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KANSAS CORPORATION COMMISSION

MAY 16 2007

CONSERVATION DIVISION
WICHITA, KS

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5259
Name: Mai Oil Operations, Inc.
Address: P.O. Box 33
City/State/Zip: Russell, Ks. 67665
Purchaser: N/A
Operator Contact Person: Allen Bangert
Phone: (785) 483 2169
Contractor: Name: Southwind Drilling, Inc.
License: 33350
Wellsite Geologist: Kitt Noah

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. ____

1-16-07	1-24-07	1-24-07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 009-25008-0000
County: Barton
SE - NW - NW - Sec. 19 Twp. 16 S. R. 11 ☐ East ☑ West
1030' FNL feet from S / N *(circle one)* Line of Section
850' FWL feet from E / W *(circle one)* Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Hoffman Well #: 1
Field Name: Wildcat
Producing Formation: N/A
Elevation: Ground: 1880' Kelly Bushing: 1888'
Total Depth: 3410' Plug Back Total Depth: 3410'
Amount of Surface Pipe Set and Cemented at 397' Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☐ No
If yes, show depth set ____ Feet
If Alternate II completion, cement circulated from ____
feet depth to ____ w/ ____ sx cmt.

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

Chloride content 61000 ppm Fluid volume 300 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. 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: Allen Bangert
Title: Prod. Supt. Date: 5-15-07

Subscribed and sworn to before me this 15 day of May, 2007.

Notary Public: Sherri Underwood
Date Commission Expires: 10-30-08

SHERRI UNDERWOOD
NOTARY PUBLIC
STATE OF KANSAS
My Appt Exp. ____

KCC Office Use ONLY

N Letter of Confidentiality Received
If Denied, Yes ☐ Date: ____
✓ Wireline Log Received
✓ Geologist Report Received
____ UIC Distribution

ICO1948

Side Two

Operator Name: Mai Oil Operations, Inc. Lease Name: Hoffman Well #: 1

Sec. 19 Twp. 16 S. R. 11 ☐ East ☑ West County: Barton

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:

CDNL, DIL, Sonic, Micro

☑ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
Anhydrite	743'	+1145
Base Anhydrite	770'	+1118
Topeka	2654'	-766
Heebner	2941'	-1053
Toronto	2956'	-1068
Lansing	3052'	-1164
Base Kansas City	3284'	-1396
Arbuckle	3344'	-1456

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	12 1/4"	8 5/8"	20#	397'	Common	225	2% Gel, 3% CC

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: ___ Perforate ___ Protect Casing ___ Plug Back TD ___ Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives

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

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TUBING RECORD Size Set At Packer At Liner Run ☐ Yes ☐ No

Date of First, Resumerd Production, SWD or Enhr. Producing Method ☐ 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
(If vented, Submit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled _____
☐ Other *(Specify)* _____