

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 #: 34318 5363
Name: Berexco, L.L.C.
Address 1: P. O. Box 723
Address 2: P.O. Box 20380, Wichita, KS 67206
City: Hays State: KS Zip: 67201 + _____
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)
TOP Depth to Top: 2853 Bottom: 2859 T.D. _____
TOR Depth to Top: 3089 Bottom: 3093 T.D. _____
LKC Depth to Top: 3115 Bottom: 3385 T.D. 3483

API No. 15 - 167-00152-0001
Spot Description: _____
SW -SW -SW -SW Sec. 6 Twp. 11 S. R. 15 East West
330 Feet from North / South Line of Section
330 4950 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Russell
Lease Name: DECHRISIER ELLIOTT UNITS Well #: 2
Date Well Completed: 11-5-81
The plugging proposal was approved on: _____ (Date)
by: _____ (KCC District Agent's Name)
Plugging Commenced: 1-22-10
Plugging Completed: 1-22-10

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
		Surface	8 5/8	180'	None
		Production	4 1/2	3540'	None

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.

Run tubing to 1577'. Rig up Allied Cementing, pump 80 sx 60/40 pos 4% gel, 200# hulls, pull tubing to 691', pump 40 sx 60/40 pos 4% gel, circulate cement to surface on 4 1/2, pull tubing, hook to 4 1/2, pump 300 sx 60/40 pos 4% gel. Circulate cement to surface on 8 5/8, shut in 8 5/8. Pressure 8 5/8 and 4 1/2 to 200#, shut in.

Plugging Contractor License #: 34318 5363 Name: Berexco, L.L.C.
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: Robert Grant
State of Kansas County, Sedgwick, ss.
Robert Grant Employee of Operator or Operator on above-described well,
(Print Name)
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

RECEIVED

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

FEB 08 2010

KCC WICHITA