

FORM MUST BE TYPED

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

OPERATOR: License # 5364
Name: Beren Corporation
Address: 100 N. Broadway
Suite 970
City/State/Zip: Wichita, KS 67202
Purchaser: _____
Operator Contact Person: Gary Misak
Phone: (316) 265-3311
Contractor: _____
License: _____
Wellsite Geologist: _____

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.
 Gas EHHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry, oil well info as follows:

Operator: Beren Corp
Well Name: Ballet Ranch 3
Comp. Date: 3/11/99 Old Total Depth: 5240

Deepening Re-Perf Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

11-6-99 Spud Date 11-11-1999 Date Reached TD 11-11-1999 Completion Date

SIDE ONE

API NO. 15- 033-20161-00-02

County Comanche

SW - NE - NW Sec 2 Twp 35 Rge 16 E W

990 Feet from SW (circle one) Line of Section

1650 Feet from NW (circle one) Line of Section

Footages Calculated from Nearest Outside section Corner:
NE, SE, NW, or SW (circle one)

Lease Name Ballet Ranch Well # 3

Field Name _____

Producing Formation Pawnee

Elevation: Ground: _____ KB: _____

Total Depth _____ PBTB _____

Amount of Surface Pipe Set and Cemented at _____ 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/ WD-Dlg 11/209 sx. cmt.

Drilling Fluid Management Plan
(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 _____

Quarter _____ Sec _____ Twp _____ Rge _____ EW

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas, 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-2-130, 82-3-106 and 82-3-107 apply. Information on 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 with all plugged well. 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 Adam E. [Signature]

Title VP Date 2-25-01

Subscribed and sworn to before me this 25 day of Feb 20 01

Notary Public Ladeane M. Reese

Date Commission Expires 3-2-2001

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received
Distribution
KCC _____ SWD/Rep _____ NGPA
KGS _____ Plug _____ Other (Specify)

Form ACO-1 (7-91)

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KANSAS CORPORATION COMMISSION

JAN 10 2002

CONSERVATION DIVISION

Operator Name Beren Corporation
 sec 2 Twp 35 Rge 16 East West

Lease Name Ballet Ranch Well # 3
 County Comanche

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressure, whether shut-in pressure reached static level, hydrostatic pressure, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
List All E. Logs Run:			

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

Purpose:	Depth	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate	Top Bottom			
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				
<input type="checkbox"/> Remedial				

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
4	5059-68		5059-68

TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	No
Date of First, Resumed Production, SWD or Inj		Producing Method					
Estimate Production Per 24 Hours		Oil Bbls	Gas MCF	Water Bbls	Gas-Oil Ratio	Gravity	

METHOD OF COMPLETION

Disposition of Gas: Vented Sold Used on Lease

Open Hole Perf Dually Comp Commingled

Other (Specify) _____ Production Interval _____

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