

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

Operator: License # 5259

Name: MAI OIL OPERATIONS, INC.

Address P.O. BOX 33

City/State/Zip RUSSELL, KS. 67665

Purchaser: NCRA

Operator Contact Person: ALLEN BANGERT

Phone (785) 483 2169

Contractor: Name: MURFIN DRILLING CO.

License: 30606

Wellsite Geologist: TODD MORGENSTERN

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Conmingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

6-15-2002 6-20-2002 6-20-2002
Spud Date Date Reached TD Completion Date

API NO. 15- 163-23,346-0000

County ROOKS

-SW-NE-SW Sec. 21 Twp. 10 Rge. 20 ^E_W

1650 Feet from S/N (circle one) Line of Section

1650 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 VINZANT Well # 1

Field Name TRICO

Producing Formation ARBUCKLE

Elevation: Ground 2214' KB 2219'

Total Depth 3870' PBDT 3837'

Amount of Surface Pipe Set and Cemented at 235 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1657

feet depth to SURFACE w/ 250 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 5000 ppm Fluid volume 200 bbls

Dewatering method used LET DRY AND BACKFILL

Location of fluid disposal if hauled offsite:

Operator Name _____

Lease Name _____ License No. _____

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

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 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 Allen Bangert

Title PRODUCTION SUPERINTENDENT Date 9-23-2002

Subscribed and sworn to before me this 24 day of September,
2002

Notary Public Christa Lubric

Date Commission Expires _____

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input type="checkbox"/>	KCC	<input checked="" type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input type="checkbox"/> NGPA
<input type="checkbox"/>		<input type="checkbox"/> Other
(Specify)		

Operator Name MAI OIL OPERATIONS, INC. Lease Name VINZANT Well # 1

Sec. 21 Twp. 10 Rge. 20 East West
 County ROOKS

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No List All E.Logs Run: COMPENSATED NEUTRON-DENSITY LOG DUAL INDUCTION LOG SONIC	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Datum</th> </tr> </thead> <tbody> <tr> <td>ANHYDRITE</td> <td>1704</td> <td>515</td> </tr> <tr> <td>BASE ANHYDRITE</td> <td>1753</td> <td>475</td> </tr> <tr> <td>TOPEKA</td> <td>3267</td> <td>-1048</td> </tr> <tr> <td>HEEBNER</td> <td>3470</td> <td>-1251</td> </tr> <tr> <td>TORONTO</td> <td>3490</td> <td>-1271</td> </tr> <tr> <td>LANSING</td> <td>3507</td> <td>-1288</td> </tr> <tr> <td>BASE KANSAS CITY</td> <td>3726</td> <td>-1507</td> </tr> <tr> <td>ARBUCKLE</td> <td>3810</td> <td>-1591</td> </tr> </tbody> </table>	Name	Top	Datum	ANHYDRITE	1704	515	BASE ANHYDRITE	1753	475	TOPEKA	3267	-1048	HEEBNER	3470	-1251	TORONTO	3490	-1271	LANSING	3507	-1288	BASE KANSAS CITY	3726	-1507	ARBUCKLE	3810	-1591
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	12 1/4"	8 5/8"	20#	235	60-40poz	150	2% gel 3% CC
PRODUCTION	7 7/8"	5 1/2"	14#	3864'	ASC	125	

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
4	3810-15'	500GAL 15%FENE

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
		2 7/8"	3833'		
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)		
7-12-2002					
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	25		100		

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled 3810-15'

Other (Specify) _____

Production Interval