

API NUMBER _____

LEASE NAME Simon

WELL NUMBER 3

_____ Ft. from S Section Line

SW SE SE _____ Ft. from E Section Line

SEC. 9 TWP. 14 RGE. 17 (E) or (W)

COUNTY Ellis

Date Well Completed 8-20-1962

Plugging Commenced 6-28-95

Plugging Completed 6-28-95

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

LEASE OPERATOR Berexco, Inc.

ADDRESS Box 723 Hays, Kansas 67601

PHONE#(913) 628 6101 OPERATORS LICENSE NO. 5363

Character of Well Oil

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 6-28-95 (date)

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

Is ACO-1 filed? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3569

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	188	8 5/8		
	Casing	0	3540	4 1/2		

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 set
Run tbg. opened to 2470'. Mix 60 sk. 60/40 pos with 10% gel and hulls. Pull tubing to 1517' mix 100 sk. pull up to 804'. Mix 25 sk. circulate to surface. Pull tbg. Hook up annulus pump 35 sk with 100# hulls. 400# pressure. Pump 12 sk. shut in at 500#. 245 sk. 60/40 with 10% gel used throughout.

Name of Plugging Contractor Berexco, Inc. License No. 5363

Address Box 723 Hays, Kansas 67601

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Berexco, Inc.

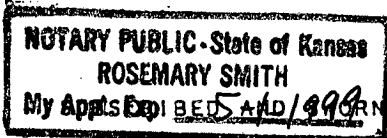
STATE OF Kansas COUNTY OF Ellis, ss.

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

(Signature) Ted Crawford

(Address) Box 723 Hays, KS 67601



TO before me this 29 day of June, 19 95

Rosemary Smith
 Notary Public

My Commission Expires: 5-1-1999

USE ONLY ONE SIDE OF EACH FORM

01-03-1995
 RECEIVED
 JUL 03 1995
 KANSAS STATE CORPORATION COMMISSION

BEREXCO INC.
970 FOURTH FINANCIAL CENTER
WICHITA, KANSAS 67202

C100

IDENTIFICATION#
KS 7100800
ENGINEER:
UNIT

PROPERTY NAME
KARLIN LEASE
COO1064 ADAM E. BEREN
ALL PARTICIPANTS

DATE
4/30/95

INVOICE# PAGE
SUMMARY 80

REF. NO.	VENDOR	DESCRIPTION	ENTITY	AMOUNT
		TOTAL INVOICE		1848.79