

ORIGINAL

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
RECOMPLETION FORM
ACO-2 AMENDMENT TO WELL HISTORY

Operator: License # 5144
Name: Mull Drilling Company, Inc.
Address: P.O. Box 2758
City/State/Zip: Wichita, KS 67201
Purchaser: Koch Oil Company
Operator Contact Person:
Phone: (316) 264-6366, Mark Shreve

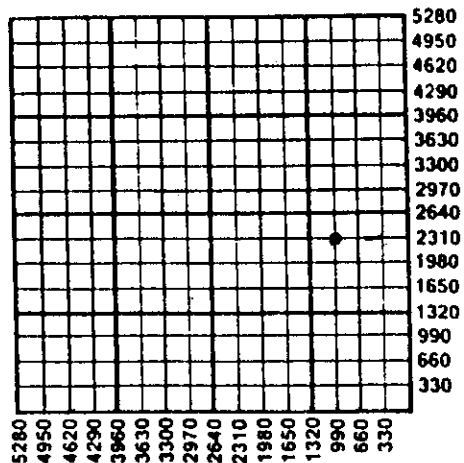
Designate Type of Original Completion
 New Well Re-Entry Workover
Date of Original Completion 9-9-81
Name of Original Operator Mull Drilling Company, Inc.
Original Well Name Magie #1

Date of Recompletion:
7-23-90 7-27-90
Commenced Completed
Re-entry Workover

Designate Type of Recompletion/Workover:
 Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)
 Deepening Re-perforation
 Plug Back PBTB
 Conversion to Injection/Disposal

Is recompleted production:
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (Disposal or Injection?) Docket No. _____

API NO. 15- 101-20,558-0001
County Lane
NW NE SE Sec. 13 Twp. 16S Rge. 30 East West
2310' Ft. North from Southeast Corner of Section
990' Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)
Lease Name Magie Well # 1
Field Name Roemer
Producing Formation Lansing KC
Elevation: Ground 2809 KB 2814



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

9-14-90

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-1 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Mark Shreve Title Petroleum Engineer Date 9/12/90

Subscribed and sworn to before me this 12th day of September 19 90
PATRICIA L. UNGLEICH
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 3/27/91
Date Commission Expires 3/27/91

SIDE TWO

Operator Name Mull Drilling Company, Inc. Lease Name Magie Well # 1

Sec. 13 Twp. 16S Rge. 30 East
 West

County Lane

RECOMPLETION FORMATION DESCRIPTION

Log Sample

| <u>Name</u> | <u>Top</u> | <u>Bottom</u> |
|-------------------------|------------|---------------|
| Lansing Kansas City 'J' | 4138' | 4162' |

ADDITIONAL CEMENTING/SQUEEZE RECORD

| Purpose: | Depth | | Type of Cement | # Sacks Used | Type and Percent Additives |
|---|-------|--------|----------------|--------------|----------------------------|
| | Top | Bottom | | | |
| <input type="checkbox"/> Perforate | | | | | |
| <input type="checkbox"/> Protect Casing | | | | | |
| <input type="checkbox"/> Plug Back TD | | | | | |
| <input type="checkbox"/> Plug Off Zone | | | | | |

| Shots Per Foot | PERFORATION RECORD | Acid, Fracture, Shot, Cement Squeeze Record |
|----------------|---|---|
| | Specify Footage of Each Interval Perforated | (Amount and Kind of Material Used) |
| 4 | 4147-4149 | 250 gal 15% MCA |
| | | |
| | | |
| | | |
| | | |

PBTD 4350 Plug Type CIBP

TUBING RECORD

Size 2 3/8" Set At 4275' Packer At _____ Was Liner Run Y N N

Date of Resumed Production, Disposal or Injection 7-27-90

Estimated Production Per 24 Hours Oil 26.70 Bbls. Water 93.40 Bbls. ---- Gas-Oil-Ratio
 Gas 0 Mcf

Disposition of Gas:
 Vented Sold Used on Lease (If vented, submit ACO-18.)