WELL PLUGGING RECORD

API NUMBER 15163002980000

LEASE NAME Turner

WELL NUMBER 1

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

LEASE OPERATOR Berexco, Inc.

ADDRESS P.O. Box 723 Hays, KS 67601

PHONE 628-6101 OPERATORS LICENSE NO. 5363

Character of Well OIL

(Oil, Gas, O.A., SWD, Input, Water Supply Well)

The plugging proposal was approved on 7-21-04 (date)

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

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

Producing Formation Depth to Top Bottom T.D. 33/9

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

Form Casing Record

<table>
<thead>
<tr>
<th>Formation</th>
<th>Content</th>
<th>From</th>
<th>To</th>
<th>Size</th>
<th>Put in</th>
<th>Pulled out</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 was used, state the character of same and depth placed, from feet to feet each set:

Mix 500 of 5x 60/40 002.10% gel. Good mix with sand up to 3/4 slurry. 85 ft. surf. pipe 13" conductor pipe. Unstuck at 1210. Pulled thru and 1100. Mix 85x 60/40 002.10% gel cement. Mix to surf in 5 1/4 slurry. Pull 38 ft. thru out of hole. Tie to 3 1/2 csg. Mix 80x cement 12" to 5surf in 85/4x 13" Pipe. Stabilized plug @ 14PM Witness Pat Staub KCC

Name of Plugging Contractor Stewart Well Service License No. 31720

Address Hays, KS 67601

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

STATE OF Kansas COUNTY OF Ellis

Dennis Hulme (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 the same are true and correct. So help me God.

(Signature)

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

RECEIVED JUL 30 2004

KCC WICHITA

SUBSCRIBED AND SIGNED before me this 22nd day of July, 2004

Notary Public

MARION SUE VANCE

Form CP-1
Revised 05-06