
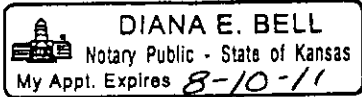
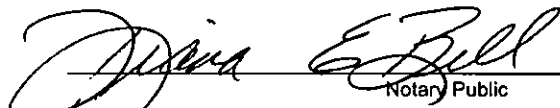


**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
CLOSURE OF SURFACE PIT**

Form CDP-4  
April 2004  
Form must be Typed

07

|   |  |
|---|--|
| Operator Name: <b>Berexco, Inc.</b>   | License Number: <b>5363</b>  |
| Operator Address: <b>P. O. Box 20380, Wichita, KS 67208</b>   |  |
| Contact Person: <b>Evan Mayhew</b>  | Phone Number: ( <b>316</b> ) <b>265 - 3311</b>   |
| Permit Number (API No. if applicable): <b>15-033-21490-00-00</b>  | Lease Name & Well No.: <b>Peppard #3</b>   |
| Type of Pit:<br><input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit<br><input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit<br><input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit | Pit Location (QQQQ):<br><u><b>193' N &amp; 95' W of C . NE</b></u><br>Sec. <u><b>20</b></u> Twp. <u><b>31S</b></u> R. <u><b>17</b></u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West<br><u><b>1127</b></u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section<br><u><b>1415</b></u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section<br><u><b>Comanche</b></u> County |
| Date of closure: <u><b>10 November 2007</b></u>   |  |
| Was an artificial liner used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |
| If no, how were the sides and bottom sealed to prevent downward migration of the pit contents?<br><b>Bentonite Clay in drilling mud and drilling solids -- self sealing.</b>  |  |
| RECEIVED<br>KANSAS CORPORATION COMMISSION<br><br><b>NOV 14 2007</b><br><br>CONSERVATION DIVISION<br>WICHITA, KS   |  |
| Abandonment procedure of pit:<br><b>(1) Allow to dry, (2) backfill, (3) re-contour to approximate the surrounding terrain.</b>  |  |
| The undersigned hereby certifies that he / she is <u><b>Engineering Technician</b></u> for <u><b>Berexco Inc.</b></u> (Co.),<br>a duly authorized agent, that all information shown hereon is true and correct to the best of his /her knowledge and belief.      |  |
| <br>_____<br>Signature of Applicant or Agent  |  |
| Subscribed and sworn to me on this <u><b>13</b></u> day of <u><b>November</b></u> , <u><b>2007</b></u>  |  |
|  DIANA E. BELL<br>Notary Public - State of Kansas<br>My Appt. Expires <b>8-10-11</b>   | <br>_____<br>Notary Public   |
| My Commission Expires: <u><b>Aug 10, 2011</b></u>   |  |