

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

AUG 07 2002

KCC WICHITA

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

Designate Type of Completion:

☒ New Well ☐ Re-Entry ☐ Workover
☐ Oil ☐ SWD ☐ SLOW ☐ Temp. Abd.
☐ Gas ☐ ENHR ☐ SIGW
☐ Dry ☒ Other (Core, WSW, Expl., Cathodic, etc)
INJECTION WELL

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. _____

6-11-02 6-18-02 6-18-02
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 003-24189-0000
County: ANDERSON
NE SW SE NE Sec. 29 Twp. 22 S. R. 19 ☒ East ☐ West
3080 feet from S / N (circle one) Line of Section
880 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) ☒ NE ☐ SE ☐ NW ☐ SW
Lease Name: JCB UNIT #1 Well #: I-26

Field Name: COLONY WELDA

Producing Formation: SQUIRREL

Elevation: Ground: N/A Kelly Bushing: N/A

Total Depth: 926' Plug Back Total Depth: 924'

Amount of Surface Pipe Set and Cemented at 40 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 926'
feet depth to SURFACE w/ 115 ex cml.

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.

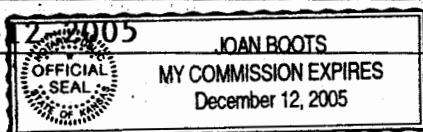
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Clyde Boots
Title: STOCKHOLDER Date: 8-3-2002

Subscribed and sworn to before me this 3RD day of AUGUST

2002
Notary Public: Joan Boots

Date Commission Expires: 12-2-2005



KCC Office Use ONLY

☐ Letter of Confidentiality Attached
If Denied, Yes ☐ Date: _____
☐ Wireline Log Received
☐ Geologist Report Received
☐ UIC Distribution

27685

Operator Name: M.A.E. RESOURCES, INC. Lease Name: JCB UNIT #1 Well #: I #26
Sec. 29 Twp. 22 S. R. 19 ☒ East ☐ West County: ANDERSON

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 (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	0 1
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CLAY	1 32
List All E. Logs Run:		SHALE	32 40
		LIME	40 73
		SHALE & LIME	73 866
		OIL SAND	866 904
		SHALE	904 926

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"		40'	PORTLAND	9	NONE
PRODUCTION	5 5/8"	2 7/8"		924'	OWC	115	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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
21 TOTAL	21 SHOTS 890'- 900'	2" DML RTG	890-900
		50 GAL ACID	860-TD

TUBING RECORD	Size	Set At	Packer At	Liner Run
NO TUBING. INJECTION WELL NONE				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method		
WHEN STATE APPROVES		<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	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Ventd <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Sumit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perl. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	
	<input type="checkbox"/> Other (Specify)	

NO GAS