



KANSAS CORPORATION COMMISSION 1071912

Form ACO-1

June 2009

**CONFIDENTIAL**

OIL &amp; GAS CONSERVATION DIVISION

Form Must Be Typed

Form must be Signed

All blanks must be Filled

**WELL COMPLETION FORM****WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 34318

Name: BEREXCO LLC

Address 1: 2020 N. BRAMBLEWOOD

Address 2:

City: WICHITA State: KS Zip: 67206 + 1094

Contact Person: Dana Wreath

Phone: ( 316 ) 265-3311

CONTRACTOR: License # 34317

Name: BEREDCO LLC

Wellsite Geologist: N/A

Purchaser: N/A

Designate Type of Completion:

- ☒ New Well ☐ Re-Entry ☐ Workover
- ☐ Oil ☐ WSW ☐ SWD ☐ SIOW
- ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW
- ☐ OG ☐ GSW ☐ Temp. Abd.
- ☐ CM (Coal Bed Methane)
- ☐ Cathodic ☒ Other (Core, Expl., etc.): Junked Hole

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
- ☐ Conv. to GSW

☐ Plug Back: Plug Back Total Depth☐ Commingled Permit #:☐ Dual Completion Permit #:☐ SWD Permit #:☐ ENHR Permit #:☐ GSW Permit #:

11/26/2011 11/30/2011 11/30/2011

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-083-21732-00-00

Spot Description:

SE SW NE SW Sec. 17 Twp. 22 S. R. 22 ☐ East ☒ West1570 Feet from ☐ North / ☒ South Line of Section1787 Feet from ☐ East / ☒ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☒ SW

County: Hodgeman

Lease Name: Douglas Well #: 1

Field Name: Hansten-Oppy

Producing Formation: N/A

Elevation: Ground: 2232 Kelly Bushing: 2245

Total Depth: 3290 Plug Back Total Depth: 0

Amount of Surface Pipe Set and Cemented at: 270 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.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 32000 ppm Fluid volume: 100 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: License #:

Quarter Sec. Twp. S. R. ☐ East ☐ West

County: Permit #:

**AFFIDAVIT**

I am the affiant and I hereby certify that 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.

Submitted Electronically

**KCC Office Use ONLY**☒ Letter of Confidentiality Received

Date: 01/17/2012

☐ Confidential Release Date:☐ Wireline Log Received☐ Geologist Report Received☐ UIC DistributionALT ☐ I ☒ II ☐ III Approved by: NAOMI JAMES Date: 01/20/2012