

LEASE NAME Froetschner

WELL NUMBER 1

 Ft. from S Section Line

 Ft. from E Section Line

SEC. 34 TWP. 25 RGE. 20W (Exor(W))

COUNTY Edwards

Date Well Completed

Plugging Commenced 12-12-94

Plugging Completed 1-27-95

TYPE OR PRINT
NOTICE: Fill out completely
and return to Coas. 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 Gas

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

The plugging proposal was approved on (date)

by Richard Lacey (KCC District Agent's Name).

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

Producing Formation Depth to Top Bottom T.O. 4688'

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
				8 5/8"	281'	none
				4 1/2"	4683'	none

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 plug were used, state the character of same and depth placed, from feet to feet each set
Knocked out bridge ran to bottom pulled tubing out shot @700' ran tubing pumped 100
sacks down 4 1/2" 90 sacks down backside 60/40 6% gal

Name of Plugging Contractor Mike's Testing & Salvage, Inc.

License No. 31529 RECEIVED
STATE CORPORATION COMMISSION
FEB 02 1995
CORRELATION DIVISION
WICHITA, KANSAS

Address P.O. Box 209 Chase, Kansas 67524

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

STATE OF Kansas COUNTY OF Rice, ss.

Mike Kelso

(Employee of Operator) or (Operator) o

above-described well, 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 as filed that
the same are true and correct, so help me God.

(Signature) Mike Kelso

(Address) P.O. Box 209 Chase, Kansas 67524

SUBSCRIBED AND SWORN TO before me this 1 day of February, 19 95

Irene Herzberg
Notary Public

USE ONLY ONE SIDE OF EACH FORM
My Commission Expires:

