe required feet per Alt. Approved by: Int 12 12 08 / 7-7-209 This authorization expires: 12 (2 200 9 (This authorization void if drilling not started within months of approval date.) Spud date: Agent: Agent: API # 15 - 003 - 2/586 - 0060 File Drill Pit Application (form CDP-1) with Intent to Drill; File Completion Form ACO-1 within 120 days of spud date; File acreage attribution plat according to field proration orders; Notify appropriate district office 48 hours prior to workover or re-entry; Submit plugging report (CP-4) after plugging is completed; Obtain written approval before disposing or injecting salt water. If this permit has expired (See: authorized expiration date) please check the box below and return to the address below. Well Not Drilled - Permit Expired Signature of Operator or Agent: Date:	Thereby certify that the statements made herein are tide and to the best	
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For KCC Use ONLY API # 15 - 003 - 2/586 - 0000 Conductor pipe required None feet Minimum surface pipe required 200 feet per Alt. Approved by: 12 12 07 / 7-7-2009 This authorization void if drilling not started within months of approval date.) Spud date: Agent:		Romanhar to: DERENY ENSZ
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API # 15 - 003 2/ 30/6 100		
Minimum surface pipe required 200 feet per Alt. 2 2 2 2 2 2 2 2 3 4 2 2 2 3 4 4 4 4 4 4 4 4 4	None	11
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This authorization expires:	Approved by.	
(This authorization void if drilling not started within months of approval date.) Spud date: Agent: Date:	13 12 200 6	the death of the second sections to the address below
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