

17-215-22E

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

API NO. 15- 107-235070000 **COPY**

County LINN

C - S/2 - NW - NE Sec. 17 Twp. 21 Rge. 22 **XXX E**

1155 Feet from S (circle one) Line of Section

1980 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(NE, SE, NW or SW (circle one))

Lease Name FREAR Well # 2

Field Name BUSH CITY

Producing Formation SQUIRREL

Elevation: Ground N/A KB N/A

Total Depth 534 PBD NO PIPE

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes **XXX** No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from DRY

feet depth to WILL PLUG w/ _____ sx cmt.

Drilling Fluid Management Plan D & A 5-8-96
(Data must be collected from the Reserve Pit)
WELL DRILLED WITH FRESH POND WATER

Chloride content NONE ppm Fluid Volume 100 bbls

Dewatering method used EVAPORATION

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License _____

Quarter _____ Sec. _____ Twp. _____ S' Rng. _____ E/W

County _____ Docket No. _____

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 _____

Oil _____ SWD _____ SIOW _____ Temp. Abd.
Gas _____ ENHR _____ SIGW _____
XX Dry _____ Other (Core, WSW, 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 _____ PBD _____

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (SWD or Inj?) _____ Docket No. _____

11-3-95 11-6-95 WILL PLUG

Start Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover, or conversion of a well. Rules 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 1996.

Notary Public Joan Boots

Date Commission Expires 11-28-97

K.C.C. OFFICE USE ONLY			
F	Letter of Confidentiality Attached		
C	Wireline Log Received		
C	Geologist Report Received		
	Distribution to _____		
	KCC	SWD/Rep	NGPA
	KGS	Plug	Other
			(Specify)

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

Operator Name M.A.E. RESOURCES, INC. Lease Name FREAR Well # 2
 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" 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	SOIL & LIME	0	2
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CLAY	2	4
List All E.Logs Run:		SHALE	4	39
		LIME & SHALE	39	512
		SAND	512	514
		SHALE	514	534

GAMMA RAY & NEUTRON
 NO LOG DRY HOLE

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	# Sacks Used	Type and Percent Additives
SURFACE	9 7/8	6 5/8		20	MONARCH	5	NONE
NO PRODUCTION CASING- DRY HOLE							

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
NO SHOTS	DRY HOLE	

TUBING RECORD	Size NONE	Set At	Packer At NONE	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas: Vented Sold Used on Lease (submit ACP-18.)

METHOD OF COMPLETION: Open Hole Perf. Partially Comp. Commingled

Production Interval _____