



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- 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 #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____-_____-_____- Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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

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

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

October 10, 2011

Glenna Lowe
Trans Pacific Oil Corporation
100 S MAIN STE 200
WICHITA, KS 67202-3735

Re: ACO1
API 15-135-25301-00-00
JARVIS 2
SE/4 Sec.05-17S-24W
Ness County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Glenna Lowe



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.
Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF in.
Did Well Flow? _____ Reversed Out _____ Anchor Length _____ ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: _____
2nd Open: _____

Recovered _____ ft. of _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

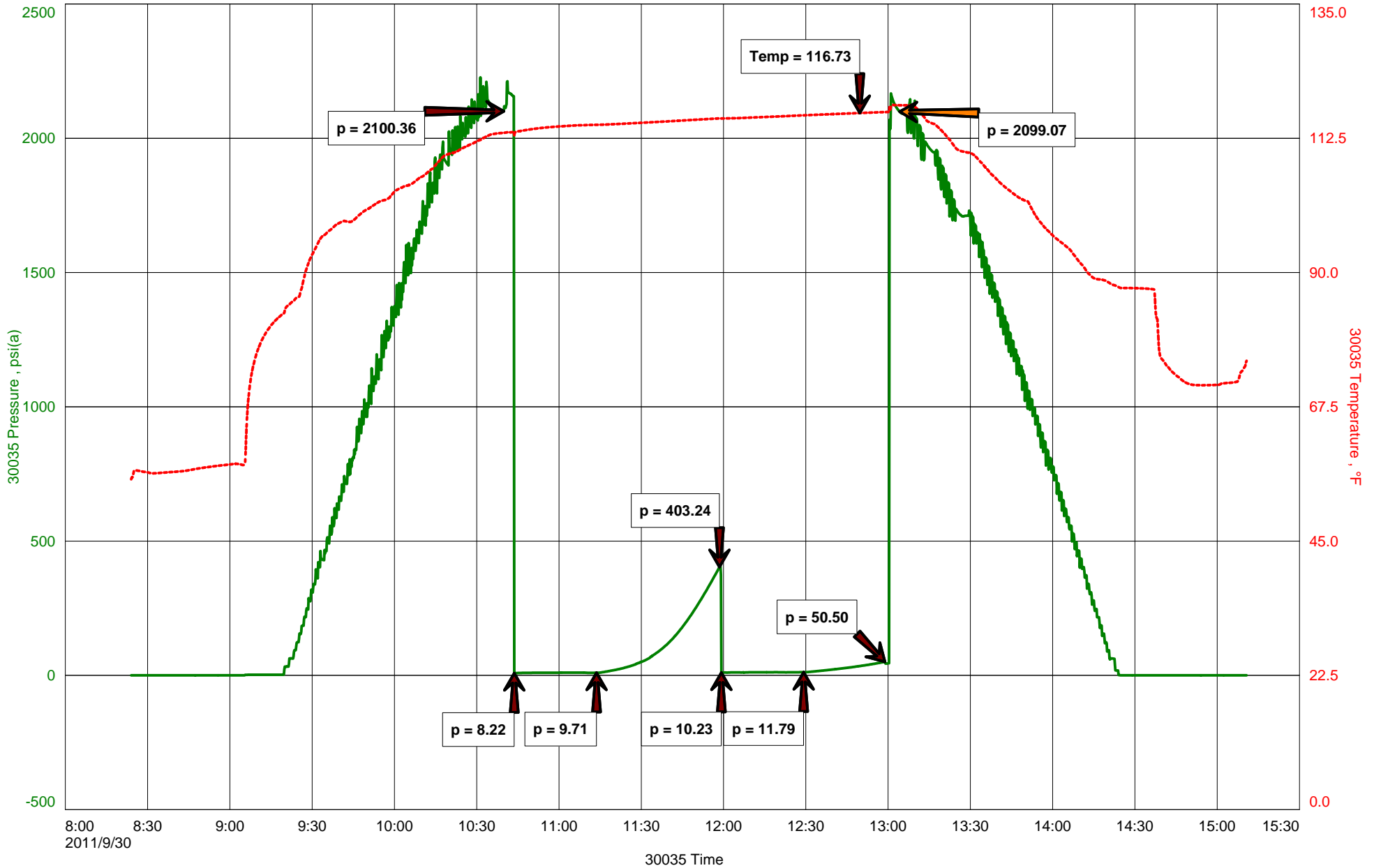
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
Final Closed In Period..... Minutes _____ (G) _____ P.S.I.
Final Hydrostatic Pressure..... (H) _____ P.S.I.

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

Trans Pacific Oil Co
DST# 1 Ft. Scott 4328-4380'
Start Test Date: 2011/09/30
Final Test Date: 2011/09/30

Jarvis # 2
Formation: DST# 1 Ft. Scott 4328-4380'
Pool: Wildcat
Job Number: S0036

Jarvis # 2



Diamond Testing

General information Report

General Information

Company Name Trans Pacific Oil Co

Contact	Glenna Lowe	Job Number	S0036
Well Name	Jarvis # 2	Representative	Jacob McCallie
Unique Well ID	DST# 1 Ft. Scott 4328-4380'	Well Operator	Trans Pacific Oil Co.
Surface Location	SEC. 5-17S-24W Ness County	Report Date	2011/09/30
Well License Number		Prepared By	Jacob McCallie
Field	Vermillion		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST# 1 Ft. Scott 4328-4380'		
Well Fluid Type	01 Oil	Start Test Time	08:24:00
		Final Test Time	15:12:00
Start Test Date	2011/09/30		
Final Test Date	2011/09/30		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

5' Slightly Oil Specked Mud 100% Mud
5' TOTAL FLUID

TOOL SAMPLE:

100% Mud



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.
Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF in.
Did Well Flow? _____ Reversed Out _____ Anchor Length _____ ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

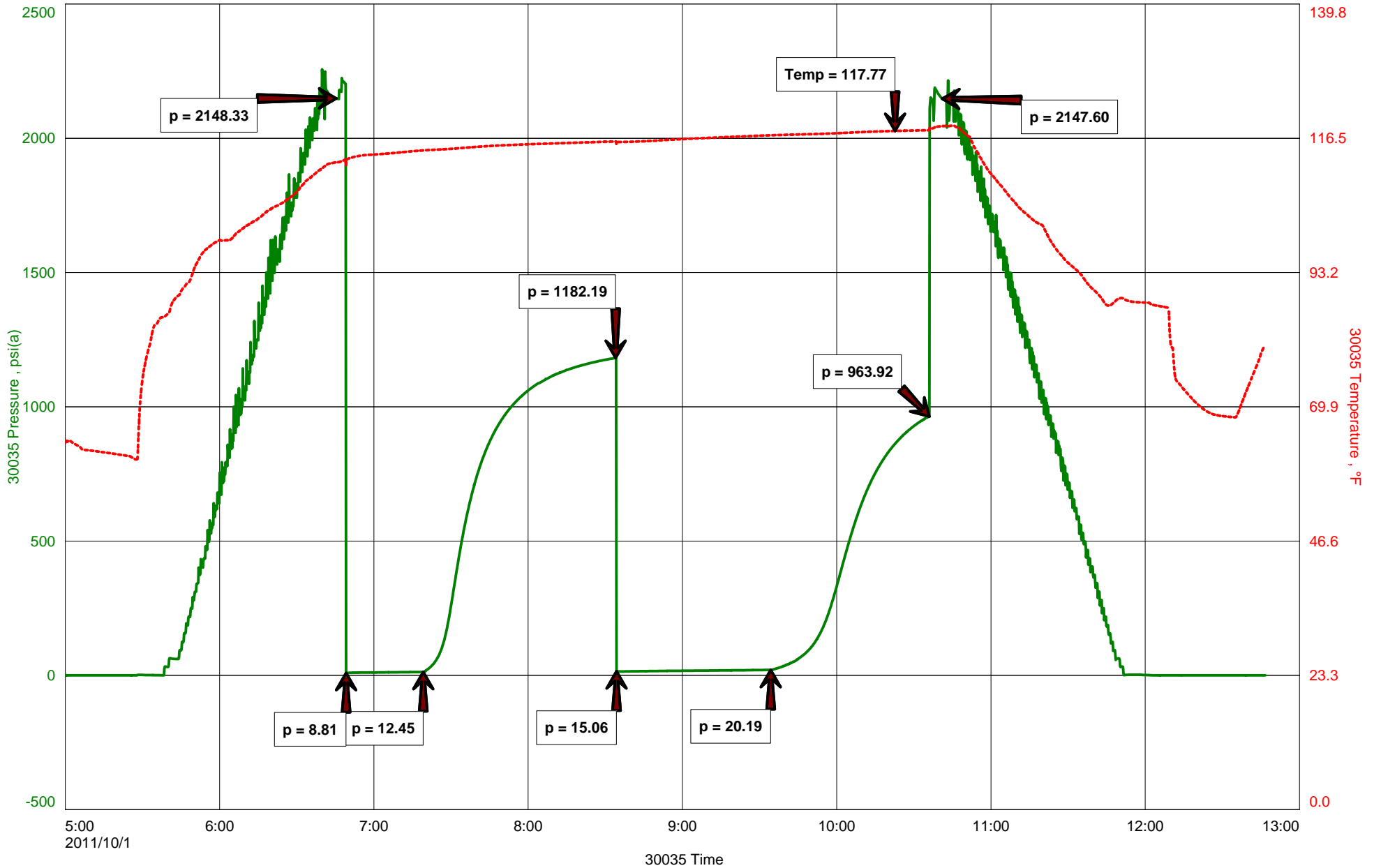
Blow: 1st Open: _____
2nd Open: _____

Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
	Total

Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
Final Closed In Period..... Minutes _____ (G) _____ P.S.I.
Final Hydrostatic Pressure..... (H) _____ P.S.I.

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Jarvis # 2



Diamond Testing

General information Report

General Information

Company Name Trans Pacific Oil Corp.

Contact	Glenna Lowe	Job Number	S0037
Well Name	Jarvis # 2	Representative	Jacob McCallie
Unique Well ID	DST# 2 Mississippi 4397-4460'	Well Operator	Trans Pacific Oil Corp.
Surface Location	SEC 5-17S-24W Ness County	Report Date	2011/10/01
Well License Number		Prepared By	Jacob McCallie
Field	Vermillion		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST# 2 Mississippi 4397-4460'		
Well Fluid Type	01 Oil	Start Test Time	05:00:00
		Final Test Time	12:47:00
Start Test Date	2011/10/01		
Final Test Date	2011/10/01		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERY:

7' Clean Oil 100% Oil
20' Oily Mud 15% Oil 85% Mud
27' TOTAL FLUID

GRAVITY: 38 @ 60 degrees F

TOOL SAMPLE:

29% Oil 71% Mud



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.
Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF in.
Did Well Flow? _____ Reversed Out _____ Anchor Length _____ ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: _____
2nd Open: _____

Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
	Total

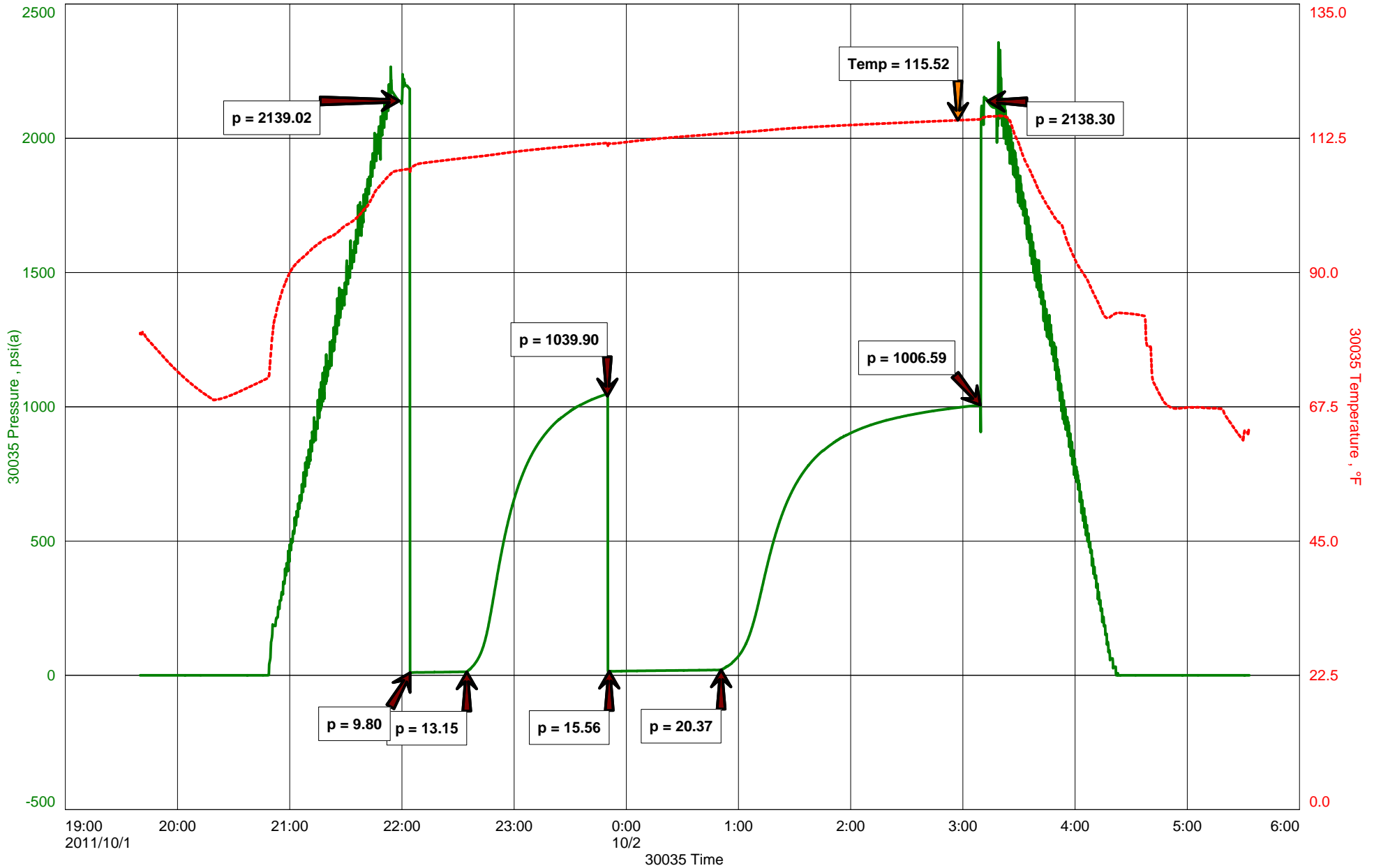
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
Final Closed In Period..... Minutes _____ (G) _____ P.S.I.
Final Hydrostatic Pressure..... (H) _____ P.S.I.

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Trans Pacific Oil Corp.
DST# 3 Mississippi 4392-4465'
Start Test Date: 2011/10/01
Final Test Date: 2011/10/02

Jarvis #2
Formation: DST# 3 Mississippi 4392-4465'
Pool: Wildcat
Job Number: S0038

Jarvis #2



Diamond Testing

General information Report

General Information

Company Name Trans Pacific Oil Corp.

Contact	Glenna Lowe	Job Number	S0038
Well Name	Jarvis #2	Representative	Jacob McCallie
Unique Well ID	DST# 3 Mississippi 4392-4465'	Well Operator	Trans Pacific Oil Corp.
Surface Location	SEC. 5-17S-24W Ness County	Report Date	2011/10/02
Well License Number		Prepared By	Jacob McCallie
Field	Vermillion		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST# 3 Mississippi 4392-4465'		
Well Fluid Type	01 Oil	Start Test Time	19:40:00
		Final Test Time	05:33:00
Start Test Date	2011/10/01		
Final Test Date	2011/10/02		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

10' Clean Oil 100% Oil
15' Oily Mud 15% Oil 85% Mud
25' TOTAL FLUID

TOOL SAMPLE:

38% Oil 62% Mud

GRAVITY: 38@ 60 degrees F



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.
Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF in.
Did Well Flow? _____ Reversed Out _____ Anchor Length _____ ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: _____
2nd Open: _____

Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
	Total

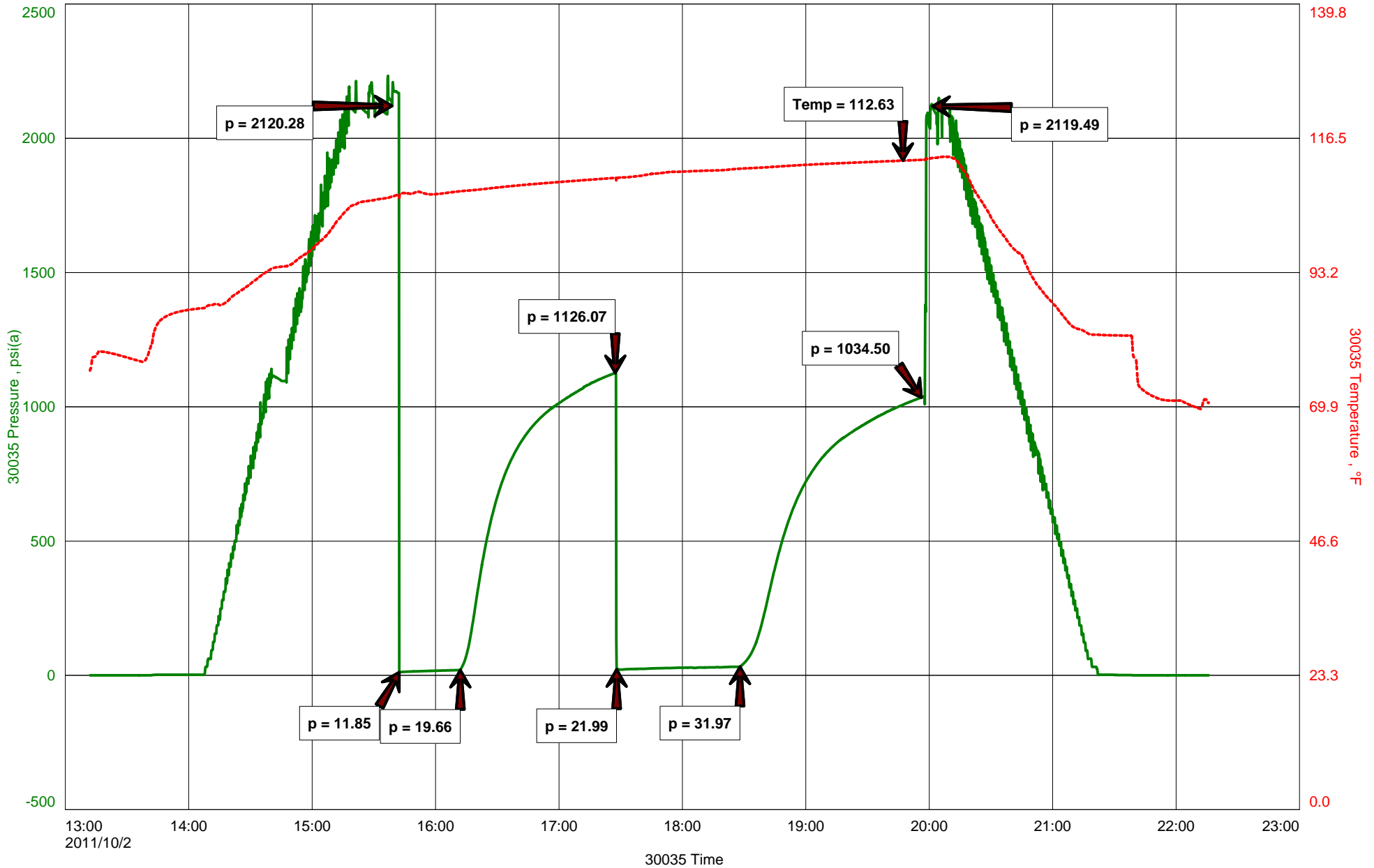
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
Final Closed In Period..... Minutes _____ (G) _____ P.S.I.
Final Hydrostatic Pressure..... (H) _____ P.S.I.

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Trans Pacific Oil Corp
DST #4 Mississippi 4330-4471'
Start Test Date: 2011/10/02
Final Test Date: 2011/10/02

Jarvis #2
Formation: DST #4 Mississippi 4330-4471'
Pool: Wildcat
Job Number: S0039

Jarvis #2



Diamond Testing

General information Report

General Information

Company Name Trans Pacific Oil Corp

Contact	Glenna Lowe	Job Number	S0039
Well Name	Jarvis #2	Representative	Jacob McCallie
Unique Well ID	DST #4 Mississippi 4330-4471'	Well Operator	Trans Pacific Oil Corp
Surface Location	SEC 5-17S-24W Ness County	Report Date	2011/10/02
Well License Number		Prepared By	Jacob McCallie
Field	Vermillion		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #4 Mississippi 4330-4471'		
Well Fluid Type	01 Oil	Start Test Time	13:12:00
		Final Test Time	22:17:00
Start Test Date	2011/10/02		
Final Test Date	2011/10/02		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

10'	Clean Oil	100% Oil
40'	Oily Mud	8% Oil 92% Mud
50'	TOTAL FLUID	

GRAVITY: 38 @ 60 degrees F

TOOL SAMPLE:

15% Oil 85% Mud



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.
Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF in.
Did Well Flow? _____ Reversed Out _____ Anchor Length _____ ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

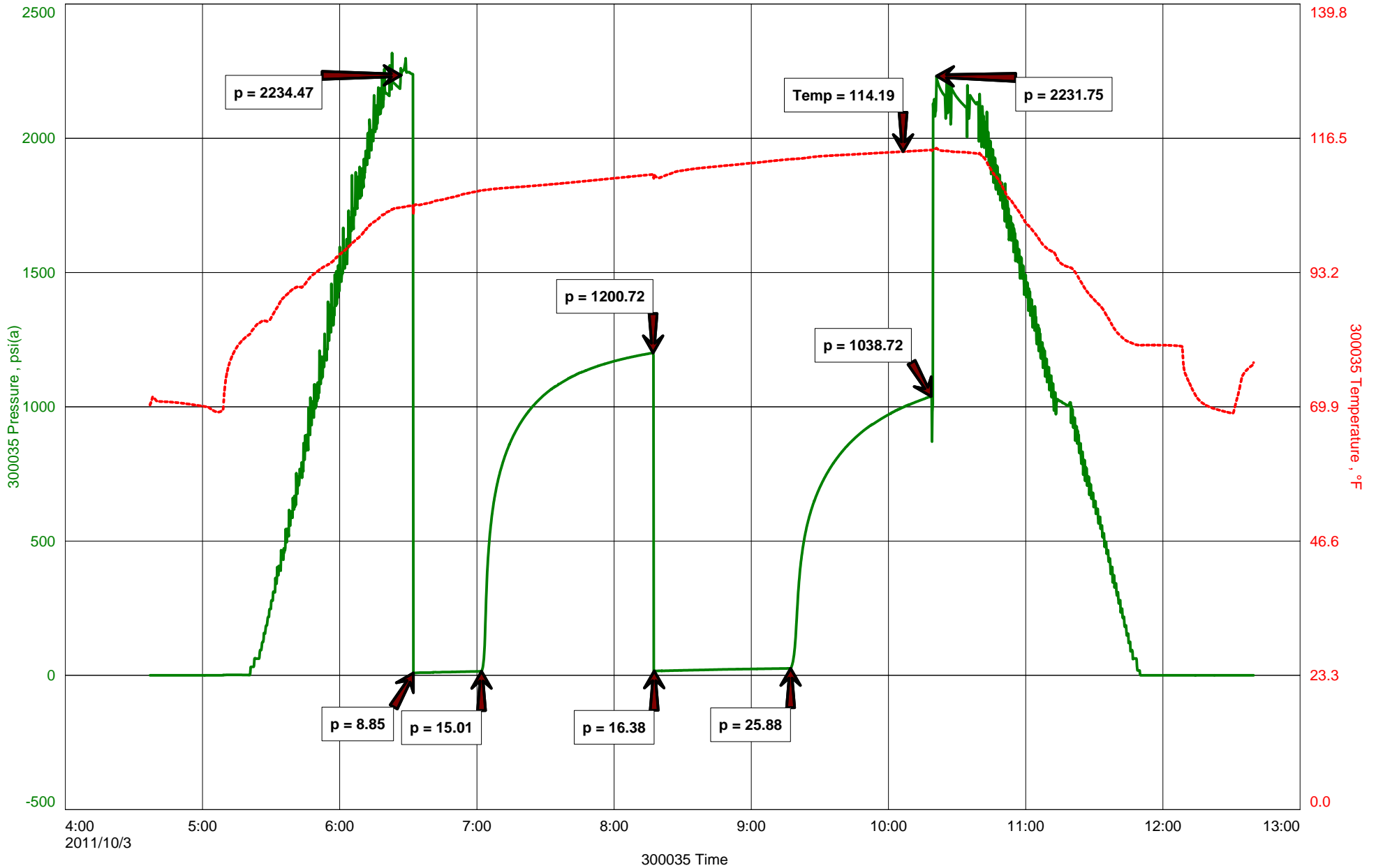
Blow: 1st Open: _____
2nd Open: _____

Recovered _____ ft. of _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
Final Closed In Period..... Minutes _____ (G) _____ P.S.I.
Final Hydrostatic Pressure..... (H) _____ P.S.I.

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Jarvis # 2



Diamond Testing

General information Report

General Information

Company Name Trans Pacific Oil Corp

Contact	Glenna Lowe	Job Number	S0040
Well Name	Jarvis # 2	Representative	Jacob McCallie
Unique Well ID	DST # 5 Mississippi 4465-4476'	Well Operator	Trans Pacific Oil Corp
Surface Location	SEC. 5-17S-24W Ness County	Report Date	2011/10/03
Well License Number		Prepared By	Jacob McCallie
Field	Vermillion		
Well Type	Vertical		

Test Type	Drill Stem Test	Start Test Time	04:37:00
Formation	DST # 5 Mississippi 4465-4476'	Final Test Time	12:40:00
Well Fluid Type	01 Oil		
Start Test Date	2011/10/03		
Final Test Date	2011/10/03		
Gauge Name	300035		
Gauge Serial Number			

Test Results

RECOVERED:

5' Watery Mud 40% WTR 60% MUD
5' TOTAL FLUID

PH: 9

RW: .55 @ 82 degrees F

Chlorides: 10,000 ppm

TOOL SAMPLE:

1% Oil 54% WTR 45% MUD

Well: Jarvis 2

STR: 5-17S-24W

Cty: Ness

State: Kansas

Sample Tops:

Log Tops:

Anhydrite	1803' (+659) -3'	
B/Anhydrite	1834' (+628) -4'	
Heebner	3817' (-1355) -2'	3819' (-1357) -4'
Lansing	3860' (-1398) -2'	3861' (-1399) -4'
BKC	4191' (-1729) -4'	4198' (-1736) -11'
Ft. Scott	4357' (-1895) -7'	4359' (-1897) -11'
Cherokee Sh.	4382' (-1920) -6'	4385' (-1923) -9'
Mississippian	4457' (-1995) NA	4458' (-1996) NA
RTD	4535' (-2073)	LTD 4536' (-2074)

ALLIED CEMENTING CO., LLC. 037284

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT
G-cat Bend

DATE	9-24	SEC	5	TWP	17	RANGE	24	CALL FD OUT	ON LOCATION	JOB START	6:30 PM	JOB FINISH	7:30 PM
LEASE	Jawin		WELL #	2		LOCATION	Ness city 4 west		COUNTY	Ness		STATE	KS
OLD OR NEW (Circle one)	9 North To 230 RD 1/2 west north to												

CONTRACTOR Duke Big 4

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 224

CASING SIZE 8 1/2 DEPTH 224

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15

PERFS. _____

DISPLACEMENT 13.25 BBLS

OWNER Tuan Pacific

CEMENT AMOUNT ORDERED 17554 class A
432cc + 220 gal.

EQUIPMENT

PUMP TRUCK CEMENTER Wayne

316 HELPER Wayne

BULK TRUCK

341 DRIVER Kevin

BULK TRUCK

_____ DRIVER _____

COMMON	<u>175</u>	@ <u>16.25</u>	<u>2,843.75</u>
POZMIX		@	
GEL	<u>3</u>	@ <u>21.25</u>	<u>63.75</u>
CHLORIDE	<u>6</u>	@ <u>58.20</u>	<u>349.20</u>
ASC		@	
HANDLING	<u>184</u>	@ <u>2.25</u>	<u>414.00</u>
MILEAGE	<u>184 x 14 x .11</u>		<u>283.56</u>
TOTAL			<u>3,954.26</u>

REMARKS:

Pipe on Bottom B-cak
circulation with mud
Run 2 BBLS Ahead
Mix 17554 class A + 320cc + 220 gal
Shut Down Release Plug
Displace 13.25 BBLS fresh water
Shut in Cement did
circulate

SERVICE

DEPTH OF JOB 224

PUMP TRUCK CHARGE _____ 1125.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 210 28 @ 7.00 196.00

MANIFOLD _____ @ _____

CHARGE TO Tuan Pacific

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 1321.00

PLUG & FLOAT EQUIPMENT

<u>wood plug</u>	@ <u>92.00</u>	<u>92.00</u>
	@	
	@	
	@	
TOTAL		<u>92.00</u>

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Rich Wheeler

SIGNATURE Rich Wheeler

SALES TAX (If Any) _____

TOTAL CHARGES 5,367.06

DISCOUNT 70% 20% 1,313.09 IF PAID IN 30 DAYS

4,053.97

RECEIVED

BY _____

TRANS PACIFIC Oil Corp.
JARVIS #2

2462

1925' FSL 2110' FEL
5 17 S 24 W
Ness Kan

2453

Duke Rib #4

KB

9/22/11
4535
3700

10/4/11
4536
chem

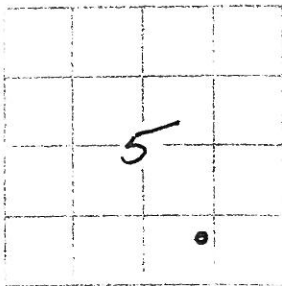
CASING
8 7/8" @ 224

ELECTRICAL SURVEYS
Dual Comp Den
Micro

SAMPLES	3800	TO	RTD
GRINDING TIME (HOURS)	3600	TO	RTD
SAMPLES EXAMINED FROM	3800	TO	RTD
GEOLOGICAL SUPERVISOR	3750	TO	RTD

GEOLOGIST ON WELL: Michael R. Kidwell

FORMATION TOPS	LOG	SAMPLES
Anhydrite	1805-1657	1803
B/Anhy	1834-1628	1834
Heebner	3819-1357	3817
Lansing	3861-1399	3860
B/KC	4199-1736	4191
Ft. Scott	4359-1897	4357
Che. Sh.	4385-1923	4382
Miss. Dolomite	4458-1996	4457

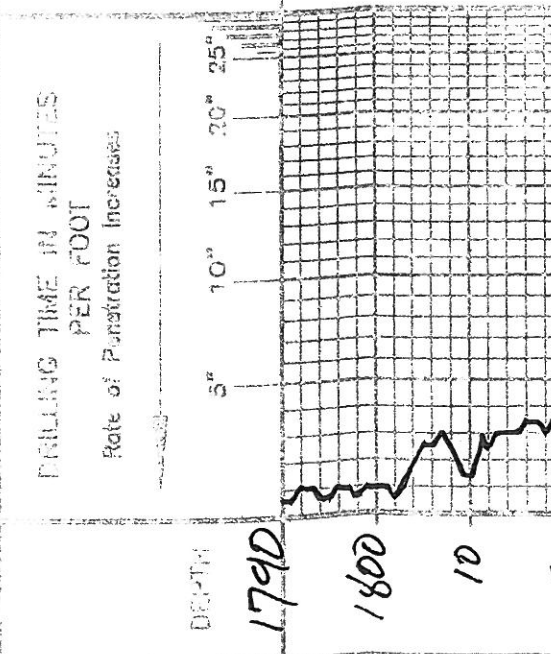


REMARKS

LEGEND



SCALE = 100'



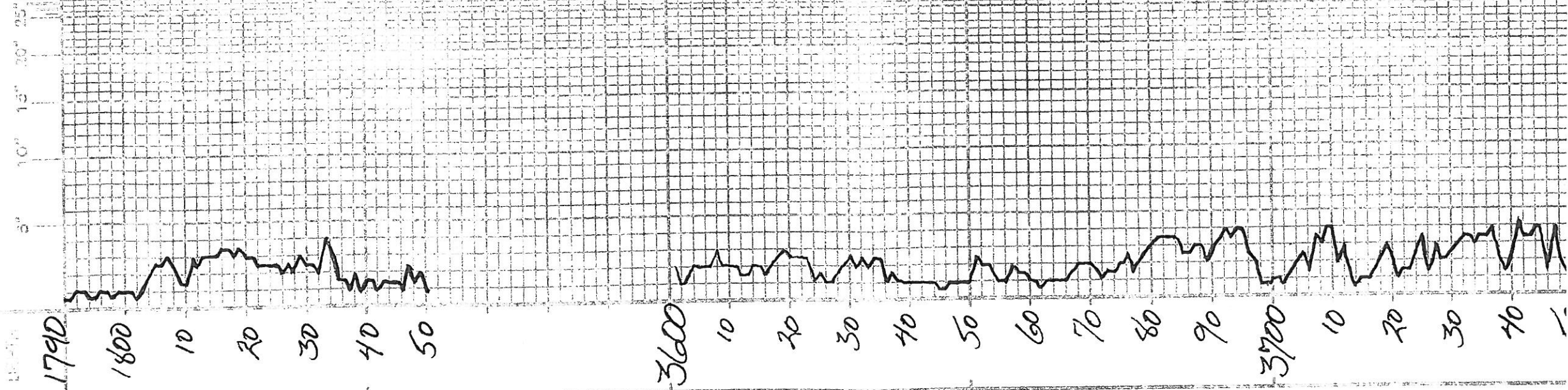
SAMPLE DESCRIPTION

Anhydrite 1805-1657
E-log
B/Anhy 1834-1628

LOG 7708

7505

PERFORE TIME IN MINUTES
PER FOOT
Scale of Penetration Inches

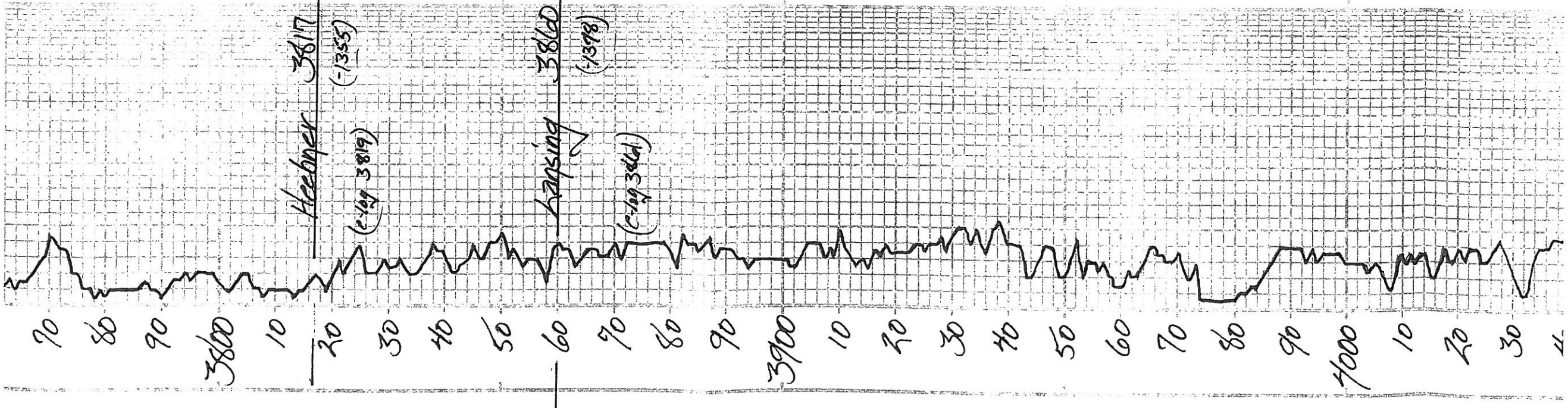


E-104
1805 +657

Anhydrite

1834 +628

B/Anhy



LS-tan vr fn x/h
 SL-CKA
 LS-tan qry vr fn x/h
 SL-ool/ross
 Chrt-gray-ool/ckly fresh
 LS-bm tan fn x/h foss
 rangi foss
 SH-bk carb
 LS-lt qry crm vr fn x/h
 Sltsh-gray qm
 LS-wht crm fn x/h
 Chrt-wht
 Sh-gray
 LS-wht crm vr fn x/h
 ool sent foss
 Chrt-wht fresh
 LS-lt qry vr fn x/h
 SL-ool/ross
 LS-tan lt qry vr fn x/h
 ool sent pyrite
 Sh-gray
 LS-tan vr fn x/h
 SL-ool/ross
 sent teal/see x/h
 LS-ool lt qry vr fn x/h
 ool
 Sh-gray
 LS-gray vr fn x/h
 Sltsh-red qm
 LS-ool vr fn x/h
 ool
 Sh-gray
 LS-ool vr fn x/h
 SL-ool/ross
 Chrt-ool
 LS-lt qry crm vr fn x/h
 ool/ool
 Sh-gray
 LS-tan vr fn x/h
 ool
 Sh-gray
 LS-lt qry crm vr fn x/h
 Sh-gray
 LS-gray vr fn x/h
 LS-lt qry crm vr fn x/h
 Chrt-wht fresh trace



LS-Hgray cm vr f/xh
Chrt-wht fresh trace
Sh-blk carb

LS-cm tan vr f/xh
sl sec x/h

LS-Htan vr f/xh
ool
Chrt-cm Hgray
Sh-gray

LS-Htan vr f/xh
ool
Sh-gray

LS-cm vr f/xh
sl
Sh-gray

LS-Htan vr f/xh
ool
Sh-gray blk
LS-Hgray vr f/xh chrt-
Chrt fresh

Sh-gray

LS-tan f/xh ool
sl sec x/h

LS-cm Hgray vr f/xh
ool

Sh-slshtn-gray Hgray
LS-cm vr f/xh
ool

Sh-gray

LS-Hgray cm vr f/xh
ool
sl sec x/h

Sh-gray

LS-gray vr f/xh

Sh-slshtn-gray

LS-gray vr f/xh

Sh-gray

LS-cm Hgray vr f/xh
ool

Sh-gray

LS-Htan gray vr f/xh

LS-gray vr f/xh
ool
Chrt-gray blk

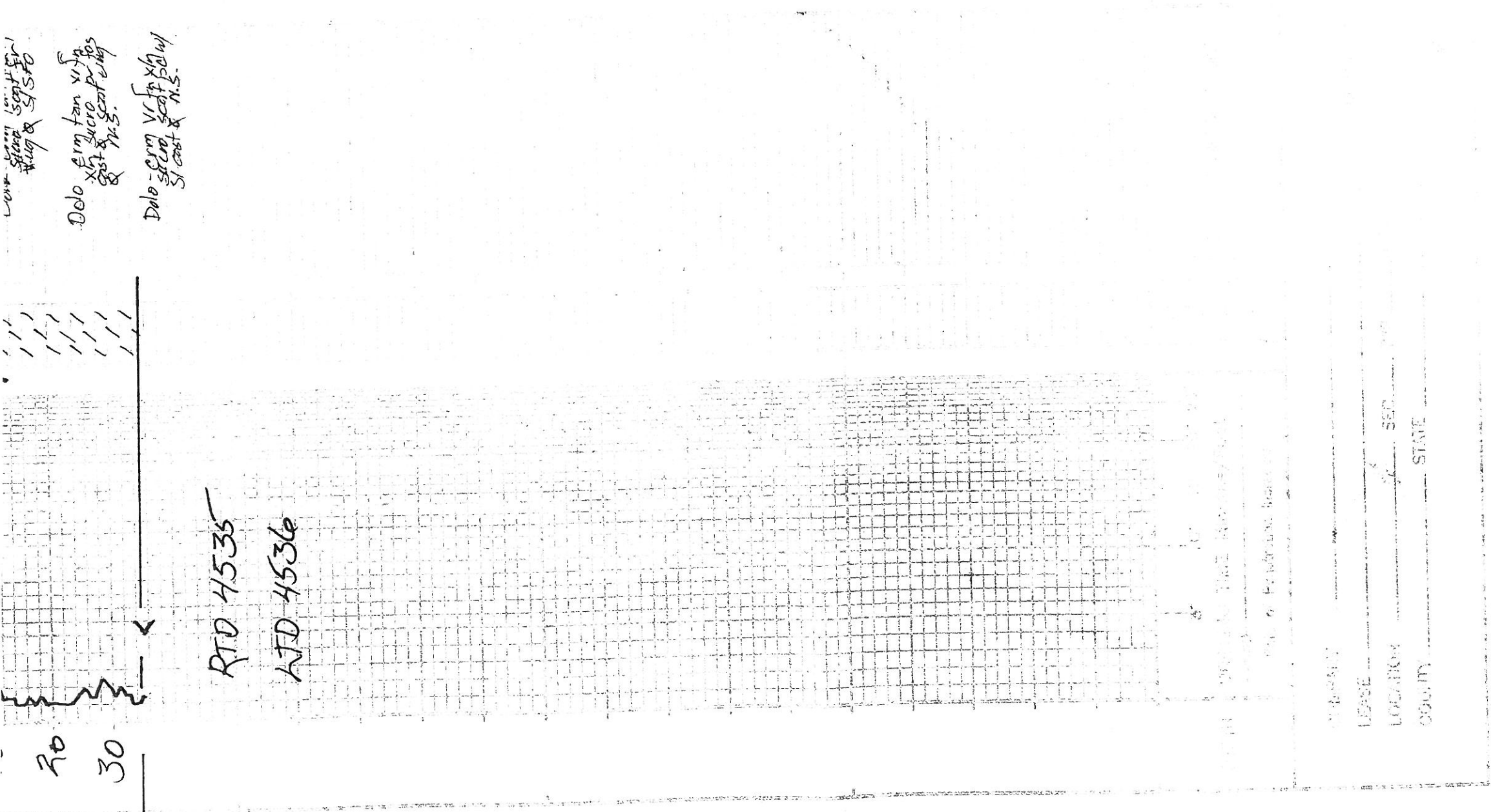
30
30
---<

Low - 1000' ...
Dolo - 1000' ...
Dolo - 1000' ...

Open - 1'4
Rec: 10
40'
50'
ISIP - 1126
FSIP - 1035
IFP 12-24
FFP 22-3
IHP 2120
FHP 2119

RTD 4535
HTD 4536

DST #5
4465-447
30-75-60:6
1st open - 1
2nd open - 1
Rec: 1
ISIP 1201
FSIP 1039
IFP 9-15
FFP 16-21
IHP 223
FHP 223



LEASE
LOCATION
COUNTY STATE

ALLIED CEMENTING CO., LLC.

037373

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Cassett Bend KS

DATE <u>10-4-11</u>	SEC. <u>5</u>	TWP. <u>17</u>	RANGE <u>24</u>	CALLED OUT	ON LOCATION	JOB START <u>7:30am</u>	JOB FINISH <u>8:30am</u>
LEASE <u>Sarvis</u>	WELL # <u>Z</u>	LOCATION <u>Ness City KS 4w 10n</u>			COUNTY <u>Ness</u>	STATE <u>KS</u>	
OLD OR NEW <u>(Circle one)</u>	OWNER <u>Transpacific Oil</u>						

CONTRACTOR Duke Rex #4

TYPE OF JOB Rotary PLS

HOLE SIZE 7-7/8 T.D. 1830

CASING SIZE _____ DEPTH _____

TUBING SIZE 4 1/2 DEPTH 1830

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

EQUIPMENT			
PUMP TRUCK	CEMENTER <u>Bodo G.</u>		
# <u>398</u>	HELPER <u>Shane J.</u>		
BULK TRUCK	DRIVER <u>Doug</u>		
# <u>341</u>	DRIVER _____		
BULK TRUCK	DRIVER _____		
# _____	DRIVER _____		
COMMON	<u>16.8</u>	@	<u>16.25</u>
POZMIX	<u>11.2</u>	@	<u>8.50</u>
GEL	<u>10</u>	@	<u>21.25</u>
CHLORIDE		@	
ASC		@	
<u>Flo Seal 70#</u>		@	<u>2.70</u>
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>2.83</u>	@	<u>2.25</u>
MILEAGE	<u>283 X 14 X .11</u>		
TOTAL			<u>5.156.02</u>

REMARKS:			
<u>1st plug at 1830 ft mt 5060</u>			
<u>2nd plug at 990 ft mt 9060</u>			
<u>3rd plug at 460 ft mt 5060</u>			
<u>4th plug at 240 ft mt 5050</u>			
<u>5th plug at 60 ft mt 7050</u>			
<u>62h mt 3050</u>			
DEPTH OF JOB	<u>1830</u>		
PUMP TRUCK CHARGE			<u>1250.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>440m</u>	@	<u>7.00</u>
MANIFOLD		@	
<u>LUM</u>	<u>28</u>	@	<u>4.00</u>
		@	
TOTAL			<u>1558.00</u>

CHARGE TO: Transpacific Oil

STREET _____

CITY _____ STATE _____ ZIP _____

BY _____

PLUG & FLOAT EQUIPMENT

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TOTAL _____