

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: Josh Austin
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. _____
6-19-08 7-2-08 7-2-08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

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CONSERVATION DIVISION
WICHITA, KS

API No. 15 - 151-22299-0000
County: Pratt
E/2 _W/2_ SW_ Sec. 25 Twp. 29 S. R. 14 East West
1200' FSL feet from (S) N (circle one) Line of Section
1030' 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: Smith Well #: 1
Field Name: Wildcat
Producing Formation: N/A
Elevation: Ground: 1916' Kelly Bushing: 1925'
Total Depth: 4723' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at 230' 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 P+ A AH I NR
(Data must be collected from the Reserve Pit) 12-2-08
Chloride content 23000 ppm Fluid volume 80 bbls
Dewatering method used Hauled Offsite
Location of fluid disposal if hauled offsite:
Operator Name: Mai Oil Operations, Inc.
Lease Name: Three Sisters License No.: 5259
Quarter SE Sec. 35 Twp. 29 S. R. 14 East West
County: Pratt Docket No.: D-26795

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: 10-05-08
Subscribed and sworn to before me this 7th day of October,
20 08.
Notary Public: Ashley Leiker
Date Commission Expires: 2-15-2012

NOTARY PUBLIC - State of Kansas
ASHLEY LEIKER
My Appt. Exp. 2-15-2012

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

Operator Name: Mai Oil Operations, Inc. Lease Name: Smith Well #: 1
 Sec. 25 Twp. 29 S. R. 14 East West County: Pratt

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 <i>(Submit Copy)</i> List All E. Logs Run: CNFD, DIL, Sonic , Micro	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See Attached GEO Report
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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	17 1/2"	13 3/8"	48#	230'	Class "A"	235	2%gel,3%CC

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<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 <i>(Amount and Kind of Material Used)</i>	Depth
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TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			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 <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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ALLIED CEMENTING CO., LLC. 34425

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

medicine lodge

7-2-08	SEC. 25	TWP. 29S	RANGE 14W	CALLED OUT 7:00p.m	ON LOCATION 9:30p.m	JOB START 3:00a.m	JOB FINISH 4:00a.m
BASE <i>Smith</i>	WELL # 1	LOCATION <i>Coats, rd. 1E, 1 1/2 S, E 1/4</i>			COUNTY <i>Pratt</i>	STATE <i>KS.</i>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR *Southwind*

TYPE OF JOB *Rot Plug*

HOLE SIZE *7 7/8* T.D. *41623'*

CASING SIZE *13 3/8* DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX *300'* MINIMUM *-*

MEAS. LINE SHOE JOINT *-*

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT *mud/fresh*

EQUIPMENT

PUMP TRUCK CEMENTER *Mark Cdeif*

343 HELPER *Steve K.*

BULK TRUCK

363 DRIVER *Michael Ni*

BULK TRUCK

DRIVER

OWNER *Ma: Op.*

CEMENT AMOUNT ORDERED *2165 C&D/40 490gel*

COMMON	<i>159 A</i>	@	<i>15.45</i>	<i>2456.55</i>
POZMIX	<i>106</i>	@	<i>8.00</i>	<i>848.00</i>
GEL	<i>9</i>	@	<i>20.80</i>	<i>187.20</i>
CHLORIDE		@		
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>274</i>	@	<i>2.40</i>	<i>657.60</i>
MILEAGE	<i>25 X 274 X .10</i>			<i>685.00</i>
				TOTAL <i>4834.35</i>

REMARKS:

spot plug @ 41623 w/ 50sx. Dip w/ Mud.

plug @ 840' w/ 50sx. Dip w/ mud.

plug @ 240' w/ 90sx. Dip w/ Fresh.

plug @ 40' w/ 50sx

plug rat w/ 15sx

plug mouse w/ 10sx

SERVICE

DEPTH OF JOB	<i>41623'</i>		
PUMP TRUCK CHARGE			<i>2185.00</i>
EXTRA FOOTAGE		@	
MILEAGE	<i>25</i>	@	<i>7.00 175.00</i>
MANIFOLD		@	
		@	
		@	

CHARGE TO: *Ma: Op.*

STREET _____

CITY _____ STATE _____ ZIP _____

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TOTAL *2360.00*

DEC 01 2008

PLUG & FLOAT EQUIPMENT
CONSERVATION DIVISION
WICHITA, KS

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or

	@		
	@		
	@		
	@		
	@		

