

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
December 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

Lease Operator: M.A.E. RESOURCES, INC

Address: P O BOX 304 PARKER, KS 66072

Phone: (913) 898-3221 Operator License #: 30993

Type of Well: DH DH KCCPRT Per CP 213 Docket #: (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)

The plugging proposal was approved on: (Date)

by: (KCC District Agent's Name)

Is ACO-1 filed? Yes No If not, is well log attached? Yes No

Producing Formation(s): List All (If needed attach another sheet) NONE Depth to Top: Bottom: T.D.

API Number: 15 - 001-29341-00-00

Lease Name: JON CONLEY

Well Number: 19

Spot Location (QQQQ): E2 - E2 - NW - SW 1980 Feet from North South Section Line

4180 Feet from East West Section Line

Sec. 19 Twp. 23 S. R. 20 East West

County: ALLEN

Date Well Completed: 03/28/2006

Plugging Commenced: 03/29/2006

Plugging Completed: 03/29/2006

Show depth and thickness of all water, oil and gas formations.

Table with columns: Oil, Gas or Water Records (Formation, Content) and Casing Record (Surface Conductor & Production) (From, To, Size, Put In, Pulled Out). Row 1: NONE, SURFACE, 20'

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Established circulation. Mixed and pumped 10 sacks 50/50 POZ, 6% gel, 683 pulled 1" 500, pumped 10 sacks more. PULLED to 150' filled to surface with 25 sacks Pulled 1" out and filled from surface.

RECEIVED KANSAS CORPORATION COMMISSION

MAY 19 2008

CONSERVATION DIVISION WICHITA, KS

Name of Plugging Contractor: CONSOLIDATED OIL WELL SERVICES, LLC License #: 33961

Address: P O BOX 884 CHANUTE, KS 66720

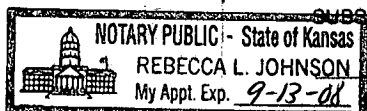
Name of Party Responsible for Plugging Fees: M.A.E. RESOURCES, INC

State of KANSAS County, LINN, ss.

OPERATOR (Employee of Operator) or (Operator) on above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

(Signature) [Handwritten Signature]

(Address) P O BOX 304 PARKER, KS 66072



SUBSCRIBED and SWORN TO before me this 14th day of May, 2008. My Commission Expires: 9-13-08 Notary Public [Handwritten Signature]