

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 119-20,9520001 **ORIGINAL**
County Meade
NE-SW-NE Sec. 6 Twp. 33S Rge. 29 XX^E_W

1140 Feet from S (circle one) Line of Section
1368 Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name Angell Unit Well # 3

Field Name Angell
Producing Formation Pennsylvanian Sand - Water Source
Morrow - Injection Zone

Elevation: Ground 2708 KB 2713

Total Depth 5832 PBD 5770

Amount of Surface Pipe Set and Cemented at 1510 Feet
Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan REWORK JK 6-3-97
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. Twp. S Rng. E/W
County _____ Docket No. _____

Operator: License # 04570

Name: Samedan Oil Corporation

Address 9400 North Broadway
Suite 700

City/State/Zip Oklahoma City, OK 73114

Purchaser: NA

Operator Contact Person: Debbie Kerr

Phone (405) 475-2000

Contractor: Name: Midwestern Well Service

License: 5112

Wellsite Geologist: NA

Designate Type of Completion
_____ New Well _____ Re-Entry X Workover

_____ Oil _____ SWD _____ SLOW _____ Temp. Abd.
_____ Gas XXX ENHR _____ SIGW
_____ Dry X Other (Core, ASD, Expl., Cathodic, etc)
Conversion to Dump Flood

If Workover:

Operator: Samedan Oil Corporation

Well Name: Angell Unit #3

Comp. Date 11-95 Old Total Depth 5832

Deepening _____ Re-perf. X Conv. to Inj. XXX Dump Flood

Plug Back _____ PBD _____

Commingled _____ Docket No. 4978

Dual Completion _____ Docket No. _____

X Other (SWD or Inj?) Docket No. E-27,163

4-17-97

4-30-97

Spud Date of START Date Reached TD _____ Completion Date of
OF WORKOVER WORKOVER

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130'S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 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 all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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 Regulatory Clerk III Date 5/27/97

Subscribed and sworn to before me this 27th day of May,
19 97.

Notary Public Karen Lerner

Date Commission Expires March 16, 1999

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received

Distribution
✓ KCC _____ SWD/Rep _____ NGPA
_____ KGS _____ Plug _____ Other
(Specify)

Form ACO-1 (7-91)

5-29-97

RECEIVED
KANSAS CORP CO.
MAY 29 4 12 42

SIDE TWO

Operator Name: Samedan Oil Corporation Lease Name Angell Unit Well # 3
 Sec. 6 Twp. 33S Rge. 29 East County Meade West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets.)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)
 List All E.Logs Run:

<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample		
Name	Top	Datum
13 Finger	5639'	(2926')
Morrow Shale	5692'	(2979')
Morrow Sand	5704'	(2991')

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	24#	1510'	65/35 Poz Common	600 150	6% gel 1/4# Gilson. 1/4 pps Floseal 3% CC
Production	7 7/8"	5 1/2"	15.5#	5829'	Midco 2 Premium	230 90	1/4 pps Floseal 1% CC, 10% CA seal 1% 8% Halad pps Floseal KCL water

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<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 - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth
4 SPF	5702' - 5714'	
2 SPF	3210' - 3775'	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8"	3159'	3159'	
Date of First, Resumed Production, SWD or Inj. MIT test run 4/29/97	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
	NA	NA	1001	NA NA

Disposition of Gas: NA METHOD OF COMPLETION Production Interval 3210' - 3775'
 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Dump Flood
 (If vented, submit ACO-18.) Other (Specify) _____