

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED

Form ACO-1

September 1999

Form Must Be Typed

MAR 13 2008

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE KCC WICHITA

Operator: License # 30993
Name: M.A.E. Resources, Inc
Address: P O Box 304
City/State/Zip: Parker, KS 66072
Purchaser: Crude Marketing
Operator Contact Person: Terry Johnson
Phone: (913) 898-3221
Contractor: Name: Bill McPherson Drilling
License: 5495
Wellsite Geologist: Brad Cook

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/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. _____

9/28/2005	9/29/2005	9/29/2005
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

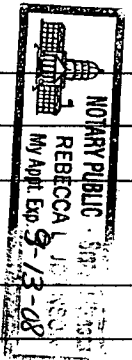
API No. 15 - 001-29297.0000
County: Allam
S2 S2 NE SW Sec. 19 Twp. 23 S. R. 20 East West
1540 feet from S N (circle one) Line of Section
3300 feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Jon Conley Well #: 11
Field Name: lola
Producing Formation: Squirrel
Elevation: Ground: N/A Kelly Bushing: N/A
Total Depth: 707 Plug Back Total Depth: 707
Amount of Surface Pipe Set and Cemented at 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 674
feet depth to surface w/ 160 sx cmt.
ALTZ-Dlg - 2/20/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content none ppm Fluid volume 150 bbls
Dewatering method used evaporation
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: [Signature]
Title: President Date: 3/10/2008
Subscribed and sworn to before me this 10 day of March
2008.
Notary Public: [Signature]
Date Commission Expires: 9-13-2008



KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: M.A.E. Resources, Inc Lease Name: Jon Conley Well #: 11
 Sec. 19 Twp. 23 S. R. 20 East West County: Allegheny

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Do not have driller's log Sand/Oil Sand 707
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CASING RECORD <input 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	10 1/4"	7"	N/A	20'	Portand	4	N/A
Production	5 5/8"	2 7/8"	N/A	674	OWC		Flo-Seal

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
				RECEIVED MAR 13 2008 KCC WICHITA

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
2	657.5 to 674	53 sacks 12-20 sand 5880 gal City water	657-674

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
No Tubing							
Date of First, Resumerd Production, SWD or Enhr.			Producing Method				
			<input type="checkbox"/> Flowing <input checked="" 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



CONSOLIDATED OIL WELL SERVICES AN INFINITY COMPANY

COPY

151
3-wells

1,2 & 3 OF 5

1530 S. SANTA FE, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 26941

LOCATION Thayer

FIELD TICKET

#12 (#11) #10

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
10-18-05	5209	J. Conley		19	23S	20E	AK	Squirrel
CHARGE TO M.A.E. Resources				OWNER Terry Johnson				
MAILING ADDRESS P.O. Box 304				OPERATOR				
CITY & STATE Parker KS 66072				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT	
5102C	1	PUMP CHARGE 1000 Combo 1st well		1835-	
5102C	1			1650-	
5102C	1			1375-	
RECEIVED MAR 13 2008					
5302	3	Acidspots 440.290-290		1020-	
5610	3 hrs	Misc acid pump	KCC WICHITA	435.-	
3107	975 gal.	15% HCL		1218.75	
1219	2 gal.	ESAN34 non-emulsifier		55.50	
1123	10,920 gal.	city H2O		133.22	
1123.35	5,670 gal.	city H2O		69.17	
1123	1,050 gal.	city H2O Colony		12.81	
1231	375 #	frac gel		1612.50	
1215	35 gal.	KCL sub		824.25	
1208	3/4 gal.	breaker		117.30	
5604	3	3" frac valve		195.-	
5115	3	ball injector		258.-	
4326	55	1.3 SG 7/8" ballsealers		118.25	
BLENDING & HANDLING					
5109	48	TON-MILES	MIN.	260-	
STAND BY TIME					
5108	48	MILEAGE Mobilization X2 P,S		288.00	
5501F	7 hrs	WATER TRANSPORTS -2		651.00	
5501F.35	3 1/2 hrs	VACUUM TRUCKS - 1		325.50	
2102	160 SKS	FRAC SAND 12-20		2448.00	
CEMENT					
				6-3 SALES TAX	21.01

Ravin 2790

ESTIMATED TOTAL 14923.26

CUSTOMER or AGENTS SIGNATURE _____ CIS FOREMAN Brett Busby

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE 10-18-05

200420