

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 # 30993
Name: M.A.E. RESOURCES
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: MCGOWN DRILLING
License: _____
Wellsite Geologist: BRAD COOK

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

10/12/05	10/14/05	10/14/05
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 001-29295.0000
County: ALLEN
C. SE. NW Sec. 19 Twp. 23 S. R. 20 East West
3300 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: CONLEY, Jon Well #: 9
Field Name: IOLA

Producing Formation: SQUIRREL
Elevation: Ground: N/A Kelly Bushing: N/A
Total Depth: 694 Plug Back Total Depth: 694
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 694
feet depth to SURFACE w/ 73 _____ sx cmt.

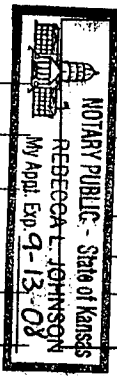
AWZ-Dlg - 1/15/09

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: Rebecca L. Johnson
Title: President Date: Oct 16, 2007
Subscribed and sworn to before me this 16th day of October
2007
Notary Public: Rebecca L. Johnson
Date Commission Expires: 9-13-08



KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
OCT 27 2007

Operator Name: M.A.E. RESOURCES Lease Name: CONLEY Well #: 9
 Sec. _____ Twp. _____ S. R. _____ East West County: ALLEN

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 (Attach Additional Sheets) <input type="checkbox"/> Yes <input checked="" 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Soil</td> <td>0</td> <td>5</td> </tr> <tr> <td>Clay</td> <td>5</td> <td>33</td> </tr> <tr> <td>Shale/Lime</td> <td>33</td> <td>628</td> </tr> <tr> <td>Oil Sand</td> <td>628</td> <td>694</td> </tr> </table>	Name	Top	Datum	Soil	0	5	Clay	5	33	Shale/Lime	33	628	Oil Sand	628	694
Name	Top	Datum														
Soil	0	5														
Clay	5	33														
Shale/Lime	33	628														
Oil Sand	628	694														

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'	Portland	4	N/A
Production	5 5/8"	2 7/8"	N/A	694	OWC	73	Flo-Seal

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 (Amount and Kind of Material Used)	Depth
2	651.5 - 668	500 LBS 12-20	
		6210 GAL CITY WATER	648.5 - 665

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	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

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CONSERVATION DIVISION
WICHITA, KS

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS.66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 4943
 LOCATION Ottawa
 FOREMAN Alan Maden

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-13-05	5209	Conley #9	19	23	20	AL
CUSTOMER <u>M A E.</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>P.O. Box 304</u>			<u>164</u>	<u>Alamad</u>		
CITY <u>Parker</u>	STATE <u>KS</u>	ZIP CODE <u>66072</u>	<u>369</u>	<u>Casken</u>		
			<u>195</u>	<u>Matmad</u>		
			<u>372</u>	<u>Fremed</u>		

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 694 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 692 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 4 bbl DISPLACEMENT PSI 600 MIX PSI 200 RATE 5 bpm

REMARKS: Established circulation. Mixed + pumped 1/2 soap followed by 5 bbl water to condition hole. Mixed + pumped 23 ox DWC, 1/4" flo-seal. Circulated cement to surface. Flushed pump clean. Pumped 2 1/2 rubber plug to 692' well held 600 PSI. Closed valve.

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	164	165.00
5406	40	MILEAGE	164	120.00
5402	692'	casing footage	164	N/C
5407	min	Tow miles	195	260.00
5502C	2	80 vac	369	174.00
1238	1/2	foamer ESAB		16.09
1107	1	flu-seal		42.75
1126	73	DWC		449.00
4402	1	2 1/2 rubber plug		17.00
				2343.8
		WOT# 200282	603	

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 WICHITA, KS

AUTHORIZATION _____ TITLE _____
 SALES TAX 64.56
 ESTIMATED TOTAL \$2408.39
Alan Maden

Thickness of Strata	Formation	Total Depth	Remarks
2	TOPSOIL	2	
4	CLAY SA	6	
32	LM	38	J. Conley #9
26	SH	64	10-12-05
6	LM	70	McGown Drilling
45	SH	115	
3	LM	118	
10	SH	128	
60	LM	188	
8	SH	196	
45	LM	241	
172	SH	413	
16	LM	429	
6	SH	435	
8	LM	443	
62	SH	505	
13	LM	518	
41	SH	559	
33	LM	592	
8	SH	600	
9	LM	609	
5	SH	614	
8	SAND-SH	622	
50	SAND	672	
	SH	694	694 T.D.

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CONSERVATION DIVISION
WICHITA, KS



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

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

TICKET NUMBER **26961**

LOCATION Thayer

FIELD TICKET

#14, #8, (#9) #13

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
11-2-05	5209	J. Conley					Ah	Squirrel
CHARGE TO				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				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-
5102C	1			1375-
5604	4	3" frac valves		260-
5302	4	Acid spots 440-290, 290-290		1310.-
3107	300 gal.	15% HCL acid		375.-
5610	5 hrs	Acid pump / blend acid w/frac		725.00
3109	800 gal.	raw HCL acid		2000.-
1123	11340 gal.	City water Chande.		138.35
1123	11000 gal.	City water Colony.		134.20
1123.20	2500 gal.	City water.		30.50
1231	450 #	frac gel		1935.00
1215	42 gal.	KCL sub		989.10
1208	1 gal.	breaker		156.40
5115	4	ball injector		344.-
4326	80	1.3 SG 7/8" ballsealers		172.00
		BLENDING & HANDLING		
5109	46	TON-MILES	RECEIVED KANSAS CORPORATION COMMISSION	260.-
5		STAND BY TIME		
5108	46	MILEAGE Mobilization x 2 P, S	OCT 27 2007	276.00
5501F	10 hrs	WATER TRANSPORTS - 2	CONSERVATION DIVISION WICHITA, KS	930.00
5502F, 20	4 1/2 hrs	VACUUM TRUCKS - 1		391.50
2102	210 SKS	FRAC SAND 12-20		3213.00
		CEMENT		
			6.3 SALES TAX	29.93

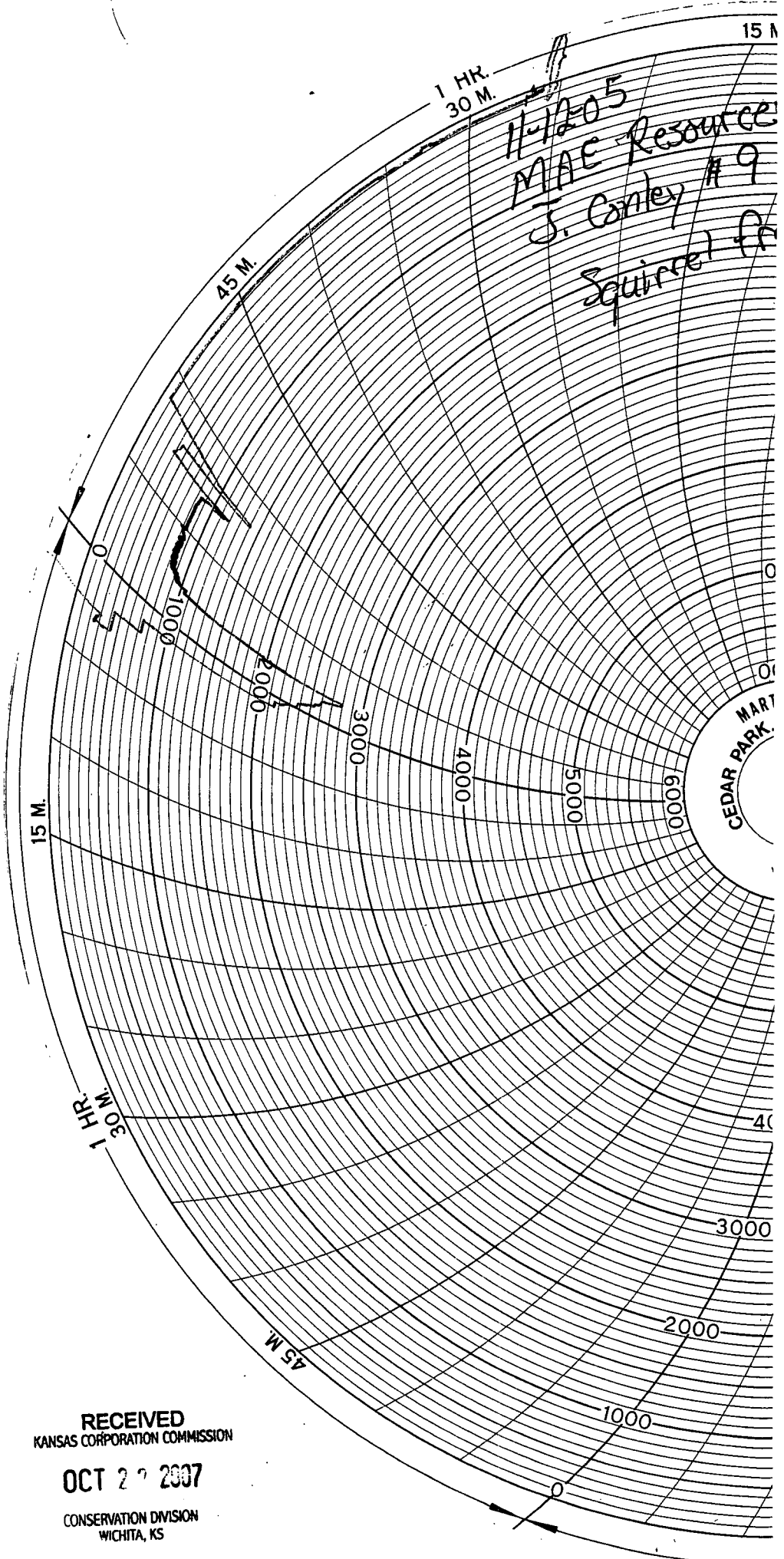
Ravin 2790

ESTIMATED TOTAL 19904.98

CUSTOMER or AGENTS SIGNATURE _____ CIS FOREMAN Brett Busby

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE 11-12-05

200895



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 WICHITA, KS