

ORIGINAL

FORM MUST BE TYPED

SIDE ONE

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: N/A
Operator Contact Person: ALLEN BANGERT
Phone (785 483 2169)
Contractor: Name: MURFIN DRILLING CO., INC.
License: 30606
Wellsite Geologist: DAVE SHUMAKER

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 PBD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
8-31-04 9-5-04 9-05-04
Spud Date Date Reached TD Completion Date

API NO. 15- 051-25340-0000
County ELLIS
110' N & CS 1/2 - SW Sec. 2 Twp. 11 Rge. 19 X E
190' W
770 Feet from (S) N (circle one) Line of Section
1130 Feet from (W) E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or (S) (circle one)
Lease Name BRIN Well # 1
Field Name WILDCAT
Producing Formation N/A
Elevation: Ground 2122' KB 2127'
Total Depth 3658 PBDT N/A
Amount of Surface Pipe Set and Cemented at 232' 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 cnt.

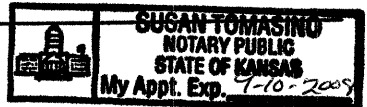
Drilling Fluid Management Plan P&A KJR 6/15/07
(Data must be collected from the Reserve Pit)

Chloride content 12,000 ppm Fluid volume 80 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 PROD. SUPT. Date 11-18-04
Subscribed and sworn to before me this 18th day of November,
19 2004.
Notary Public Susan Tomasiuo
Date Commission Expires _____



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

RECEIVED
Form ACO-1 (7-91) NOV 22 2004
KCC WICHITA

SIDE TWO

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

Sec. 2 Twp. 11 Rge. 19 East West
 County ELLIS

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: <u>RADIATION GUARD</u>	<input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample Formation (Top), Depth and Datums <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>ANHYDRITE</td> <td>1442'</td> <td>685</td> </tr> <tr> <td>BASE ANHY</td> <td>1473'</td> <td>654</td> </tr> <tr> <td>TOPEKA</td> <td>3070'</td> <td>-943</td> </tr> <tr> <td>HHEBNER</td> <td>3291'</td> <td>-1164</td> </tr> <tr> <td>TORONTO</td> <td>3308'</td> <td>-1181</td> </tr> <tr> <td>LANSING</td> <td>3332'</td> <td>-1205</td> </tr> <tr> <td>BASE KANSAS CITY</td> <td>3550'</td> <td>-1423</td> </tr> <tr> <td>CONGLOMERATE</td> <td>3571'</td> <td>-1444</td> </tr> </tbody> </table>	Name	Top	Datum	ANHYDRITE	1442'	685	BASE ANHY	1473'	654	TOPEKA	3070'	-943	HHEBNER	3291'	-1164	TORONTO	3308'	-1181	LANSING	3332'	-1205	BASE KANSAS CITY	3550'	-1423	CONGLOMERATE	3571'	-1444
Name	Top	Datum																										
ANHYDRITE	1442'	685																										
BASE ANHY	1473'	654																										
TOPEKA	3070'	-943																										
HHEBNER	3291'	-1164																										
TORONTO	3308'	-1181																										
LANSING	3332'	-1205																										
BASE KANSAS CITY	3550'	-1423																										
CONGLOMERATE	3571'	-1444																										

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	12 1/4"	8 5/8"	20#	232'	COMMON	150	2% GEL 3% CC

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input 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 (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled

Other (Specify) _____

Production Interval _____

ALLIED CEMENTING CO., INC.

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

K

DATE <u>9-5-04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>6:00AM</u>	JOB START	JOB FINISH <u>9:00PM</u>
LEASE <u>FEIN</u>	WELL # <u>1</u>	LOCATION <u>YOCEMENDO N TO D-ENS</u>			COUNTY <u>ELLIS</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)			<u>1E 3/4S</u>				

CONTRACTOR MURFEN 16

TYPE OF JOB DTA

HOLE SIZE 7 7/8 T.D.

CASING SIZE DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER

CEMENT

AMOUNT ORDERED 215 20/40 6% GEL
1/463 FLO-SEAL JSK

COMMON	<u>129</u>	@	<u>785</u>	<u>1012⁰⁰</u>
POZMIX	<u>86</u>	@	<u>410</u>	<u>352⁰⁰</u>
GEL	<u>11</u>	@	<u>1100</u>	<u>121⁰⁰</u>
CHLORIDE		@		
ASC		@		
<u>FLOSEAL</u>	<u>54#</u>	@	<u>140</u>	<u>75⁰⁰</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>226</u>	@	<u>135</u>	<u>305¹⁰</u>
MILEAGE	<u>54/SK</u>	@	<u>MILE</u>	<u>531¹⁰</u>
			TOTAL	<u>2398⁰⁰</u>

EQUIPMENT

PUMP TRUCK CEMENTER MARIC

345 HELPER STEVE

BULK TRUCK

DRIVER RUFUS

BULK TRUCK

DRIVER

REMARKS:

- 50 SK @ 1475
- 100 SK @ 850
- 40 SK @ 785
- 10 SK @ 40
- 15 SK @ R.H.

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>570⁰⁰</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>47</u>	@	<u>400</u>
<u>8% GEL</u>		@	<u>35⁰⁰</u>
		@	
		@	
			TOTAL <u>793⁰⁰</u>

CHARGE TO: MAZ OIL OPER.

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was