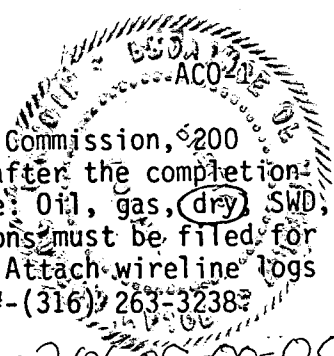## AFFIDAVIT AND COMPLETION FORM

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 Lochiel Exploration Ltd.

ADDRESS 1106, 333 - 5th Ave. S.W.

Calgary, Alberta, Canada

**CONTACT PERSON Joseph Yanchula

PHONE (403) 265-8405

PURCHASER

ADDRESS

DRILLING
CONTRACTOR Challenger Drilling Inc.

ADDRESS 340 E. North Belt, Suite 166

Houston, Texas 77060

PLUGGING
CONTRACTOR

ADDRESS

TOTAL DEPTH 4042 PBTD

SPUD DATE 81-06-23 DATE COMPLETED 81-07-13

ELEV: GR 2590 DF 2604 KB 2607

API NO. 15-179-20605-00-00

COUNTY Sheridan

FIELD

LEASE

WELL NO. Brown #1

WELL LOCATION NW NE NE 26-8s-27W

___ Ft. from _____ Line and

___ Ft. from _____ Line of

the ___ SEC. 26 TWP. 8s RGE. 27W

WELL PLAT

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

DRILLED WITH (CABLE) (ROTARY) (AIR) 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	Sacks	Type and percent additives
Surface	12¼	8 5/8	24	264	Common	240	3% salt 2% gel.

LINER RECORD			PERFORATION RECORD		
Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval

TUBING RECORD		
Size	Setting depth	Packer set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used		Depth interval treated
	RECEIVED STATE CORPORATION COMMISSION AUG 30 1982 CONSERVATION DIVISION Wichita, Kansas	8-30-82

TEST DATE: PRODUCTION

Date of first production	Producing method (flowing, pumping, gas lift, etc.)		A.P.I.Gravity

RATE OF PRODUCTION PER 24 HOURS	Oil	Gas	Water	Gas-oil ratio
	bbls.	MCF	bbls.	CFPB
Disposition of gas (vented, used on lease or sold)		Producing interval(s)		

** 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
Stone Corral (Anhydrite)	2240	2275		
Heebner	3738	3744		
Toronto	3760			
Lansing	3776			
Base Kansas City	4002			
Drill Stem Tests				
DST#1 3778-3848 (Lansing) V.O. 49 min. Rec. 5' drilling mud.				
DST#2 3833-3880 (Lansing) V.O. 45 min. Rec. 1' mud.				
Logs Run				
Radiation Guard 0-4055				
Compensated Sonic Integrated 264-4050				
Compensated Density 264-4055				
Radiation Log 2550-3819				

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

A F F I D A V I T

PROVINCE

~~STATE~~ OF ___Alberta___ , CITY ~~COUNTY~~ OF ___Calgary___ SS,

___Joseph Yanchula___ OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH, DEPOSES AND SAYS:

THAT HE IS Manager Engineering & Production FOR ___Lochiel Exploration Ltd.___

OPERATOR OF THE ___Brown___ 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 ___13___ DAY OF ___July___ 19 81 , AND THAT ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT.

FURTHER AFFIANT SAITH NOT.

(S) _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS 23 DAY OF ___August___ 19 82

MICHAEL J. MAJOR
A Notary Public in and
for the Province of Alberta
My Appointment expires at the
pleasure of the Attorney General

NOTARY PUBLIC
MICHAEL J MAJOR

MY COMMISSION EXPIRES:_____