

FORM MUST BE TYPED

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

DESCRIPTION OF WELL AND LEASE

ORIGINAL

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: MURFIN DRILLING CO., INC.

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
Coringed _____ Docket No. _____
Dual Completion _____ Docket No. _____
Other (SWD or Inj?) Docket No. _____

10-26-04 10-31-04 10-31-04
Spud Date Date Reached TD Completion Date

SIDE ONE

API NO. 15- 163-23432-00-00

County ROOKS

90° N SE-NE SE Sec. 28 Twp. 9 Rge. 19 E

1240 Feet from S/N (circle one) Line of Section

330 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 GILLILAND Well # 2

Field Name ZURICH TOWNSITE

Producing Formation N/A

Elevation: Ground 2199' KB 2204'

Total Depth 3725' PBTD _____

Amount of Surface Pipe Set and Cemented at 218' 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 22,000 ppm Fluid volume 100 bbls

Dewatering method used LET DRY

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 PROD. SUPT. Date 11-30-04

Subscribed and sworn to before me this 30th day of November,
2004.

Notary Public Susan Tommasino

Date Commission Expires _____

RECEIVED



DEC 02 2004

KCC WICHITA

K.C.C. OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 Geologist Report Received

Distribution
 KCC
 KGS SWD/Rep
 Plug

NGPA
Other
(Specify)

SIDE TWO

Operator Name MAI OIL OPERATIONS, INC.Lease Name GILLILAND Well # 2Sec. 28 Twp. 9 Rge. 19 EastCounty ROCKS West

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.) Yes No

Samples Sent to Geological Survey

 Yes No

Cores Taken

 Yes NoElectric Log Run
(Submit Copy.) Yes NoList All E.Logs Run: RADIATION-GUARD, SONIC

Log	Formation (Top), Depth and Datums	Sample	
		Top	Datum
ANHYDRITE	1584'	620	
BASE ANHY	1616'	588	
TOPEKA	3150'	-946	
HEEPNER	3355'	-1151	
TORONTO	3376'	-1172	
LANSING	3394'	-1190	
BASE KANSAS CITY	3609'	-1405	
CONGLOMERATE	3614'	-1410	
WEATHERED ARBUCKLE	3634'	-1430	
ARBUCKLE	3644'	-1440	

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#	218'	COMMON	160	2% GEL 3% CC

ADDITIONAL CEMENTING/SQUEEZE RECORD

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

TUBING RECORD	Size	Set At	Packer At	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: METHOD OF COMPLETION

 Vented Sold Used on Lease
(If vented, submit ACO-18.)

Production Interval

Open Hole Perf. Dually Comp. Commingled _____

Other (Specify) _____