

15-185.01631.0000

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
130 South Market Room 2078  
Wichita, Kansas 67202

WELL PLUGGING RECORD  
K.A.R. 82-3-117

API NUMBER SPUD 1/15/46

LEASE NAME FISCHER "A"

MAR 03 1997

TYPE OR PRINT

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

WELL NUMBER 5

330 Ft. from N/W Section Line

660 Ft. from W Section Line

LEASE OPERATOR BERENERGY CORPORATION

SEC. 29 TWP. 21 RGE. 12 (N) or (W)

ADDRESS P.O. BOX 5850 DENVER, CO 80217-5850

COUNTY STAFFORD

PHONE# (303) 295-2323 OPERATORS LICENSE NO. 4967

Date Well Completed 3/12/46

Character of Well OIL

Plugging Commenced 2/26/97

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

Plugging Completed 2/26/97

The plugging proposal was approved on 1/23/97 (date)

by STEVE MIDDLETON (KCC District Agent's Name).

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

Producing Formation ARBUCKLE/L-KC Depth to Top 3287 Bottom 3606 T.D. 3606

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
L-KC	OIL	SURF	306	8-5/8	306	0
ARBUCKLE	OIL	SURF	3595	5-1/2	3595	0
		3568	3601	4-1/2	33	0

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the 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.

SET CIBP @ 3005' & CAPPED W/ 2 SX CMT. RAN TBG TO 1500' & SPOTTED 25 SX 60-40 POZ W/ 6% GEL. TOH TO 800' & SPOTTED 30 SX 60-40 POZ W/ 6% GEL. \*TOH TO 500' & CIRC CMT TO SURFACE. TOH W/ TBG & TOPPED OFF CSG. P&A W/ 120 TOTAL SX 60-40 POZ W/ 6% GEL.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor ALLIED CEMENTING CO., INC.

Address P.O. BOX 628, GREAT BEND, KS 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: BERENERGY CORPORATION

STATE OF Colorado COUNTY OF Denver, ss.

Bruce M. Patterson (Employee of Operator) or (Operator) of 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) Bruce M. Patterson

(Address) P.O. BOX 5850 DENVER, CO 80217-5850

SUBSCRIBED AND SWORN TO before me this 30<sup>th</sup> day of March, 19 97

Nathaniel R. [Signature]  
Notary Public

My Commission Expires: 9/7/97

RECEIVED  
ANS Ass'ty of Rep/Plugging  
NOIS/IND NOT/PLUGGING  
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1669 5  
STATE CORPORATION COMMISSION