

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

API NO. 15-097-21438 0000

Plugged
ORIGINAL 16-99

County Kiowa County, Kansas

C-NW - SE - SW Sec. 17 Twp. 28 Rge. 16 XW^E

Operator: License # 32246

Name: Samotler Petroleum LLC

Address 2603 Oak Lawn #300

City/State/Zip Dallas TX 75219

Purchaser: _____

Operator Contact Person: Russell Lawrence

Phone (214) 523-0211

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: Bob & Kendel Posey

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBDT

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

04-08-99 04-15-99 04-16-99
Spud Date Date Reached TD Completion Date

990 Feet from S/N (circle one) Line of Section

1650 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 Bergner Well # 2

Field Name Haviland South

Producing Formation NONE

Elevation: Ground 2178' KB 2186'

Total Depth 4850' PBDT 4800'

Amount of Surface Pipe Set and Cemented at 305 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan P&A 7-20-99 *u.c.*
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if ^{RECEIVED} hauled offsite: KANSAS CORPORATION COMMISSION

Operator Name _____ 5-17-1999

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. Wichita, KS Rge. _____ E/W

County _____ Docket No. _____

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]

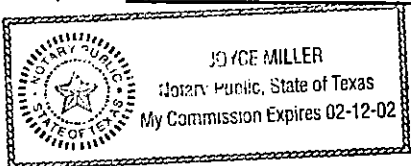
Title C.O.O. Date 5-4-99

Subscribed and sworn to before me this 4 day of May, 1999.

Notary Public Joey Miller

Date Commission Expires _____

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep <input type="checkbox"/> NGPA
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug <input type="checkbox"/> Other (Specify)



Operator Samuel Petroleum, LLC

Lease Name Bergner

Well # 2

Sec. 17 Twp. 28 Rge. 16

East
 West

County Kiowa County, Kansas

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: Dual Induction
Nuetron Porosity
Gamma

Name	Top	Datum
Topeka	3680	-1508
Heebner	3968	-1800
Lansing	4196	-2012
Lansing A	4216	-2049
Cherokee	4670	-2510
Mississippi	4752	-2570
Kinderhook	4786	-2610

CASING RECORD

New 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#	305'	Common	250	2%cc

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	1040'/340'	Class CC	80/40	Well was dry hole-plugged
<input checked="" type="checkbox"/> Plug Back TD				
<input checked="" type="checkbox"/> Plug Off Zone	40'/15'	Class C	10/10	

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

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. P&A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<u>N-A</u>				

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease
(If vented, submit ACO-18.)

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

ALLIED CEMENTING CO., INC.

2559

Federal Tax I.D.# 45-0727860

REMI 10 PC. BOX 5
RUSSELL, NE. NSAS 67665

SERVICE POINT

DATE	TIME	TYPE	RANGE	CALLER OUT	ON LOCATION	JOB START	JOB FINISH
4-8-99	7:00 PM	2S	114	7:00 PM	10:00 PM	12:45 AM	1:15 AM
LOCATION	Howland, Is, ME, Yinta			COUNTY	Kennebec	STATE	ME

CONCRETE	TYPE	SIZE	DEPTH
305	305	305	305
MINIMUM	MINIMUM	MINIMUM	MINIMUM
SHOE JOINT	SHOE JOINT	SHOE JOINT	SHOE JOINT

OWNER	CEMENT	AMOUNT ORDERED
Same	250	250
COMMON	250	1587.50
POZMIX		
GEL		
CHLORIDE	5	110.00
HANDLING	250	262.50
MILEAGE	17	120.00

TOTAL 2720.00

EQUIPMENT

TRUCK	CHARGER	TRUCK
3	3	3

REMARKS:

REMARKS: 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

SERVICE

DEPTH OF JOB	PUMP TRUCK CHARGE	EXTRA FOOTAGE	MILEAGE	PLUG
305	470.00	5	17	45.00

TOTAL 563.45

FLOAT EQUIPMENT

TOTAL

Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment
at the address and help to assist owner or
agent to be as listed. The above work was
done under the supervision of owner agent or
contractor and you understand the "TERMS AND
CONDITIONS" listed on the reverse side.

SIGNATURE: Mike Godfrey

TAX: _____
TOTAL CHARGE \$ 2738.45
DISCOUNT \$ 242.7 IF PAID IN 30 DAYS
PRINTED NAME: Mike Godfrey

7/21/99

ALLIED CEMENTING CO

3167936099

P.01

ALLIED CEMENTING CO., INC.

9620

Federal Tax I.D. # 48-0127860

ADDRESS: P.O. BOX 31
RUSSELL, KANSAS 67663

SERVICE POINT:
Medicine Lodge

DATE	12-17	TWP	28S	RANGE	11W	CALL TO ORDER	3:00 AM	ON LOCATION	5:00 AM	JOB START	12:45 AM	JOB FINISH	1:00 PM
LOCATION	Haviland Main street +54					COUNTY	Kiowa	STATE	KS				
OWNER	Somatter Petroleum LLC												

DEPTH	1040
MINIMUM	
SPRIG JOINT	

CEMENT AMOUNT ORDERED	155 SK 60:40:6	
COMMON A	93	@ 6.35 590.55
POZMIX	63	@ 3.25 201.50
GEL	3	@ 9.50 28.50
CHLORIDE		@
HANDLING	155	@ 1.05 162.75
MILEAGE	155 X 18	.04 111.60

EQUIPMENT

CEMENTER	Carl Dalling
DRIVER	Steve Windsor
CHIEF	Mark Baurgardt

TOTAL \$1142.40

REMARKS:

10 SK	1040'
10 SK	340'
10 SK	40'
2 SK	Mouse Hole
2 SK	Red Hole

SERVICE

DEPTH OF JOB	1040'	
PUMP TRUCK CHARGE		470.00
EXTRA FOOTAGE		@
MILEAGE	18	@ 2.85 51.30
PLUG WOODEN 2 3/8"		@ 23.00 23.00

TOTAL \$544.30

FLOAT EQUIPMENT

	@	
	@	
	@	
	@	

TOTAL

STATE _____ ZIP _____

We hereby requested to rent cementing equipment and furnish a foreman and helper to assist owner or agent to do work as listed. The above work was done under the supervision of owner agent or representative. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

Mike Godfrey

TAX _____
 TOTAL CHARGE \$1626.70
 DISCOUNT 337.34
 Net \$ 1349.36
 Mike Godfrey
 PRINTED NAME



CEMENTING LOG

STAGE NO.

Well No. 12-17
 Rig Duke
 Field 12-255-11-1
 Location 12-255-11-1
 State KS
 Weight 16.60 Collar 16.60

CEMENT DATA:
 Special type Freshwater
 Ann. Skts Yield _____ ft³/sk Density _____ PPG

LEAD: Pump Time 60:40:6 Excess _____
 Ann. 1.55 Skts Yield 1.56 ft³/sk Density 15.4 PPG

WATER: Lead 2.8 (gal/sk) Total 29 (gal/sk) Total _____ Bbls

Fund Trucks Used 343 Stone Winsor
 Bulk Equip. 301 Mark BURGARDT

Ann.	Skts Yield	ft ³ /sk Density	PPG
16.60	16.60	16.60	
16.59	16.59	16.59	
20.37	20.37	20.37	
24.64	24.64	24.64	
22.72	22.72	22.72	

Flot Equip. Manufacturer _____
 Flot Type _____ Depth _____
 Controller: Quantity _____ Plug Type wooden Run _____
 Shape Collar _____
 Special Equip _____
 Disp Fluid Type freshwater Ann _____ Wtts. Weight _____ PPG
 Mud Type _____ Weight _____ PPG

Operator Mike Goodfrey Supervisor Carl Balding

Time	Ann	Skts Yield	FLUID PUMPED DATA			REMARKS
			ANNULUS	TOTAL	Pumped Per Trip Present	
						on location + Rig up.
			8.1/2	8.1/2	4	1st plug 10'40'
			20.37	22	3	Start Freshwater spacer
			37.5	7	3	Dump 80 sk 60:40:6
						Start Freshwater Displacement
			44	6.5	4	2nd Plug 340
			55	11	3	Start Freshwater spacer
			56.75	1.5	3	Dump 40 sk 60:40:6
						Start Displacement
			59.75	2.75	2	3rd Plug 40'
						Dump 150 sk 60:40:6
			62	2.75	3	Mouse Hole 10 sk
			64	4	3	Rat Hole 15 sk