

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 30993  
Name: M.A.E. RESOURCES, INC.  
Address: 20655 SW 700 RD SW  
City/State/Zip: WELDA, KS 66091  
Purchaser: CRUDE MARKETING  
Operator Contact Person: CLYDE BOOTS  
Phone: (620) 852 3574  
Contractor Name: KIMZEY DRILLING CO.  
License: 33030

Wellsite Geologist: BRAD COOK  
Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:  
Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
 Deepening  Re-perf.  Conv. to Enhr./SWD  
 Plug Back \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?) \_\_\_\_\_ Docket No. \_\_\_\_\_

1-7-03 1-9-03 1-13-03  
Spud Date or \_\_\_\_\_ Date Reached TD \_\_\_\_\_ Completion Date or  
Recompletion Date \_\_\_\_\_ Recompletion Date \_\_\_\_\_

API No. 15-107-23698-0000  
County: LINN  
SW NW SW Sec. 10 Twp. 21 S. R. 22  East  West  
1815 feet from  N (circle one) Line of Section  
5115 feet from  W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW  SW 26  
Lease Name: HILL Well #: \_\_\_\_\_

Field Name: CENTERVILLE  
Producing Formation: SQUIRREL  
Elevation: Ground: N/A Kelly Bushing: N/A  
Total Depth: 551' Plug Back Total Depth: 549'  
Amount of Surface Pipe Set and Cemented at 28 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from 551'  
feet depth to SURFACE w/ 59 \_\_\_\_\_ sx cm.

Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit)  
**WELL DRILLED WITH FRESH POND WATER.**  
Chloride content NONE ppm Fluid volume 150 bbls  
Dewatering method used EVAPORATION  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
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 of 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: Clyde Boots  
Title: STOCKHOLDER Date: 1-28-03  
Subscribed and sworn to before me this 28TH day of JANUARY,  
2003  
Notary Public: Joan Boots

**KCC Office Use ONLY**  
 Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Date Commission Expires 12-10-2005  
OFFICIAL SEAL  
MY COMMISSION EXPIRES  
December 12, 2005

OFFICIAL SEAL  
JOAN BOOTS  
MY COMMISSION EXPIRES

Operator Name: M.A.E. RESOURCES, INC. Lease Name: HILL Well #: 26  
 Sec. 10 Twp. 21 S. R. 22  East  West County: LINN

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

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:  
**GAMMA RAY & NEUTRON**

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
SOIL & CLAY	0	8
LIME	8	9
SHALE	9	34
LIME	34	44
SHALE & LIME	44	515
BROKEN SAND	515	521
SAND, OIL	521	533
DARK SHALE	533	551

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	# Sacs Used	Type and Percent Additives
SURFACE	10 1/4"	7"		28'	PORTLAND	5	NONE
PRODUCTION	5 5/8"	2 7/8"		550'	OWC	59	FLO SEAL

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	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	
25 TOTAL SHOTS	524.0 TO 530.0	25 SHOTS 2" DML RTG	524-530'
		50 GAL. ACID	500-550'

TUBING RECORD		Size	Set At	Packer At	Liner Run
		1"	548'	NONE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
1-30-03		<input type="checkbox"/> Flowing <input checked="" 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
	10	0	0		31

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled

(If vented, Sumit ACO-18.) **NO GAS**  Other (Specify)