

LICENSE # 5954
Expires 6-30-84

AFFIDAVIT OF COMPLETION FORM

ACO-1

This form shall be filed in triplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ten days after the completion of the well, regardless of how the well was completed. Circle one: Oil, gas, dry, SWD, OWWO, injection. Type and 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 Midwest Corporation - Sunrise Oil Corp. API NO. 019,23,554 23355000
ADDRESS P.O. Box 98 COUNTY Chautauqua

Caney, Ks. 67333 FIELD _____

**CONTACT PERSON Barbara Bush PROD. FORMATION WISER
PHONE 316 879-2174 LEASE SWANEY

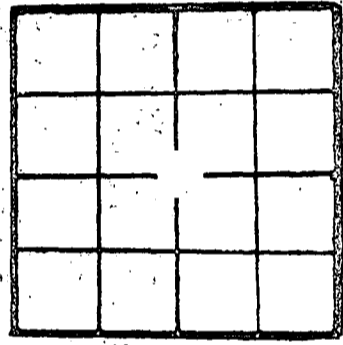
PURCHASER Sahara Corp. WELL NO. 10

ADDRESS P.O. Box 1083 WELL LOCATION 165 FWL 2145 FSL
Caney, Ks. 67333

DRILLING Sunrise Oil Corp. _____ Ft. from _____ Line and

CONTRACTOR ADDRESS P.O. Box 98 _____ Ft. from _____ Line of
Caney, Ks. 67333 the 28 SEC. 33 TWP. 13 RGE. East

PLUGGING CONTRACTOR ADDRESS _____



WELL PLAT
KCC _____
KGS _____
MISC _____
(Office Use)

TOTAL DEPTH 1260 PBT _____

SPUD DATE 2/15/82 DATE COMPLETED _____

ELEV: GR _____ DF _____ KB _____

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS (New) / (Used) casing.
CASING RECORD

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	Secks	Type and percent additives
SURFACE	9"	7"		25	Portland	9	Prem. Sel.
PRODUCTION	6 1/4	4 1/2 2 1/2	6.15 10rd	1225	Portland	30	Capro 7 to Seck

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

TUBING RECORD		
Size	Setting depth	Packer set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD
Amount and kind of material used _____ Depth interval treated _____

SAND, SALT, FRAC. FLUID - Acid 15% WK-14 - D-2

Date of first production _____ Producing method (flowing, pumping, gas lift, etc.) Gravitate

RATE OF PRODUCTION PER 24 HOURS Oil 1/2 - 1 Gas _____ Water _____ Gas-oil ratio _____
Disposition of gas (vented, used on lease or sold) _____ Perforations _____

**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

Name of lowest fresh water producing stratum _____ Depth _____

Estimated height of cement behind Surface Pipe TB TBP.

DV USED? _____

WELL LOG

Formation Description, Contents, etc.	Top	Bottom	Name	Depth
Soil-S.R.	0	2	Sand	764 769 No Show
Sand Rock	3	9	Lime-Sand	770 772 Big Salt
Sand Rock-Clay	10	25	Sand	773 790
Hard Sand	25	26	Lime Cap	891 795
Gray Shale	27	30	Sdy Sh-Lm	796 819 No Show
Sand Stone	31	41	Sdy Shale	820 827
Shale-Clay	42	55	Lime Cap R	828 839 BS
Shale-H. Sand	56	61	Coal-Lm-Sh	840 841
Gray Shale-Slate	62	92	Lime	842 843
Dark Sh-Slage	93	110	Sdy Sh-Lm	844 872 No Show
Gray Sh-Slate	111	146	Lime-Shale	873 877
Sdy Sh-Lm	147	156	Shale-Lm	878 909
Gray Sh-Slate	157	250	Gray Shale	910 945
Hard Sand-Sh	251	254	Lime Shale	946 967
Sand Gray Sh	255	270	Gray Shale	968 990
Lime	270	271	Lime	991 993
Gray Sh-Slate	272	278	Coal	994 995
Slate-Sh-Lm	279	297	Lime	996 997
Sdy Sh-Sl-Lm	298	322	Gray Sdy Sh	998 1004
Shale-Slate-Lm	323	355	Lime	1005 1006
Slate	356	361	Coal Lm-Sh	1007 1011 Gas Odor
Shale	362	374	Lime	1012 1015 False C.R
Lime	374	379	Gray Sh-Lm	1016 1022 Gas Odor
Coal	379	382	Wayside Lime Cap	1023 1036
Shale	382	422	Sandy Shale	1036 1082
Lime	422	426	Wiser Cap Lime	1082 1115
Shale	426	501	Shale	1115 1121
Lime	501	504	Shale-Sand	1121 Little Odor
Shale	504	633	Core #1	1124 1153
Lime-Sh	634	644	Gray Shale	1135 1150
Lime Cap	645	648	Sand-Shale	1151 1154 Pos. Show
Lime-Sh	649	667	Lime	1154 1155
Shale	668	671	Sdy Shale	1156 1175 Faint Show
Coal-Lm-Sh	672	677	Sand-Sh-Lm	1176 1185 Faint Show
Lime-Sh	678	681	Shale	1185 1229
Sdy Sh	682	690	Lime	1229 1249
Lime	691	697	Shale	1249 1254
Sdy Sh-Lm	698	703	Lime	1254 1260 TB
Sand-Sh-Lm	704	723		
Sdy Sh-Lm	724	763		

AFFIDAVIT

STATE OF Kansas; COUNTY OF Chautauque Mg SS,

Dickie Rolls OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH,

DEPOSES THAT HE IS operator (FOR)(OF) Midwest Corp.

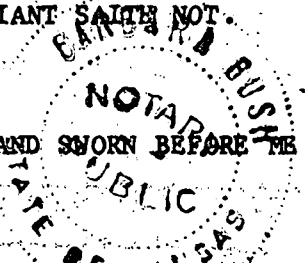
OPERATOR OF THE Swaney LEASE, AND IS DULY AUTHORIZED TO MAKE

THIS AFFIDAVIT FOR AND ON THE BEHALF OF SAID OPERATOR, THAT WELL NO. 10 ON

SAID LEASE HAS BEEN COMPLETED AS OF THE _____ DAY OF _____, 19____, AND THAT

ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT.

FURTHER AFFIANT SAITH NOT.



(s) Dickie Rolls

SUBSCRIBED AND SWORN BEFORE ME THIS 22 DAY OF Aug 19 83

NOTARY PUBLIC

MY COMMISSION EXPIRES 10-2-84