

ORIGINAL

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

API NO. 15- ¹¹⁹⁻ 110-208290001

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

County Meade
SW SE NE Sec 30 Twp 33S Rge 28 East
 West
3033 Ft North from Southeast Corner of Section
971 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Purchaser N/A

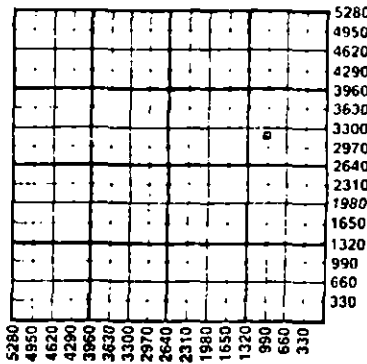
Lease Name Mohler Unit * Well # 7
Field Name N.E. Mohler

*Formerly named Otto Feldman #5.

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

Name of New Formation Morrow
Elevation: Ground 2363' KB 2374'
Section Plat

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: 4/25/91

DATE OF RECOMPLETION:
11/17/94 12/12/94
Commenced, Completed

Designate Type of Recompletion/Workover:
 Deepening Delayed Completion
 Plug Back Re-perforation
 Conversion to injection/Disposal

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)
OK 6-5-94

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

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 ACC-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 1/24/95
Subscribed and sworn to before me this 24th day of January 19 95
Notary Public Karen Lennox Date Commission Expires Mar. 16, 1995

RECEIVED
CORPORATION COMMISSION
FORM ACC-2 5/88
JAN 26 1995
DIVISION
KANSAS
1-26-95

SIDE TWO

Operator Name Samedan Oil Corporation Lease Name Mohler Unit Well # 7

Sec 30 Twp 33S Rge 28 East West County Meade

RECOMPLETED FORMATION DESCRIPTION:

Log Sample

Name Top Bottom

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)
<u>4 SPF</u>	<u>Reperf Morrow from 5602-5622'</u>	<u>Acidize old Morrow perms 2602'-2622' w/ 1400 gals 7 1/2% Fe acid containing 1 gal per 1000 gals ClaySta XP, 1 gal per 1000 gal HUI-60, 10 gal per 1000 gal WS-44 and 90 gal/1000 gal D-100 Solvent.</u>

PBTD 5634 Plug Type Cement

TUBING RECORD:

Size 2 3/8" Set At 5543' Packer At 5543 Was Liner Run? Y N

Date of Resumed Production, Disposal or Injection 11/16/95

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

