

ORIGINAL

SIDE ONE

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

Operator: License # 04570
Name Samedan Oil Corporation
Address Suite 1020
3817 N.W. Expressway
City/State/Zip Oklahoma City, OK 73112

Purchaser N/A

Operator Contact Person Debbie Kerr
Phone (405) 942-8707

Designate Type of Original Completion
 New Well Re-Entry Workover

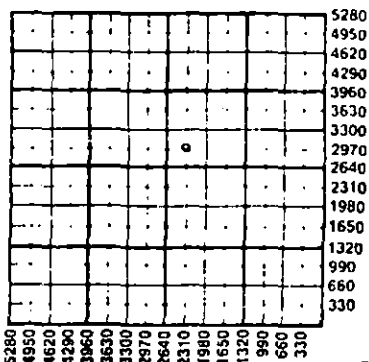
 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

Date of Original Completion: 12/23/78

DATE OF RECOMPLETION:
11/15/94 12/7/94
Commenced Completed

Designate Type of Recompletion/Workover:
 Deepening Delayed Completion
 Plug Back Re-perforation
 Conversion to Injection/Disposal
Is recompleted production: No production
 Commingled; Docket No. _____
 Dual Completion; Docket No. _____
 Other (Disposal or Injection)? _____

API NO. 15- 119-203320001
County Meade
SW SW NE Sec 30 Twp 33S Rge 28E East West
2970 Ft North from Southeast Corner of Section
2310 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)
Lease Name Mohler Unit* Well # 6
Formerly named Hissom No. 2-30
Field Name N.E. Mohler
Name of New Formation Morrow
Elevation: Ground 2371' KB 2380'
Section Plat



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)
.....
.....

REWORK 874 9-13-96
RECEIVED
STATE CORPORATION COMMISSION
DEC 19 1994
CONSERVATION DIVISION
WICHITA, KANSAS
10-19-94

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 prior to or with this form for approval of commingling or dual completions. Submit CP-4 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 Debbie Kerr Title Div. Prod. Clerk Date 12/15/94

Subscribed and sworn to before me this 15th day of December 19 94

Notary Public Karen Lennox Date Commission Expires March 16, 1995

SIDE TWO

Operator Name Samedan Oil Corporation Lease Name Mohler Unit Well # 6

Sec 30 Twp 33S Rge 28 East West County Meade

RECOMPLETED FORMATION DESCRIPTION:

Log Sample

| Name | Top | Bottom |
|---------------|-------|--------|
| Council Grove | 2850' | 3110' |
| Heebner | 4240' | 4348' |
| Morrow SS | 5600' | 5632' |

| ADDITIONAL CEMENTING/SQUEEZE RECORD | | | | | |
|---|-------|--------|----------------|--------------|--------------------------|
| Purpose: | Depth | | Type of Cement | # Sacks Used | Type & 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 SPF | 5601'-5608' | Acidize w/1500 gals 7.5% FE acid containing 1 gal/1000 ClaSta X-P, 1 gal/1000 HAT-60, 10 gal/1000 WS-44 & 90 gals/1000 D-100. |
| 4 SPF | 5614'-5629' | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

PBD 5685 Plug Type Cement

TUBING RECORD:

Size 2 3/8" Set At 5558' Packer At 5558' Was Liner Run? Y N

Date of Resumed Production, Disposal or Injection Injection not started as of 12/15/94.

Estimated Production Per 24 Hours _____ bbl/oil _____ bbl/water
 _____ MCF gas _____ gas-oil ratio