

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 30993  
Name: M.A.E. RESOURCES, INC.  
Address: 20655 SW 700 RD  
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. \_\_\_\_\_  
1-9-03    1-10-03    1-13-03  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 107-23699-0000  
County: LINN  
SW NW NW SW Sec. 10 Twp. 21 S. R. 22  East  West  
2145 feet from  S  N (circle one) Line of Section  
5115 feet from  E  W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW  SW  
Lease Name: HILL Well #: 27

Field Name: CENTERVILLE  
Producing Formation: SQUIRREL

Elevation: Ground: N/A Kelly Bushing: N/A  
Total Depth: 545' Plug Back Total Depth: DRY. PLUGGED

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 PLUGGED  
feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan** WELL DRILLED WITG  
(Data must be collected from the Reserve Pit) 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.

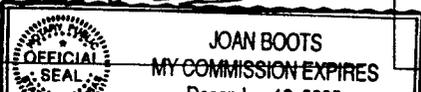
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Clyde Boots  
Title: STOCKHOLDER Date: 1-31-2003

Subscribed and sworn to before me this 31ST day of JANUARY,

2003

Notary Public: Joan Boots  
Date Commission Expires: 12-12-2005



**KCC Office Use ONLY**

Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 OIC Distribution

Operator Name: M.A.E. RESOURCES, INC. Lease Name: HILL Well #: 27  
 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:

**NONE. DRY HOLE**

DRILLERS LOG		
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
SOIL & CLAY	0	3
SHALE	3	30
LIME	30	37
SHALE & LIME	37	545

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used <b>NO TUBING. DRY HOLE</b>							
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 1/2"	7"		28'	PORTLAND	5	NONE

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
NO SHOTS.	DRY HOLE		

TUBING RECORD Size Set At Packer At Liner Run  
**NONE. DRY HOLE**  Yes  No

Date of First, Resumed Production, SWD or Enhr. Producing Method  
**DRY . PLUGGED WELL. PAPERS SENT TO STATE**  Flowing  Pumping  Gas Lift  Other (Explain)

Estimated Production Per 24 Hours Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas METHOD OF COMPLETION Production Interval  
 Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled  
*(If vented, Submit ACO-18.)*  Other (Specify)