



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

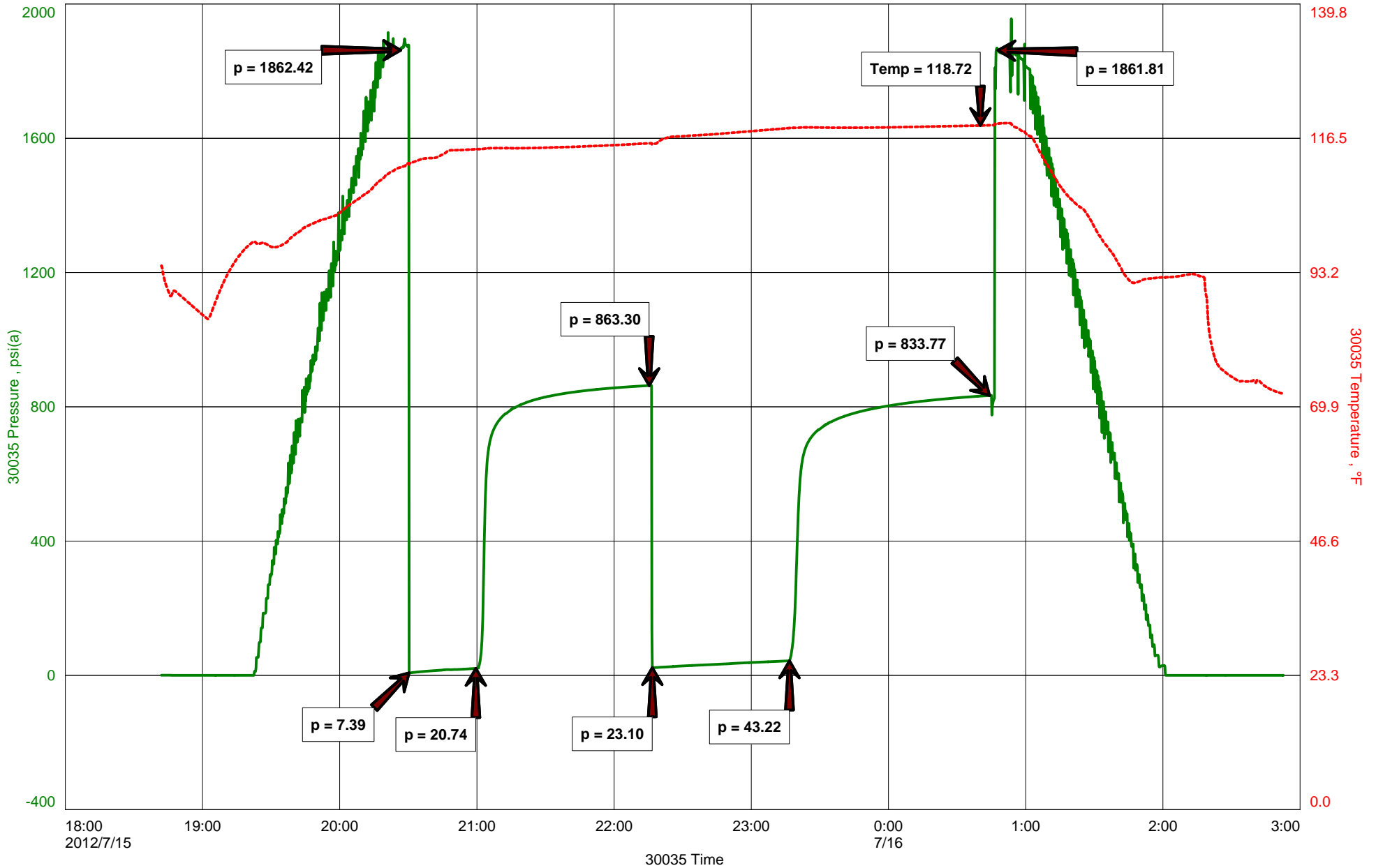
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

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 Corp
DST #2 KC 120 & 140' 3886-3920'
Start Test Date: 2012/07/15
Final Test Date: 2012/07/16

Jacobs Trust A Unit
Formation: DST #2 KC 120 & 140' 3886-3920'
Pool: Wildcat
Job Number: S0180

Jacobs Trust A Unit



Diamond Testing

General information Report

General Information

Company Name Trans Pacific Oil Corp

Contact	Glenna Lowe	Job Number	S0180
Well Name	Jacobs Trust A Unit	Representative	Jacob McCallie
Unique Well ID	DST #2 KC 120 & 140' 3886-3920'	Well Operator	Trans Pacific Oil Corp
Surface Location	SEC 8-14S-22W Gove County	Report Date	2012/07/16
Well License Number		Prepared By	Jacob McCallie
Field	WC		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #2 KC 120 & 140' 3886-3920'		
Well Fluid Type	06 Water	Start Test Time	18:42:00
		Final Test Time	02:54:00
Start Test Date	2012/07/15		
Final Test Date	2012/07/16		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:
78' OS Watery Mud 2% OIL 46% WTR 52% MUD
78' TOTAL FLUID

PH: 7
RW: .2 @ 75 degrees F
CHLORIDES: 30,000 ppm

TOOL SAMPLE:
2% OIL 73% WTR 25% MUD