

CONFIDENTIAL

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

Form ACO-1
October 2008
Form Must Be Typed

ORIGINAL

1/18/11

OPERATOR: License # 34318
Name: Berexco LLC
Address 1: PO Box 20380
Address 2: _____
City: Wichita State: KS Zip: 67208 + _____
Contact Person: Jeremy Ens
Phone: (316) 265-3311
CONTRACTOR: License # 34317 JAN 18 2010
Name: Beredco LLC
Wellsite Geologist: Ganganath Koralegedara
Purchaser: N/A
Designate Type of Completion:
____ New Well ____ Re-Entry ____ Workover
____ Oil ____ SWD ____ SIOW
____ Gas ____ ENHR ____ SIGW
____ CM (Coal Bed Methane) ____ Temp. Abd.
 Dry ____ Other _____
(Core, WSW, Expl., Cathodic, etc.)

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If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
____ Deepening ____ Re-perf. ____ Conv. to Enhr. ____ Conv. to SWD
____ Plug Back: _____ Plug Back Total Depth
____ Commingled Docket No.: _____
____ Dual Completion Docket No.: _____
____ Other (SWD or Enhr.?) Docket No.: _____
12/29/09 1/7/10 1/8/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

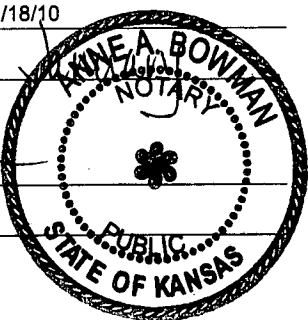
API No. 15 - 057-20661-0000
Spot Description: _____
NW SE NW SE Sec. 12 Twp. 25 S. R. 25 East West
1675 Feet from North / South Line of Section
1725 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ford
Lease Name: Nufer Well #: 1
Field Name: N/A
Producing Formation: N/A
Elevation: Ground: 2477 Kelly Bushing: 2490
Total Depth: 5201 Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at: 335 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.

KCC
1/21/10

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 4000 ppm Fluid volume: 820 bbls
Dewatering method used: Evaporation
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: _____
Title: Jeremy R. Ens Date: 1/18/10
Subscribed and sworn to before me this 18th day of _____
20 10
Notary Public: Anne Bowman
Date Commission Expires: 4/2/11



Y ~~* NO LOSS REL'D W/ACOI~~
KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
____ UIC Distribution

RECEIVED
JAN 20 2010

KCC WICHITA