

CORRECTION #1



KANSAS CORPORATION COMMISSION

1073808

Form ACO-1

June 2009

CONFIDENTIAL

OIL & 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 # 34318Name: BEREXCO LLCAddress 1: 2020 N. BRAMBLEWOOD

Address 2: _____

City: WICHITA State: KS Zip: 67206 + 1094Contact Person: Evan MayhewPhone: (316) 265-3311CONTRACTOR: License # 34318Name: BEREXCO LLCWellsite Geologist: Ed GrievesPurchaser: Central Crude Corporation

Designate Type of Completion:

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

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 #: _____

<u>08/31/2011</u>	<u>09/16/2011</u>	<u>11/02/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-081-21963-00-00

Spot Description: _____

NW SE SE NE Sec. 12 Twp. 27 S. R. 33 East West2220 Feet from North / South Line of Section335 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

 NE NW SE SWCounty: HaskellLease Name: Tate A Well #: 2-12Field Name: Kisner SouthProducing Formation: MorrowElevation: Ground: 2892 Kelly Bushing: 2905Total Depth: 5404 Plug Back Total Depth: 5360Amount of Surface Pipe Set and Cemented at: 1804 FeetMultiple Stage Cementing Collar Used? Yes NoIf yes, show depth set: 3109 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: 8000 ppm Fluid volume: 1600 bblsDewatering 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: 12/08/2011
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 12/10/2012