

STATE OF KANSAS
STATE CORPORATION COMMISSION
305 S. Market, Room 2078
Topeka, KS 67202

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

API NUMBER 15159207920000

LEASE NAME Engelland

WELL NUMBER 1

_____ Ft. from S Section Line

_____ Ft. from E Section Line

SEC. 15 TWP. 21S RGE. 8W (E) or (W)

COUNTY Rice

Date Well Completed 1978

Plugging Commenced 1-23-98

Plugging Completed 1-28-98

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

EASE OPERATOR BEREXCO, INC.

ADDRESS P.O. Box 723 Hays, Kansas 67601

PHONE (913) 628-6101 OPERATORS LICENSE NO. 5356

Character of Well Oil

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

The plugging proposal was approved on _____ (date)

by Jack Luthi (KCC District Agent's Name).

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

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3521'

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"	253'	None
				4-1/2"	3436'	2400'

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 plugs are used, state the character of same and depth placed, from _____ feet to _____ feet each section. Pumped bottom with 25 sks. cement and 200# hulls to 3200'. Shot casing @2600' and 2400'.

Pulled up to 1100' and pumped 35 sks. cement and 100# hulls, pulled to 650' and pumped 35 sks. cement and 100# hulls, pulled up to 300' and circulated cement to surface, 60/40 pos. Plugging Complete. 4% gel.

Name of Plugging Contractor Mike's Testing & Salvage, Inc. License No. 31529

Address P.O. Box 467 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)

I, above-described well, being first duly sworn on oath, say: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed in the same are true and correct, so help me God.

(Signature) Mike Kelso

(Address) P. O. Box 467, Chase, KS 67524

SUBSCRIBED AND SWORN TO before me this 4th day of February, 19 98

June Schubert
Notary Public

My Commission Expires: August 24, 2001

2-5-98

