

ORIGINAL

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

API NO. 15- 119-20,711-0001
County Meade
-SE -NW -SE Sec. 35 Twp. 32S Rge. 30 X W
1650 Feet from (S)N (circle one) Line of Section
1650 Feet from (S)W (circle one) Line of Section

Operator: License # 31563
Name: LUKANAH PETROLEUM, INC.
Canadian Lynx Oil & Gas Inc.
Address 6 Plum Blossom Place

Footages Calculated from Nearest Outside Section Corner:
NE, (S), NW or SW (circle one)
Lease Name Holmes Well # 1
Field Name Stevens

City/State/Zip The Woodlands, TX 77381
Purchaser: Coastal States Trading, Inc.

Producing Formation Chester/Morrow
Elevation: Ground 2725' KB 2738'
Total Depth 6000' PBTD 5880'

Operator Contact Person: Jason Sizemore
Phone (409) 321-3179

Amount of Surface Pipe Set and Cemented at 1642 Feet
Multiple Stage Cementing Collar Used? Yes XX No

Contractor: Name: PATRICK'S WELL SERVICE
License: 7547

If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Wellsite Geologist: None

Designate Type of Completion
____ New Well ____ Re-Entry XX Workover

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

XX Oil ____ SWD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
RECEIVED
STATE CORPORATION COMMISSION

If Workovers:
Operator: ROSEL ENERGY, INC

Location of fluid disposal if hauled offsite:
AUG 25 1995
8-25-95

Well Name: Holmes No. 1
Comp. Date 9-24-85
02/10/95 Old Total Depth 6000'

Operator Name _____
Lease Name _____
W License Nos _____

____ Deepening XX Re-perf. ____ Conv. to Inj/SWD
____ Plug Back ____ PBTD
XX Commingled ____ Docket No. ____
____ Dual Completion ____ Docket No. ____
____ Other (SWD or Inj?) Docket No. ____

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

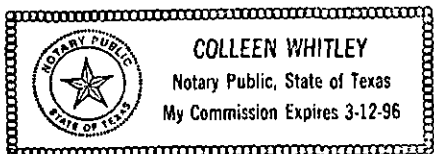
2-16-95 2-18-95
Date of START Date Reached TD Completion Date of
OF WORKOVER WORKOVER

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 [Signature]
Title PRESIDENT Date 8/22/95
Subscribed and sworn to before me this 22nd day of August,
19 95.
Notary Public Colleen Whitley
Date Commission Expires 3-12-96

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)



SIDE TWO

Operator Name Canadian Lynx Oil & Gas Lease Name Holmes Well # 1

Sec. 35 Twp. 32S Rge. 30 East West County Meade

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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				

CASING RECORD <input 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

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		Amount and Kind of Material Used	Depth
2	5658'	5672'	None	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	02-18-95				Producing Method	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil 2 Bbls.	Gas 10 Mcf	Water 0 Bbls.	Gas-Oil Ratio 3300	Gravity 30°	

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: 5825'-35' / 5658'-5672'