



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1105401
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed
Form must be Signed
All blanks must be Filled

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
- Plug Back Conv. to GSW Conv. to Producer
- 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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

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



1105401

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

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

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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 List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------

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				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
 Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
 Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method:
 Flowing Pumping Gas Lift 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 <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------



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

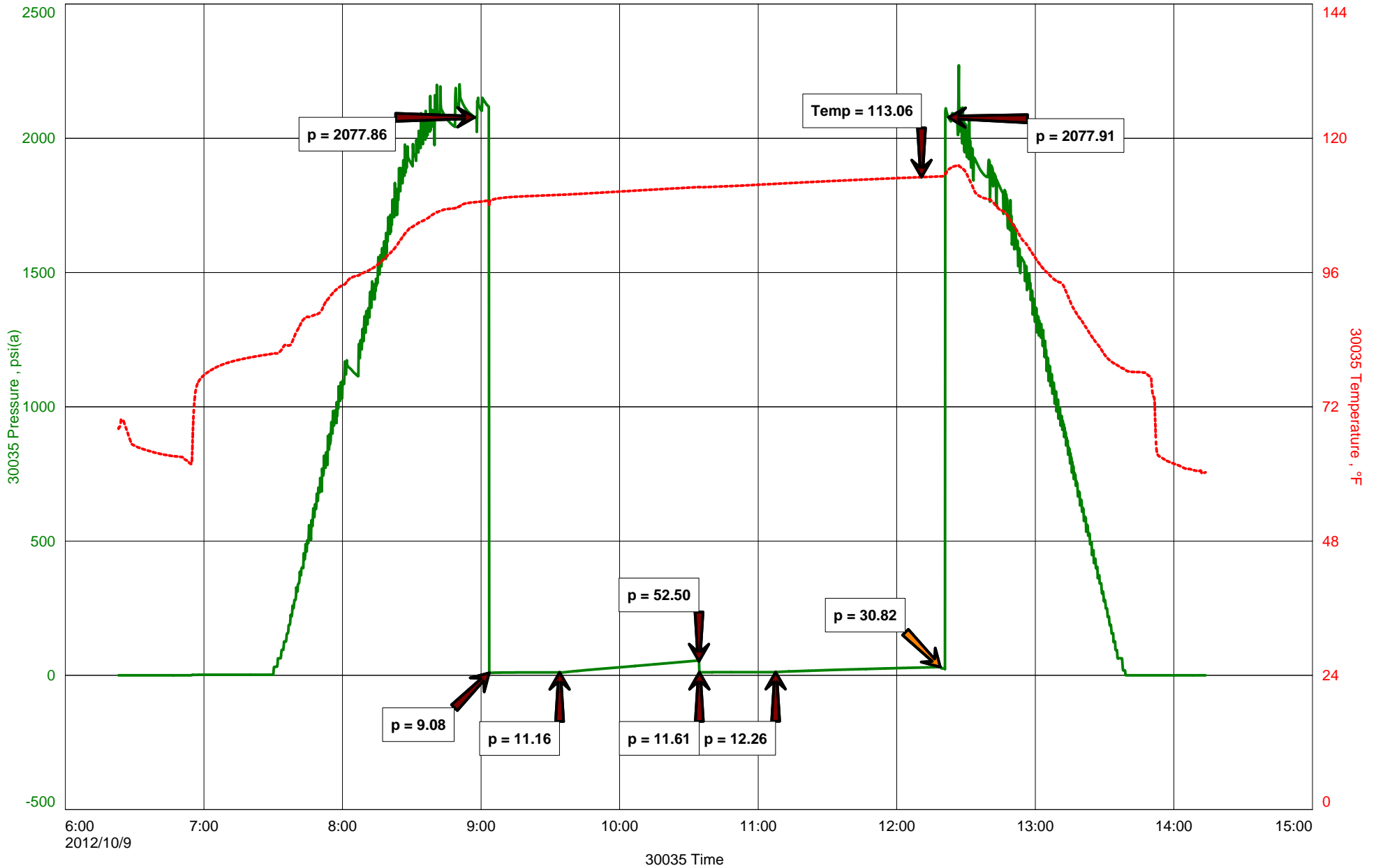
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... 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 #1 Miss 4317-4385'
Start Test Date: 2012/10/09
Final Test Date: 2012/10/09

Schaben 'A' Unit 1-12
Formation: DST #1 Miss 4317-4385'
Pool: Infield
Job Number: S0223

Schaben 'A' Unit 1-12



Diamond Testing

General information Report

General Information

Company Name Trans Pacific Oil Corp.

Contact	Bryce Bidleman	Job Number	S0223
Well Name	Schaben 'A' Unit 1-12	Representative	Jacob McCallie
Unique Well ID	DST #1 Miss 4317-4385'	Well Operator	Trans Pacific Oil Corp.
Surface Location	SEC 12-20S-22W Ness County	Report Date	2012/10/09
Well License Number		Prepared By	Jacob McCallie
Field	Schaben		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #1 Miss 4317-4385'		
Well Fluid Type	01 Oil	Start Test Time	06:23:00
		Final Test Time	14:15:00
Start Test Date	2012/10/09		
Final Test Date	2012/10/09		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:
8' DM 100% MUD

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

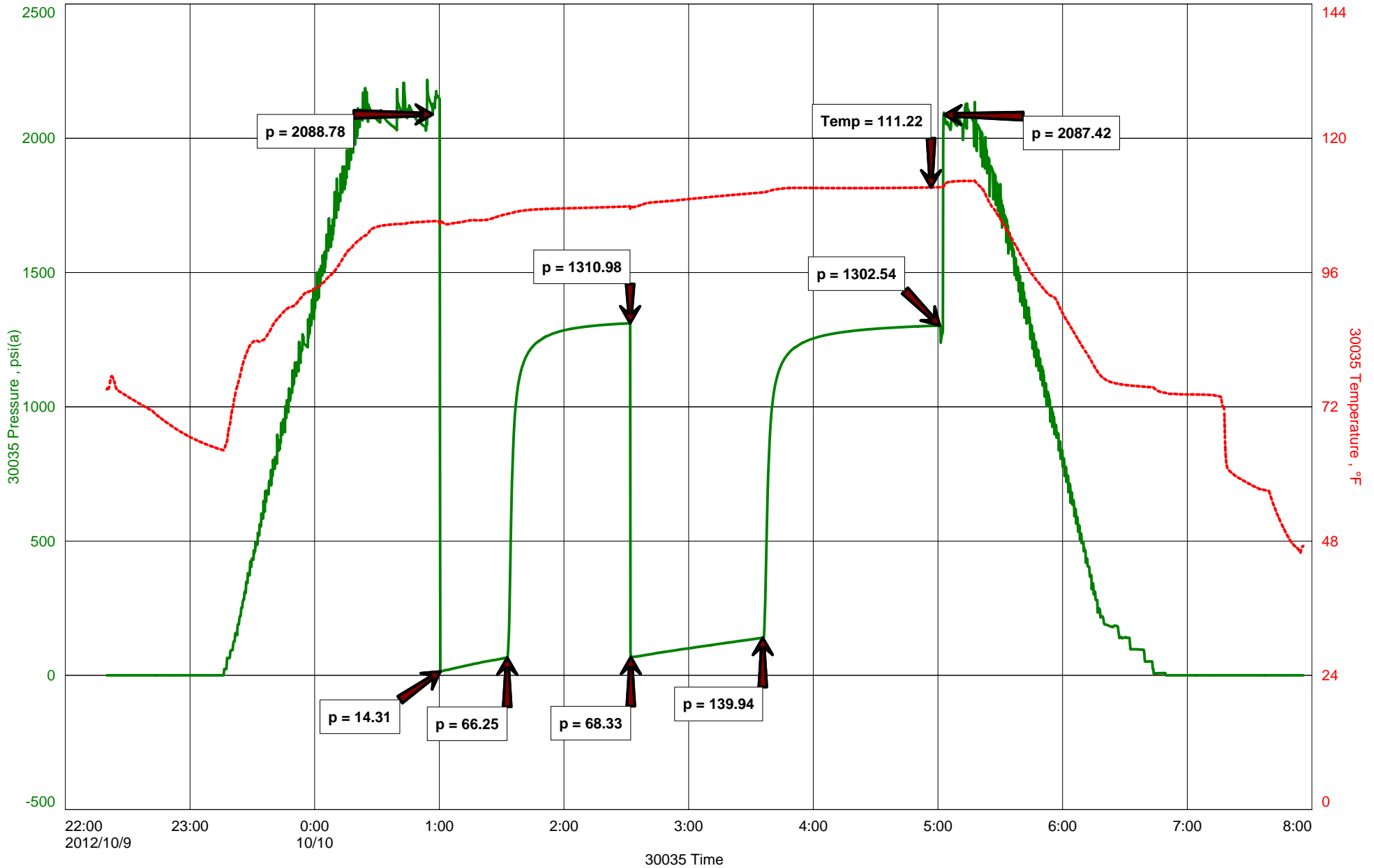
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... 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 Corp
DST #2 Miss Poro 4318-4392'
Start Test Date: 2012/10/09
Final Test Date: 2012/10/10

Schaben 'A' Unit 1-12
Formation: DST #2 Miss Poro 4318-4392'
Pool: In Field
Job Number: S0224

Schaben 'A' Unit 1-12



Diamond Testing

General information Report

General Information

Company Name Trans Pacific Oil Corp

Contact	Steve Stribling	Job Number	S0224
Well Name	Schaben 'A' Unit 1-12	Representative	Jacob McCallie
Unique Well ID	DST #2 Miss Poro 4318-4392'	Well Operator	Trans Pacific Oil Corp.
Surface Location	SEC 12-20S-22W Ness County	Report Date	2012/10/10
Well License Number		Prepared By	Jacob McCallie
Field	Schaben		
Well Type	Vertical		

Test Type	Drill Stem Test	Start Test Time	22:20:00
Formation	DST #2 Miss Poro 4318-4392'	Final Test Time	07:57:00
Well Fluid Type	01 Oil		
Start Test Date	2012/10/09		
Final Test Date	2012/10/10		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

154'	GIP			
234'	CO	100% CO		GRAVITY: 38.5 @ 60 degrees F
116'	Gassy/Oily Mud	19% GAS	25% OIL	56% MUD
350'	TOTAL FLUID			

TOOL SAMPLE:

8% GAS 35% OIL 57% MUD

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
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

December 19, 2012

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

Re: ACO1
API 15-135-25486-00-00
SCHABEN 'A' UNIT 1-12
SW/4 Sec.12-20S-22W
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

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

Trans Pacific Oil Corp.
Schaben 'A' Unit #1-12
Schaben
NE NW SE SW
12 20 22W
Ness KS
Duke Rig #4
10-2-2012 COMP 10-10-2012
4392 LHO 4393
MUD UP 3505 THE MUD Chem

ELEVATIONS
NB 2247
OF 2238
GL
Measurements Are All From KB

CASING
SURFACE 8 5/8" @ 220'
PRODUCTION 5 1/2"
ELECTRICAL SURVEYS
DI, BH GAMMA
COMP N/D

FORMATION TOPS WITH STRUCTURAL POSITION

FORMATION	LOGIC TOP	CLEAN LOG TOP	SUB-SEA DATA	STRUCTURAL POSITION		
				1	2	3
Anhydrite	1468	1468	779	781	785	
Base Anhydrite	1501	1502	745	747	751	
Heobner	3746	3746	-1499	-1495	-1497	
Lansing	3789	3794	-1547	-1539	-1541	
BKC	4131	4137	-1890	-1879	-1880	
Marmaton	4147	4145	-1898	-1892	-1897	
Pawnee	4219	4219	-1972	-1969	-1967	
FT. Scott	4299	4302	-2055	-2048	-2050	
Cherokee	4375	4326	-2079	-2074	-2070	
Miss. Osage	4320	4374	-2127	-2125	-2123	
		4387	-2140	↑		

SAMPLE TOPS

REFERENCE WELLS FOR STRUCTURE

Ritchie Wittman 'B' #1 NE SW 12-20-22W
Palomino Wittman #3 W/2 W/2 SE 12-20-22W

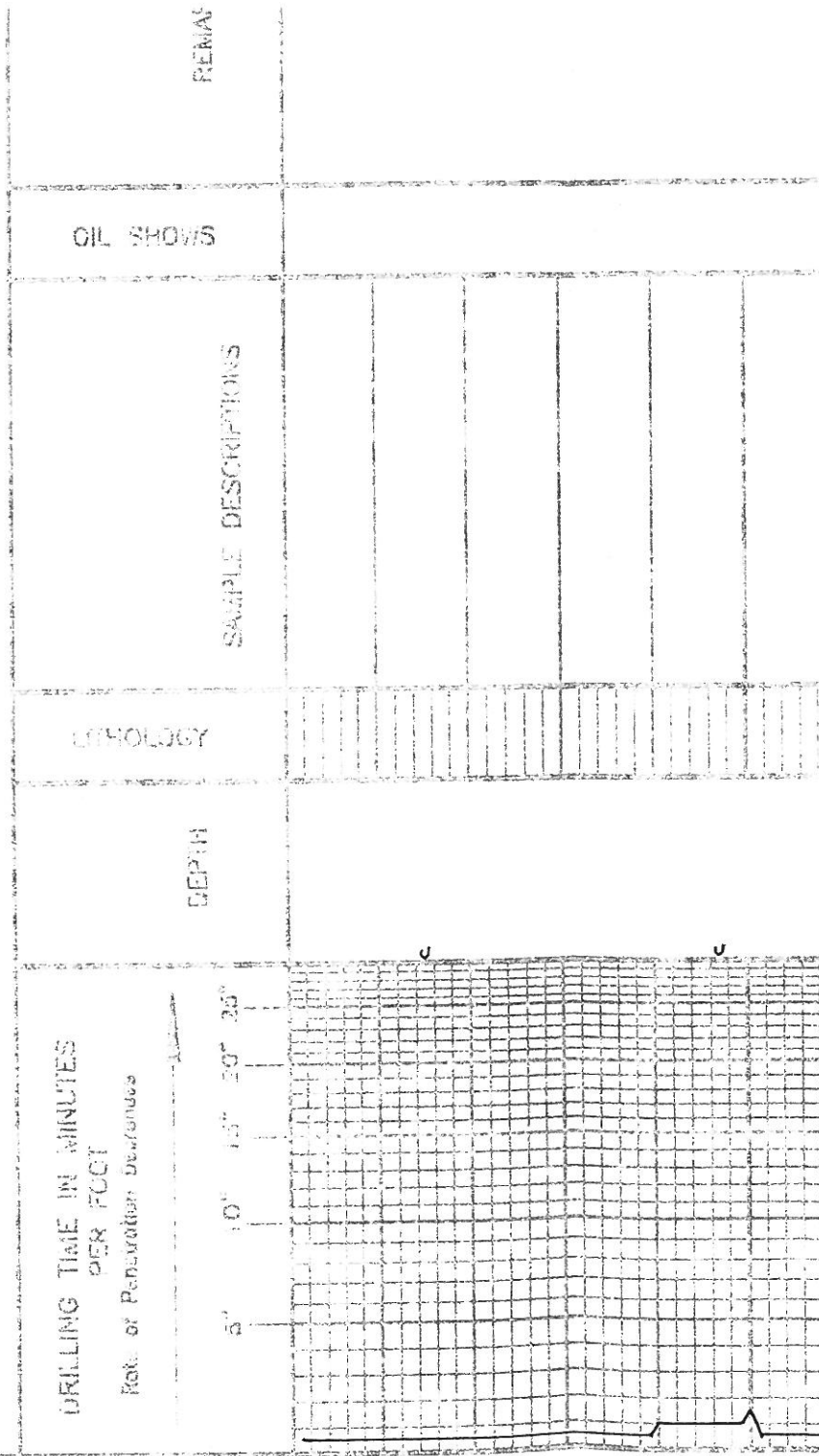
REMARKS: PRODUCTION CASING WAS SET IN THE MISS OSGE DUE TO POSITIVE DST RE. THE FT. SCOTT SHOULD BE EVALUATED FOR PRODUCTION PRIOR TO ABANDONMENT.

RESPECTFULLY SUBM.

M. R. Lavelle

LEGEND

- Dolomite
- Chert
- Oil Lime
- Limestone
- Carb sh
- Sand
- Sandstone
- Soil
- Anhydrite



ANHYDRITE
1468 + 779

BASE
ANHYDRITE
1500
1501 + 746

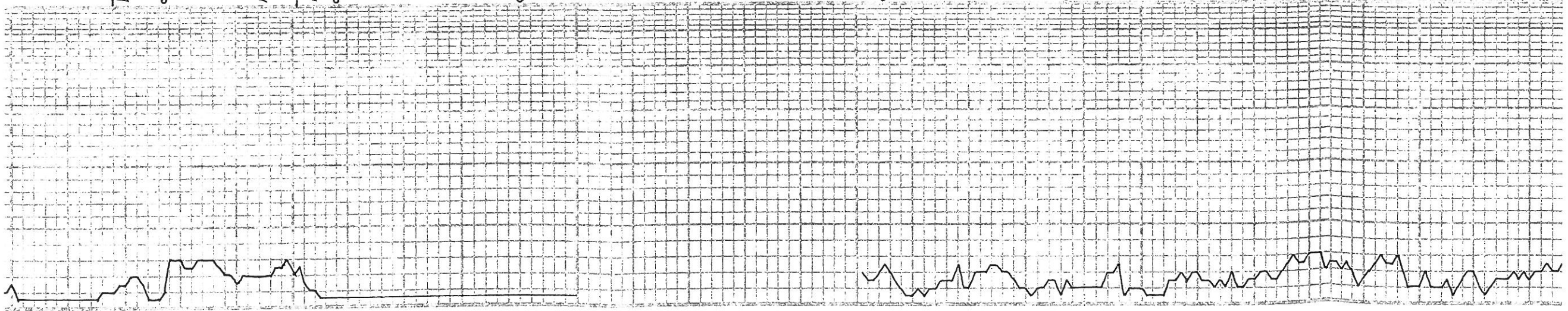
3500

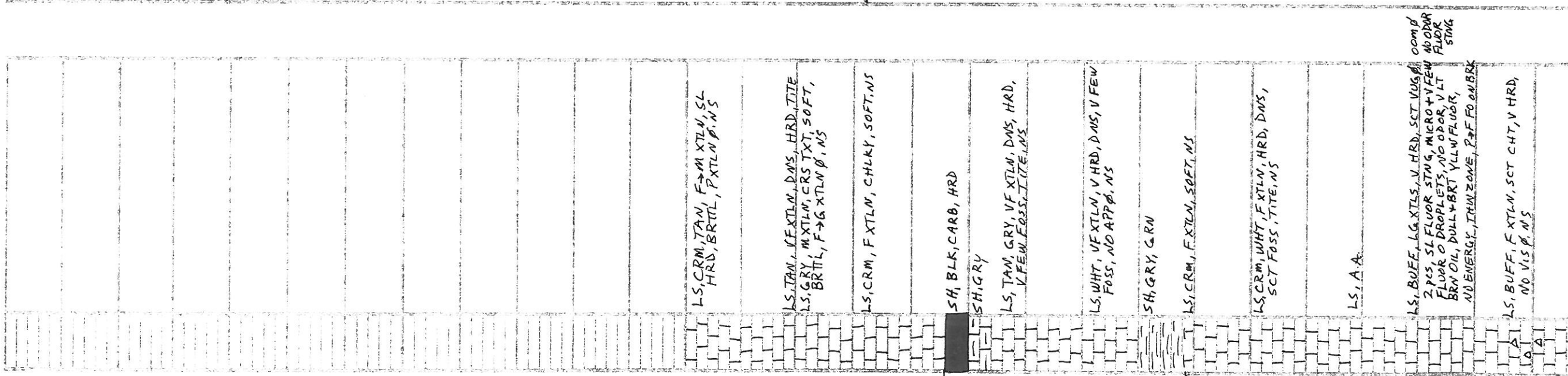
DEV 1/2°

3600

JET #1

7:AM 10-7-12
CONV @ 356'
MVD CHECK
VIS 46 WT 8.
CHLOR 1,600 LI
FILT 7.2





1st SAMPLES (late catch)

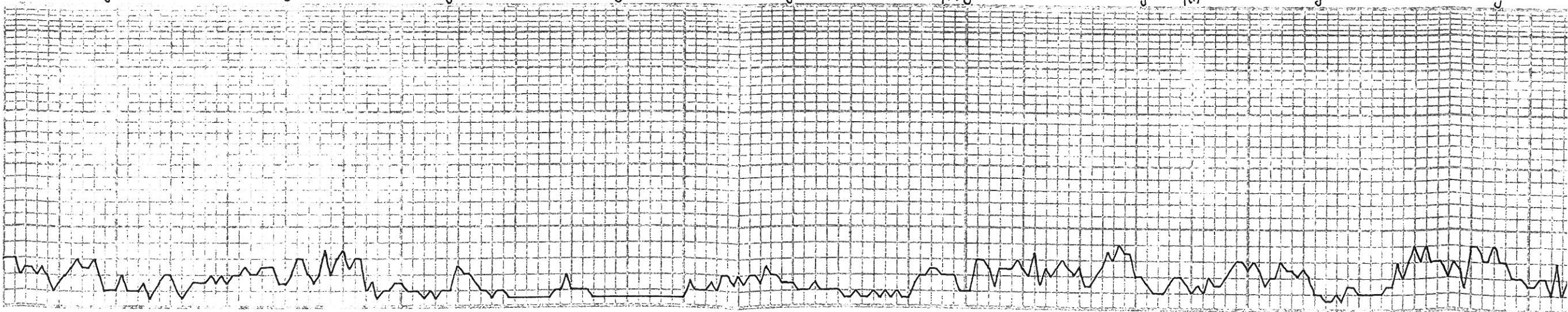
3600

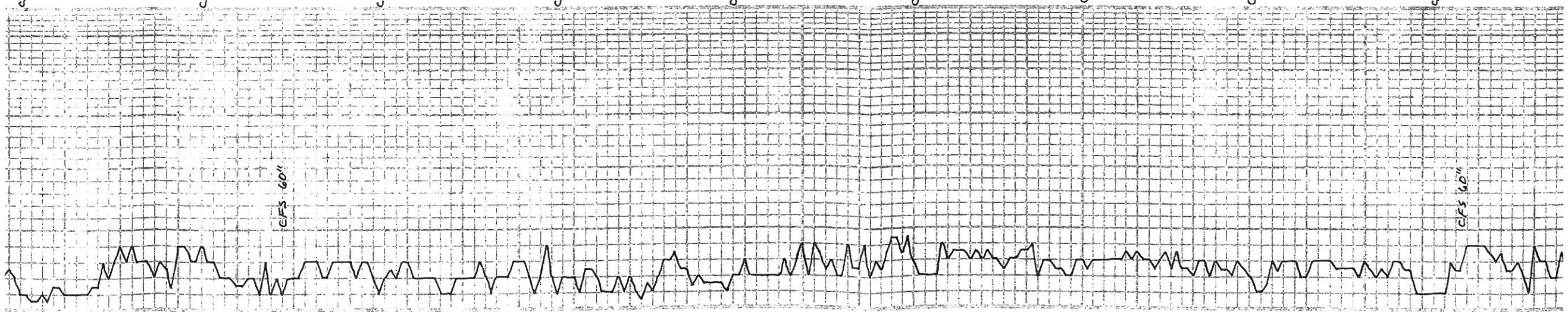
3700

HEEBMER
3746 -1499

LAUSING
3789 -1542

3800





3900

4000

LS, A, A

LS, BUFF, LG, XTLS, V, HRD, SCT VUG, ^{com d}
 2 Pcs SL FLUR STNG, MICRO + V FEW
 FLUR, 0 DRPLETS, NO OPOR, V LT
 BRN OIL, DULL + BRT YLLW FLUR,
 NO ENERGY, THIN ZONE, P + F FO ON BRK

LS, BUFF, F XTLM, SCT CHT, V HRD,
 NO VIS ϕ , NS

LS, BUFF, E, WHT, VE XTLM, V HRD, V FOSS,
 + ALGAL FRAGS, W CMT'D, TITE, NS

SH, LT + DK GRY

LS, LT TAN, VF XTLM, BRITL, M HRD,
 REXTL'D FRAGS, VP ϕ

SH, DK GRY, GRN, BRN/BURG

CHT, WHT, CRM, V FOSS, ? FRAC'D,
 NS

A A A

LS, CRM, TAN, VF XTLM, CRYSTD XTL,
 V FOSS, NO ϕ , NS

LS, CRM, M XTLM, V SL OOL, V FOSS,
 CRUMBLY, SOFT, G INT ϕ , NS

LS, CRM, E XTLM, DNS, HRD, FOSS,
 TITE, NS

LS, CRM, F XTLM, SL, C-HLKY, M HRD,
 FOSS, P XTLM ϕ , NS

SH, GRY, BLK

CHT, WHT, V FOSS, ? FRAC'D, NS

LS, WHT, F XTLM, C-HLKY, NS

SH, BLK, CABB

LS, BRN, TAN, GRY, VF XTLM, DNS,
 M HRD, BRITL, NO APP ϕ , NS

SH, GRY, SLTY

SH, GRY, GRN

LS, CRM, WHT, F XTLM, M HRD,
 FEW FOSS, SCT CHLK, NS

LS, BUFF, VF XTLM, HRD S \rightarrow M OOLS,
 F + W CMT'D OOLS, SCT OOM ϕ ,
 V SCT VUG ϕ , NS

LS, GRY, VF XTLM, V HRD, V DNS,
 SML OOLS, VW CMT'D OOLS, NO ϕ ,
 NS

LS, BUFF, F XTLM, BRITL, HRD,
 V OOL, ABUN OOM ϕ , NS

SH, BLK

LS, CRM, WHT, F XTLM, Pcs W/ SCT
 OOLS W/ N, BRITL, NS

CFS 60"

CFS 60"

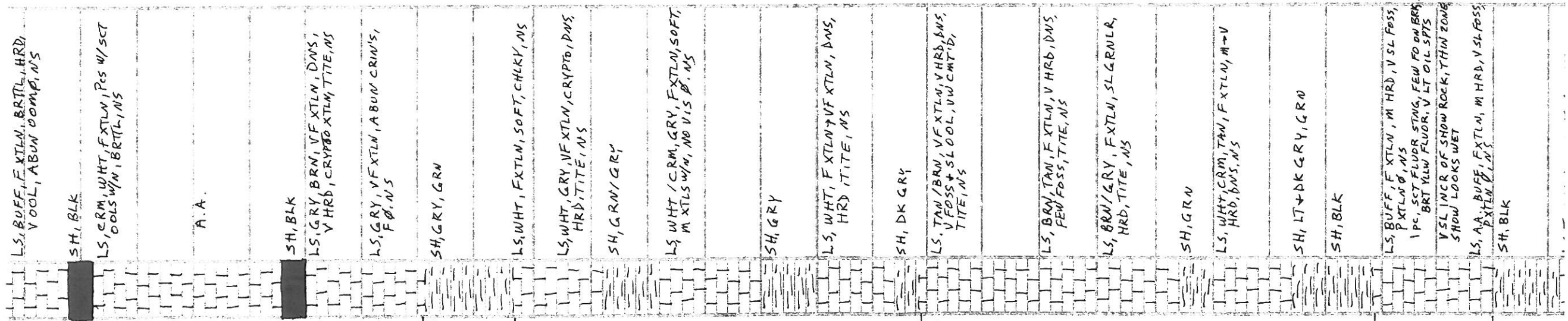
7:AM 10-8-12
RIG V @ 411

MUD CHE
VIS 55 W
CHLOR 4,000
FILT 10.8

STRAP 4402
BOARD 4401
short

SHORT TRIP
DST #1 4317
30.60
IF: 1/2, PIED 23"
FF: DEAD
REC: 8' DM
TOOL: MVD
FP: 9-11, 12-1
SIP: 53-31
HP: 2078-20

DST #2 4311
30.60
IF: BOB 24"
FF: BOB 25 1/2"
REC: 154' GIP
234' CO
116' GON
19 1/2 G, 2
TOOL: 8 1/2 G, 3
FP: 14-60, 6.
SIP: 1311-130.
HP: 2089-20.



LS, BUFF, F, XTLN, BR TL, HRD,
VOOL, ABUN COMP, NS

SH, BLK

LS, CRM, WHT, F, XTLN, Pes W/SET
DOLS W/N, BR TL, NS

A.A.

SH, BLK

LS, GRY, BRN, VF XTLN, DMS,
V HRD, CRYPTO XTLN, TITE, NS

LS, GRY, VF XTLN, ABUN CRIN'S,
F. NS

SH, GRY, GRN

LS, WHT, F, XTLN, SOFT, CHKY, NS

LS, WHT, GRY, VF XTLN, CRYPTO, DMS,
HRD, TITE, NS

SH, GRN/GRY

LS, WHT/CRM, GRY, F, XTLN, SOFT,
M XTLN W/N, NO VIS P. NS

SH, GRY

LS, WHT, F, XTLN, VF XTLN, DMS,
HRD, TITE, NS

SH, DK GRY

LS, TAN/BRN, VF XTLN, V HRD, DMS,
V FOSS + SLOOL, VWCMT'D,
TITE, NS

LS, BRN, TAN, F, XTLN, V HRD, DMS,
FEW FOSS, TITE, NS

LS, BRN/GRY, F, XTLN, SL GRNLA,
HRD, TITE, NS

SH, GRN

LS, WHT, CRM, TAN, F, XTLN, M+V
HRD, DMS, NS

SH, LT+DK GRY, GRN

SH, BLK

LS, BUFF, F, XTLN, M HRD, V SL FOSS,
P XTLN, NS
1 PC, SET FLUID STAG, FEW FO ON BRN, NO ODR
BRT YLW FLUOR, V LT OIL SPTS

V SL INCR OF SHOW ROCK, THIN ZONE
SHOW LOOKS WET

LS, AA, BUFF, F, XTLN, M HRD, V SL FOSS,
P XTLN, NS

SH, BLK

4100

BKC
4131-1884

MARMATON
4147-1900

4200

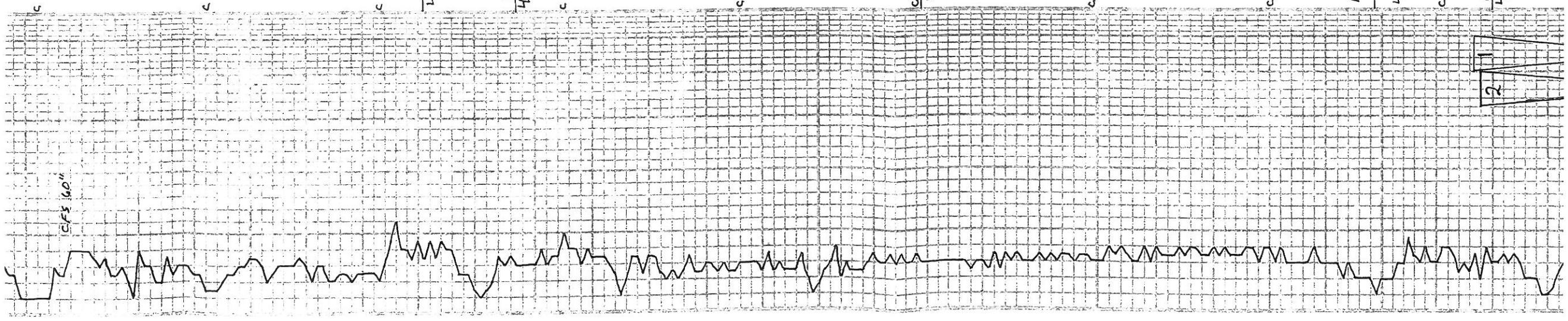
PAWNEE
4219-1972

FT SCOTT
4300

4299-2052

CHEROKEE
4320-2073

C.F.S 100"



Well: Schaben A Unit 1-12 *STR:* 12-20S-22W *City:* Ness *State:* Kansas

Logs Tops:

Anhydrite	1466' (+ 781) flat
B/Anhydrite	1501' (+ 746) - 1'
Heebner	3746' (-1499) - 4'
Lansing	3794' (-1547) - 8'
BKC	4137' (-1890) -11'
Marmaton	4145' (-1898) - 4'
Fort Scott	4302' (-2055) - 7'
Cherokee Shale	4326' (-2079) - 5'
Mississippi	4375' (-2128) - 3'
RTD	4392' (-2145)

JOB LOG

SWIFT Services, Inc.

DATE 10 OCT 12 PAGE NO.

CUSTOMER TRANS PACIFIC OIL WELL NO. LEASE SCRAABEN #1 JOB TYPE 5 1/2 LONGSTRING TICKET NO. 23477

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1930							ON LOCATION
	2130							START PIPE 5 1/2 - 14" RTD @ 4392 LTD @ 4393 SHOE JT. 21.88' SET 5' OFF BOTTOM CENTRALIZERS 1, 2, 3, 5, 7, 9, 11, 13, 70, 72 BASKETS, 2, 70 PORT COLLAR TOP OF JT # 71 @ 1426
	1200				✓		1100	SET PACKER SHOE - CIRCULATE.
	0103	5 1/2 6 1/2	12 20		✓ ✓			Pump 500 gal MUD FLUSH Pump 20 BBL KCL FLUSH
	0118		7					PLUG RH (30sx)
	0121	4 1/2	35		✓			MIX 145sx EA2
	0138							WASH OUT Pump & LINES.
	0140	6 1/2			✓			START DISPLACING PLUG.
	0208	8	106 1/2		✓		1400	PLUG DOWN PSI up LATCH PLUG IN
	0210				✓			RELEASE PSI - DRY
	0215							WASH TRUCK
	0215							JOB COMPLETE THANKS #115 JASON JEFF JEREMY

Primary Cont

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JOB LOG

SWIFT Services, Inc.

DATE 16 OCT 12 PAGE NO.

CUSTOMER TRANS PAC WELL NO. A-1 LEASE Shaben JOB TYPE cement port collar TICKET NO.

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								175 sks SMD w/ 1/2" # Floode, 28" 3 1/2" port collar 1426'
	0930							on loc TRK 114
	0949					1000	1000	test to 1000 psi - held open port collar
	0953	3 1/2	2			300		inj RATE 3 1/2 @ 300
	0957	3 1/2	3			300		mix 175 sks cement @ 11.2 ppg fluid to surface
		3 1/2				300		
	1015	3 1/2	75			450		- cement to surface - { 140 sks mixed } 20 to pit }
	1020		7 1/2					fill up Port hole displace w/ H ₂ O close port collar
	1030					1000	1000	test to 1000 psi - held run 5 joints
	1045		30					Reverse hole clean - 2 cement plugs - pull tool
	1055							wash truck Back-up job complete flush Blaine ISAPC TJ & Dave

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