

AFFIDAVIT AND COMPLETION FORM

ACO-1

This form must be filed in triplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within five days after the completion of the well, regardless of how the well was completed. Circle one: Oil, gas, dry, SWD, OWWO, injection. Please type. Complete ALL sections. Applications must be filed for dual completion, commingling, salt water disposal and injection. Attach wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.) KCC#-(316) 263-3238.

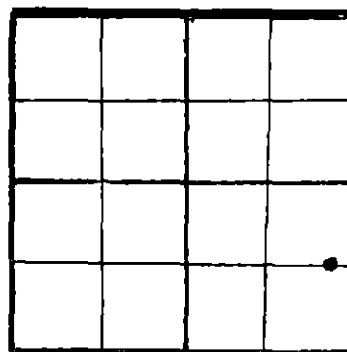
OPERATOR Beren Corporation API NO. 15-151-21,046 -00-00
 ADDRESS 970 Fourth Financial Center COUNTY Pratt
Wichita, Kansas 67202 FIELD CARVILLE ROBBINS
 **CONTACT PERSON Melvyn Abels LEASE Pauline "A"
 PHONE (316) 265-3311

PURCHASER Panhandle Eastern Pipe Line Company WELL NO. 1
 ADDRESS P.O. Box 1348 WELL LOCATION E/2 E/2 SE
Kansas City, Missouri 64141 Ft. from _____ Line and
 _____ Ft. from _____ Line of
 the SEC.17 TWP.27S RGE.15W

DRILLING CONTRACTOR BEREDCO INC.
 ADDRESS 401 E. Douglas, Suite 402
Wichita, Kansas 67202

PLUGGING CONTRACTOR _____
 ADDRESS _____

TOTAL DEPTH 4595' PBTD _____
 SPUD DATE 11/11/81 DATE COMPLETED 11/22/81
 ELEV: GR 2052 DF KB 2064



WELL PLAT
 (Quarter) or (Full) Section - Please indicate.

KCC _____
 KGS _____
 MISC. _____

DRILLED WITH (~~CARVER~~) (ROTARY) (~~BIT~~) TOOLS (New) / (~~Used~~) casing.
 Report of all strings set - surface, intermediate, production, etc.

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Socks	Type and percent additives
Surface	12 1/4"	8-5/8"	20#	414'	60-40 Pozmix	399	2% Gel, 3% CC
Production	7-7/8"	4 1/2"	10.5#	4594'	60-40 Pozmix	250	2% Gel, 10% Salt 10# Gilsonite per sk, 3/4 of 1% CFR

LINER RECORD			PERFORATION RECORD		
Top, ft.	Bottom, ft.	Socks cement	Shots per ft.	Size & type	Depth Interval
NA			3	DP jets	4466-70
TUBING RECORD					
Size	Setting depth	Packer set at			
2-3/8	4335	---			

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD
 Amount and kind of material used

NONE

RECEIVED
 STATE CORPORATION COMMISSION
 JAN 12 1982 01-12-82
 1-12-1982
 CONSERVATION DIVISION
 Wichita, Kansas

TEST DATE: 12-10-81 PRODUCTION

Date of first production <u>12-10-81</u>	Producing method (flowing, pumping, gas lift, etc.) <u>Flowing</u>	A.P.I. Gravity <u>NA</u>
RATE OF PRODUCTION PER 24 HOURS	Oil <u>NA</u> Gas <u>569</u> Water <u>NA</u>	Gas-oil ratio <u>NA</u>
Disposition of gas (vented, used on lease or sold) <u>Vented</u>	MCF <u>NA</u> bbls. <u>569</u>	CFPB <u>NA</u>
	Producing interval(s) <u>4466-70</u>	

** The person who can be reached by phone regarding any questions concerning this information.
 A witnessed initial test by the Commission is required if the well produces more than 25 BOPD or is located in a Basic Order Pool.

Name of lowest fresh water producing stratum _____ Depth _____
 Estimated height of cement behind pipe _____

WELL LOG

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
Soil	0	15'		
Sand	15	258'		
Red Bed	258	414'		
Red Bed & Shale	414	2072'		
Lime & Shale	2072	4483'		
Lime	4483	4595'		

Total Rotary Depth 4595'

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

A F F I D A V I T

STATE OF _____ STATE _____, COUNTY OF _____ SEDGWICK _____ SS,

_____ DON W. BEAUCHAMP _____ OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH, DEPOSES AND SAYS:

THAT HE IS _____ GEOLOGIST _____ FOR _____ BEREN CORPORATION _____ OPERATOR OF THE _____ PAULINE "A" _____ LEASE, AND IS DULY AUTHORIZED TO MAKE THIS AFFIDAVIT FOR AND ON BEHALF OF SAID OPERATOR, THAT WELL NO. _____ 1 _____ ON SAID LEASE HAS BEEN COMPLETED AS OF THE _____ 10th _____ DAY OF _____ DECEMBER _____ 19 81 _____, AND THAT ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT.

FURTHER AFFIANT SAITH NOT.

(S) *Don W. Beauchamp*

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ 8th _____ DAY OF _____ JANUARY _____ 19 82

Karen G. Berry
 NOTARY PUBLIC

MY COMMISSION EXPIRES: *Nov. 4, 1984*

