



CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # **5259**
 Name: **Mai Oil Operations, Inc.**
 Address 1: **8411 PRESTON RD STE 800**
 Address 2: _____
 City: **DALLAS** State: **TX** Zip: **75225 + 5520**
 Contact Person: **Allen Bangert**
 Phone: (**214**) **219-8883**
 CONTRACTOR: License # **33350**
 Name: **Southwind Drilling, Inc.**
 Wellsite Geologist: **Jim Musgrove**
 Purchaser: _____
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core. Expl., 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 Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

11/06/2012	11/12/2012	11/12/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - **15-009-25772-00-00**
 Spot Description:
SE SW NE NW Sec. **17** Twp. **17** S. R. **14** East West
1185 Feet from North / South Line of Section
1925 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: **Barton**
 Lease Name: **Morgenstern** Well #: **2**
 Field Name: _____
 Producing Formation: **Arbuckle**
 Elevation: Ground: **1895** Kelly Bushing: **1903**
 Total Depth: **3475** Plug Back Total Depth: **3440**
 Amount of Surface Pipe Set and Cemented at: **890** 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
 (Data must be collected from the Reserve Pit)
 Chloride content: **77000** ppm Fluid volume: **80** bbls
 Dewatering method used: **Hauled to Disposal**
 Location of fluid disposal if hauled offsite:
 Operator Name: **Mai Oil Operations, Inc.**
 Lease Name: **Dobkins** License #: **5259**
 Quarter **SE** Sec. **20** Twp. **17** S. R. **14** East West
 County: **Barton** Permit #: **D31246**

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

Letter of Confidentiality Received
 Date: **01/18/2013**

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: **NAOMI JAMES** Date: **01/22/2013**