

17-215-22E

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

Operator: License # 30993

Name: M.A.E. RESOURCES, INC.

Address R#1

City/State/Zip WELDA, KS. 66091

Purchaser: E.O.T.T.

Operator Contact Person: CLYDE BOOTS

Phone (316) 852 3574

Contractor: Name: EVANS ENERGY DEVELOPMENT

License: 08509

Wellsite Geologist: CHAS. HARDESTY

Designate Type of Completion  
XXX New Well Re-Entry Workover

XXX Oil SWD SLOW Temp. Abd.

Gas ENHR SIGW

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

If Workover/Re-Entry: old well info as follows:

Operator:

Well Name:

Comp. Date Old Total Depth

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PSTD

Commingled Docket No.

Dual Completion Docket No.

Other (SWD or Inj?) Docket No.

11-2-95 11-3-95 11-3-95

Spud Date Date Reached TD Completion Date

API NO. 15- 107-235080000

County LINN

APR. C NE/4.17 Sec. 17 Twp. 21 Rge. 22 XX

1155 Feet from S/W (circle one) Line of Section

1540 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 FREAR Well # 1

Field Name BUSH CITY

Producing Formation SQUIRREL

Elevation: Ground N/A KB N/A

Total Depth 500 PBTD 498

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes XX No

If yes, show depth set Feet

If Alternate II completion, cement circulated from 500

feet depth to SURFACE w/ 2% 75 sx cnt.

Drilling Fluid Management Plan alt # 5-7-96  
(Data must be collected from the Reserve Pit) LV

WELL WAS DRILLED WITH FRESH POND WATER

Chloride content NONE ppm Fluid volume 100 bbl.

Dewatering method used EVAPORATION

Location of fluid disposal if hauled offsite:

Operator Name

Lease Name License No.

Quarter Sec. Twp. Rge. E/W

County Docket No.

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Verby Building, 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 Clyde Boots

Title STOCKHOLDER Date 1-25-96

Subscribed and sworn to before me this 25th day of JANUARY 19 96.

Notary Public Joan Boots

Date Commission Expires 11-28-97

JOAN BOOTS  
Notary Public - State of Kansas  
My Appt. Expires 11-28-97

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"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input checked="" type="checkbox"/> NGPA
<input type="checkbox"/>		<input type="checkbox"/> Other (Specify)

Form ACO-1 (7-91)



SIDE TWO

Operator Name M.A.E. RESOURCES, INC. Lease Name FREAR Well # 1  
Sec. 17 Twp. 21 Rge. 22 ☒ East ☐ West  
County LINN

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:

☒ Log

Formation (Top), Depth and Datum

☐ Sample

Name

Top

Datum

SOIL	0	4
LIME	4	10
SHALE	10	17
LIME	17	61
SHALE & LIME	61	470
SAND	470	481
SHALE	481	500

GA A RAY &amp; NEUTRON

## 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	9 7/8 &	6 5/8		20	PORTLAND	3	NONE
PRODUCTION	5 5/8	2 7/8		498	PORTLAND	75	5% SALT
					A.		

## 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
13 TOTAL.	13 SHOTS 474-480	13 SHOTS 2 1/8 ALUM.	474-480
		JETS F.W.	
		50 GAL ACID	450-498

TUBING RECORD	Size 1"	Set At 496	Packer At NONE	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	1-16-96	Producing Method <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. 5	Gas Mcf 0	Water Bbls. 4	Gas-Oil Ratio N/A Gravity 32

Disposition of Gas:

☐ Vented ☐ Sold ☐ Used on Lease  
(If vented submit ACD-1A)

METHOD OF COMPLETION

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Cemented

Production Interval