

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Markel, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-62-3-117

API NUMBER 15-009-16396-00-00

LEASE NAME Sausser Sausser

WELL NUMBER 3

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

330 Ft. from S Section Line

3300 Ft. from E Section Line

SEC. 12 TWP. 16S RGE. 14 (E) or (W)

COUNTY Barton

LEASE OPERATOR Berexco, Inc.

ADDRESS P.O. Box 723 Hays, KS 67601

PHONE (785) 628-6101 OPERATORS LICENSE NO. 5363

Character of Well oil

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

Date Well Completed _____

Plugging Commenced 5-25-04

Plugging Completed 5-26-04

The plugging proposal was approved on 8-13-03 (date)

by Herb Deines (KCC District Agent's Name).

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

Producing Formation ARD. LKC Depth to Top _____ Bottom T.O. 3352'

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
<u>Surf</u>			<u>889</u>	<u>10.750</u>	<u>889</u>	
<u>Prod</u>			<u>3343</u>	<u>7.0</u>	<u>3343</u>	

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:
Perf 2 holes @ 1625, 925, 375. Run open-ended tbg. tag @ 3348. Lay it down bottom of tbg @ 3326. Mix 110 SX 60/40 pos 10% gel 500# hulls. Pull 58 STS to 1595. Mix 160 SX 60/40 pos 10% gel 300# hulls. Cement did not circ to surf. No blow on annulus. tbg on vacuum. Pull 35 STS to 524. Mix 70 SX 60/40 pos 10% gel. Did not circ to surf. Well on vac. Run tbg open-ended tag @ 1645. Pull 1 ST Bottom of tbg @ 1623. Mix 150 SX 60/40 10% 200# Cement circ to surf. Pull tbg hook to 5 1/2. Mix 60 SX 60/40 10% 100# cement circ to surf. pipe #7" Max Press. 300# SI 100# Case Morris
 Name of Plugging Contractor Berexco, Inc. Company Tools License No. 5363 99998

Address P.O. Box 723 Hays, KS 67601

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

STATE OF Kansas COUNTY OF Ellis, ss.

Bob Grant (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 the the same are true and correct, so help me God.

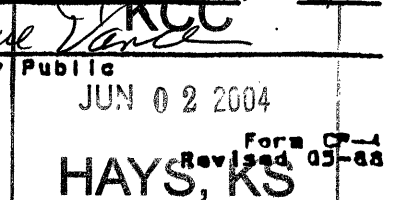
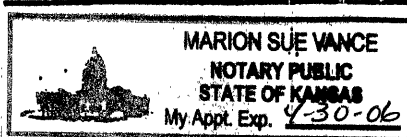
(Signature) Bob Grant

(Address) P.O. Box 723 Hays, KS 67601

SUBSCRIBED AND SWORN TO before me this 28th day of May, 2004

Marion Sue Vance
Notary Public

My Commission Expires: 4-30-06



RECEIVED
JUN 03 2004
KCC WICHITA

Handwritten initials