

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 05363
Name: Berexco, Inc.
Address 1: P.O. Box 723
Address 2: P. O. Box 20380, Wichita, KS 67206
City: Hays State: KS Zip: 67601 + _____
Contact Person: Robert Grant
Phone: (785) 628-6101
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
Is ACO-1 filed? Yes No If not, is well log attached? Yes No
Producing Formation(s): List All (If needed attach another sheet)
Tor Depth to Top: 3232 Bottom: 34 T.D. _____
LKC Depth to Top: 3286 Bottom: 3468 T.D. _____
Cong Depth to Top: 3598 Bottom: 3612 T.D. _____

API No. 15 - 141-20035-0000
Spot Description: _____
Sec. 19 Twp. 10 S. R. 15 East West
530 3300 Feet from North South Line of Section
550 1980 Feet from East West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Osborne
Lease Name: Locke Well #: 1-19
Date Well Completed: _____
The plugging proposal was approved on: 11-19-09 (Date)
by: Pat Staab (KCC District Agent's Name)
Plugging Commenced: 11-19-09
Plugging Completed: 11-20-09

KCC
PKA
PCCP/B

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
Tor	Oil/Water	Surface	8 5/8	246	0
LKC	Oil/Water	Production	4 1/2	3678	0
Cong	Oil/Water				

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Ran tbg to 2147', mixed 200 sx 60/40 pos 4% gel 500# hulls, circulate cement to surface on 4 1/2. Pull tbg. Hook to 4 1/2, pump 115 sx 60/40 pos 4% gel. Shut in 0#. Hook to 8 5/8, pump 10 sx 60/40 pos 4% gel. Shut in 500#.

Plugging Contractor License #: 05363 Name: Berexco, Inc.
Address 1: P.O. Box 723 Address 2: P. O. Box 20380, Wichita, KS 67206
City: Hays State: Ks Zip: 67601 + _____
Phone: (785) 628-6101
Name of Party Responsible for Plugging Fees: Berexco, Inc.
State of Kansas County, Sedgwick, ss.
Robert Grant Employee of Operator or Operator on above-described well,
(Print Name)

RECEIVED
NOV 30 2009

KCC WICHITA

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 is as filed, and the same are true and correct, so help me God.

Signature: Robert Grant

[Handwritten Signature]