

API NUMBER 15 065 21168-0000

LEASE NAME Wolfendon

WELL NUMBER 1

 Ft. from S Section Line

SE SE NW Ft. from E Section Line

SEC. 5 TWP. 10 RGE. 25 (E) or (W)

COUNTY Graham

Date Well Completed 1-15-80

Plugging Commenced 7-27-95

Plugging Completed 7-27-95

TYPE OR PRINT
 NOTICE: Fill out completely
 and return to Cons. Div.
 office within 30 days.

LEASE OPERATOR Beren Corp.

ADDRESS Box 723 Hays, Kansas 67601

PHONE# (913) 628 6101 OPERATORS LICENSE NO. 5364

Character of Well Oil

(Oil, Gas, GSA, SWD, Input, Water Supply Well)

The plugging proposal was approved on 7-27-95 (date)

by Herb Deines (KCC District Agent's Name).

Is ACQUI filed? If not, is well log attached?

Producing Form Depth to Top Bottom T.D. PBTD 4285

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
	Surface	0	307	8 5/8		None
	Casing	0	4345	4 1/2		None

Describe in detail the manner in which the well was 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 and depth placed, from feet to feet each plug 8 5/8 with 5 sk. 60/40, 10% gel 100# mix 300# Shut in. 4 1/2 225 sk. 60/40 pos, 500# hulls 50# mix 300# shut in.

RECEIVED
 STATE CORPORATION COMMISSION

AUG 01 1995
 License No. 5364

CONSERVATION DIVISION
 WICHITA, KANSAS

Name of Plugging Contractor Beren Corp.

Address Box 723 Hays, Kansas 67601

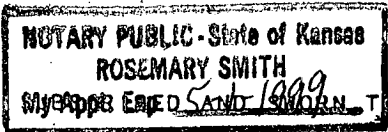
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Beren Corp.

STATE OF Kansas COUNTY OF Ellis, ss.

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

(Signature) Ted Crawford

(Address) Box 723 Hays, KS 67601



before me this 31 day of July, 19 95

Rosemary Smith
 Notary Public

My Commission Expires: 5-1-1999

USE ONLY ONE SIDE OF EACH FORM