



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1151375
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
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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: _____



1151375

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
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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				

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: _____ _____
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DIAMOND TESTING

Pressure Survey Report

General Information

Company Name	TRANS PACIFIC OIL	Job Number	M491
Well Name	SUTTLE A #1-9	Representative	MIKE COCHRAN
Unique Well ID	DST#1 3825-3854 ARBUCKLE	Well Operator	TRANS PACIFIC OIL
Surface Location	SEC.9-18S-18W RUSH CO.KS.	Report Date	2013/04/26
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	W. BRYCE BIDLEMAN
		Test Unit	NO. 1

Test Information

Test Type	CONVENTIONAL		
Formation	DST#1 3825-3854 ARBUCKLE		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2013/04/26	Start Test Time	09:25:00
Final Test Date	2013/04/26	Final Test Time	17:25:00
		Well Fluid Type	01 Oil
Gauge Name	0063		
Gauge Serial Number			

Test Results

Remarks RECOVERED:

150' GIP
165' GO 5%GAS, 95% OIL
119' WGMCO 14% GAS, 56% EMULSIFIED OIL, 2% WTR, 28% MUD
284' TOTAL FLUID

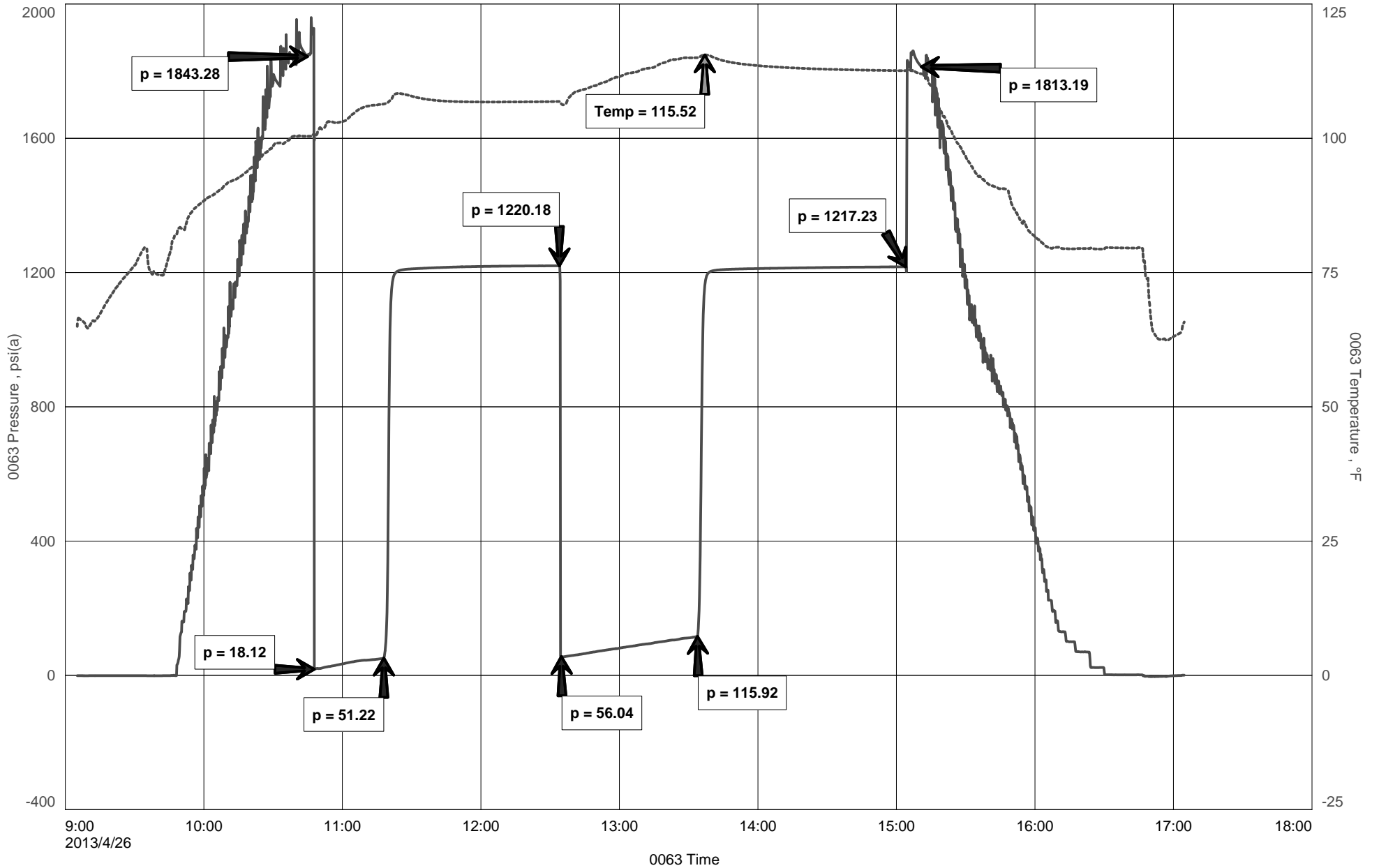
GRAVITY: 41.6 @ 60 DEG

TOOL SAMPLE: 2% GAS, 69% EMULSIFIED OIL, 1%WTR, 28% MUD

TRANS PACIFIC OIL
DST#1 3825-3854 ARBUCKLE
Start Test Date: 2013/04/26
Final Test Date: 2013/04/26

SUTTLE A #1-9
Formation: DST#1 3825-3854 ARBUCKLE
Pool: WILDCAT
Job Number: M491

SUTTLE A #1-9





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
100 S. Main, Suite 200
Wichita, Kansas 67202

Well: Suttle A 1-9 **STR:** 9-18S-18W **Cty:** Rush **State:** Kansas

Log Tops:

Heebner	3435' (-1343) - 4'
Lansing	3487' (-1396) - 1'
BKC	3748' (-1657) - 1'
Arbuckle	3851' (-1760) -14'
RTD	3854' (-1763)

ALLIED OIL & GAS SERVICES, LLC

060394

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999

SOUTHLAKE, TEXAS 76092

SERVICE POINT:

At Road 15

DATE <u>4-21-13</u>	SEC <u>9</u>	TWP. <u>18</u>	RANGE <u>18</u>	CALLED OUT <u>10:30AM</u>	ON LOCATION <u>4:00PM</u>	JOB START <u>5:00PM</u>	JOB FINISH <u>6:00PM</u>
LEASE <u>Seattle</u>	WELL # <u>A-19</u>	LOCATION <u>Road Center 2 North by west</u>		COUNTY <u>Rock</u>	STATE <u>TX</u>		
OLD OR NEW (Circle one)							

CONTRACTOR Shielder Ind OWNER Same

TYPE OF JOB 5" Surface

HOLE SIZE 12 1/4" T.D. 1250'

CASING SIZE 8 3/8" DEPTH 1250'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT 18'

CEMENT LEFT IN CSG. 18'

PERFS.

DISPLACEMENT 78 1/4"

CEMENT

AMOUNT ORDERED 500 lbs Class 1

39cc 27c 7c

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

EQUIPMENT

PUMP TRUCK CEMENTER Tom Disher

3166 HELPER Port Holgerman

BULK TRUCK

3114-170 DRIVER Ben Newell

BULK TRUCK DRIVER

#

REMARKS:

Ren 1250' of 8 3/8" Bore Smeared

made 500 lbs Class 1 27cc

27c Del. Refused plus Disband

with 170 Landed Plug @ 500'

Cement And Circulate

CHARGE TO: Thomas Rose

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL _____

SERVICE

DEPTH OF JOB 1250'

PUMP TRUCK CHARGE @ _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

MANIFOLD @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

1-8 3/8 Baffle Plug @ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

To: Allied Oil & Gas Services, 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.

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____

IF PAID IN 30 DAYS

PRINTED NAME Thomas F. Rose

SIGNATURE Thomas F. Rose

GEOLOGIST'S REPORT

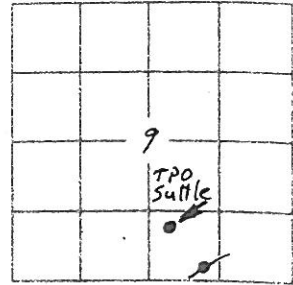
DRILLING TIME AND SAMPLE LOG

COMPANY <u>Trans Pacific Oil Corp.</u>	ELEVATIONS
LEASE <u>Suttle A. #1-9</u>	KB <u>2091</u>
FIELD _____	DF _____
LOCATION <u>1240' FSL, 2290' FEL</u>	GL <u>2096</u>
SEC <u>9</u> TWSP <u>18s</u> RGE <u>18w</u>	Measurements Are All
COUNTY <u>Rush</u> STATE <u>Kansas</u>	From <u>KB</u>
CONTRACTOR <u>Shields Drilling</u>	CASING
SPUD <u>4/19/13</u> COMP <u>4/27/13</u>	SURFACE <u>8 5/8" @ 1247'</u>
RTD <u>3854'</u> LTD <u>3854'</u>	PRODUCTION <u>5 1/2" @ 3852'</u>
MUD LP <u>2800'</u> TYPE MUD <u>Chemical</u>	ELECTRICAL SURVEYS
	<u>Nabors</u>
	<u>RAG Log</u>

SAMPLES SAVED FROM <u>3400</u>	TO <u>TD</u>
DRILLING TIME KEPT FROM <u>3050</u>	TO <u>TD</u>
SAMPLES EXAMINED FROM <u>3400</u>	TO <u>TD</u>
GEOLOGICAL SUPERVISION FROM <u>3250</u>	TO <u>TD</u>
GEOLOGIST ON WELL <u>W. Bryce Bidleman</u>	

FORMATION TOPS	LOG	SAMPLES
Anhydrite	1257 (+834)	-5'
Base Anhydrite	1283 (+808)	
Heebner	3434 (-1343)	-4'
Lansing	3487 (-1396)	-1'
Base Kansas City	3748 (-1457)	-1'
Arbuckle	3851 (-1760)	-14'
RTD	3854 (-1763)	
LTD	3854 (-1763)	

Reference Well:
S.A. Allison Young #3
SE SW 26 9-18s-18w



REMARKS Due to encouraging drill stem test results, 5 1/2" production casing w/ set one foot into the Arbuckle to further evaluate the Arbuckle for prod

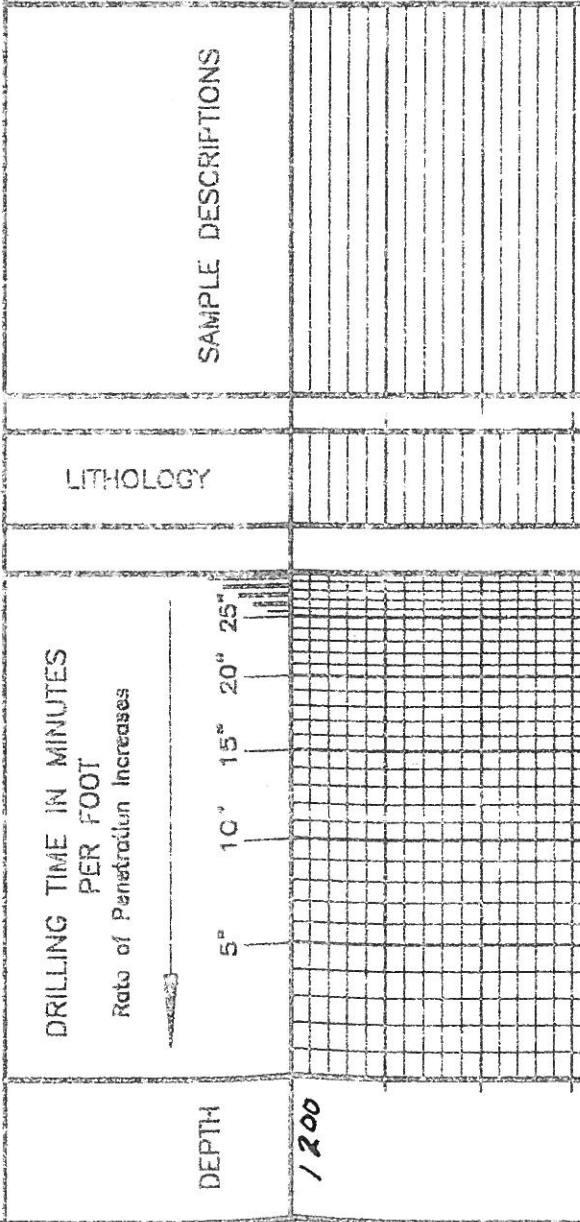
Respectfully,

W. Bryce Bidleman

LEGEND

- Dolomite
- Chert
- Coal Lime
- Limestone
- Carb sh
- Shale
- Sandstone
- Salt
- Anhydrite

SCALE " = 100'



8 1/2" @ 1200'

Anhydrite 1257 (1834)
Flag - same

Base Anhydrite 1283 (1808)
Flag - same

Top of 3175 (1084)
Flag 3176 (1085)

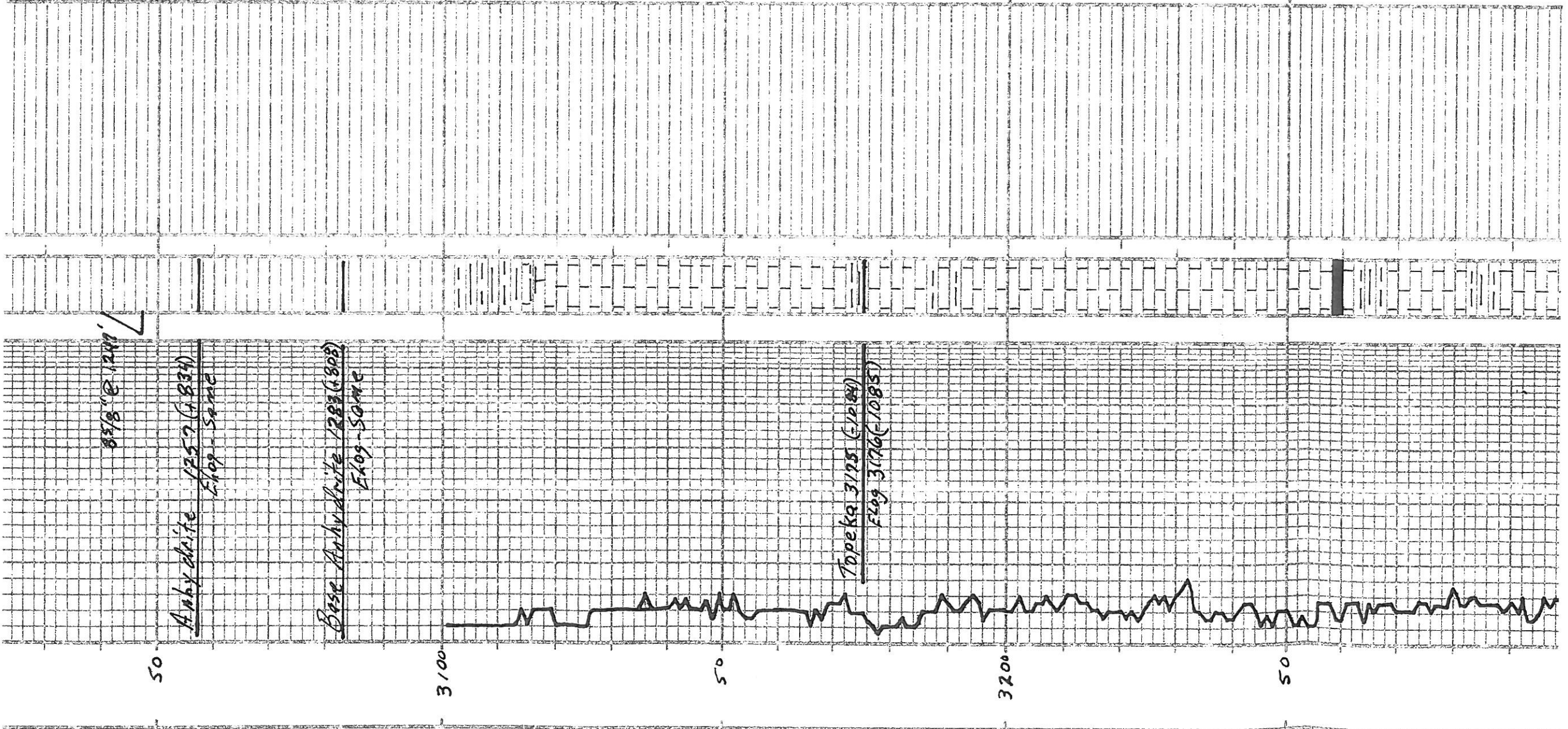
50

3100

50

3200

50



3300

50

3365
(-1274)

LM-TM, FX, FOSS, MOSTLY DSE
SOME CHK.

LM-TM, FX, FOSS, MOSTLY DSE
SOME CHK.

3400

Heebner

3436

(-1345)

569

(-1343)

50

Loansing

3490

(-1399)

569

(-1396)

e-fs

50

LM-TM, FX, FOSS, GRAY IN PT,
FR AMT SOFT, CHK.

LM-TM, FX, FOSS, GRAY IN PT,
FR AMT SOFT, CHK.

LM-TM, FX, FOSS, DSE,
SOME CHK.

LM-TM, FX, FOSS, DSE,
SOME CHK.

LM-TM, FX, FOSS, DSE, HARD,
SOME CHK.

LM-TM, FX, FOSS, DSE,
SOME CHK.

LM-TM, FX, FOSS, DSE,
SOME CHK.

LM-TM, FX, FOSS, DSE,
SOME CHK.

LM-TM, FX, FEW FOSS, DSE,
N.S.

LM-TM, FX, FEW FOSS,
SOME AMT CHK.

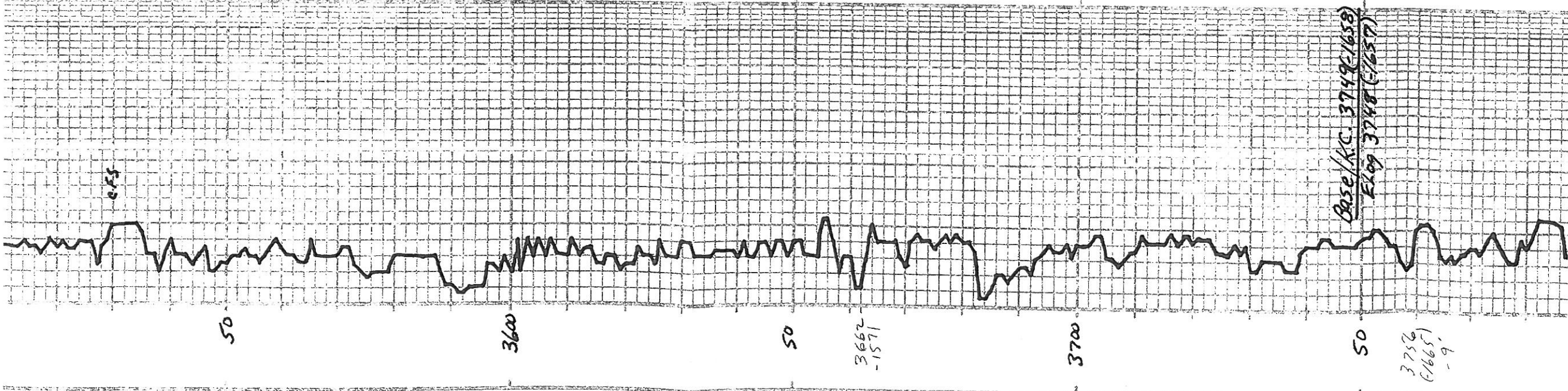
LM-TM, FX, FEW FOSS,
SOME AMT CHK.

LM-TM, FX, FEW FOSS,
SOME AMT CHK.

LM-TM, FX, FEW FOSS,
SOME AMT CHK.

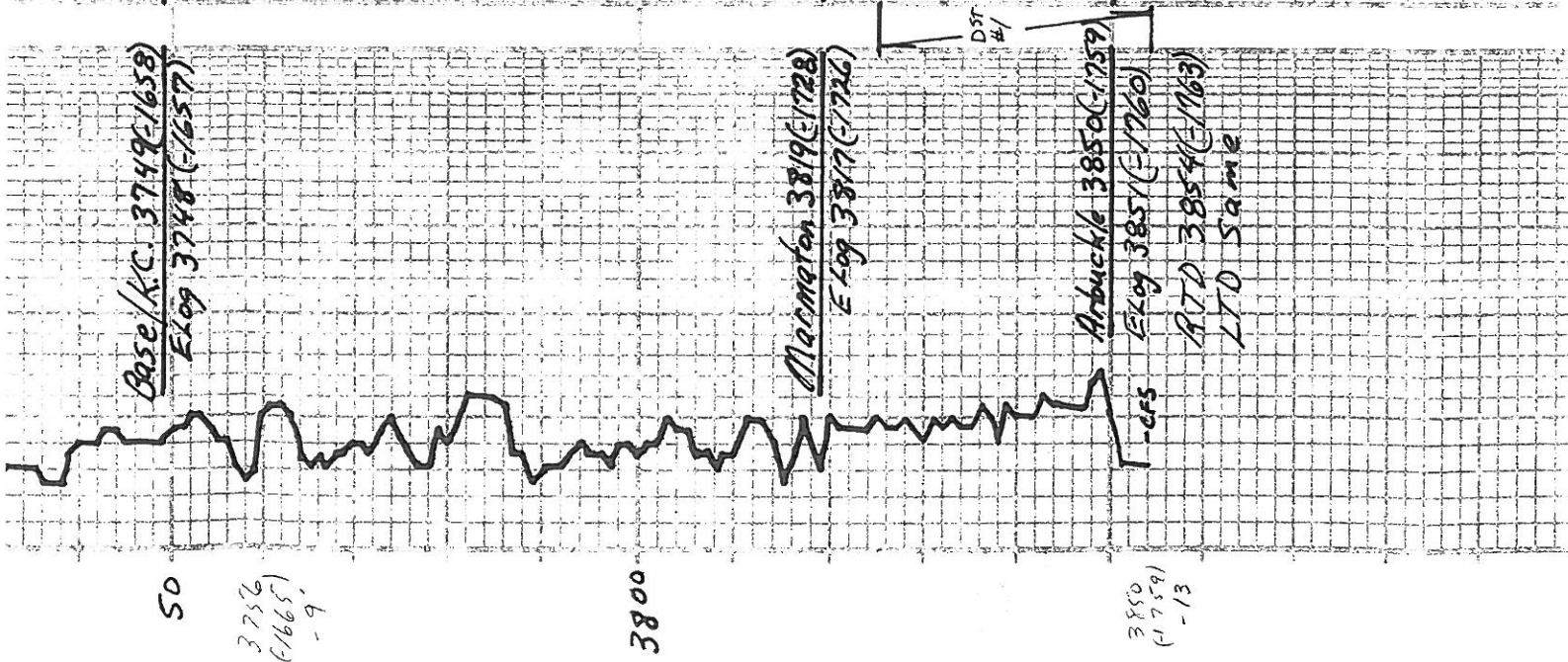
LM-TM, FX, FEW FOSS,
SOME AMT CHK.

LM-TM, FX, FEW FOSS,
SOME AMT CHK.



LM-TM-TX-TU-GY-FX-FOS
DSE. SH-RD → SH-RD →
GY
LM-CRM-TU-FX-FOS, MOSTLY
DSE, CHRY IN PT. NS.
LM-CRM-TU-FX-FOS, 2 SAT PR
VGLG, MOSTLY DSE, CHRY IN PT.
LM-TU-TU → GY-FX-DSE.
SH-RD → GRN → GY.
LM-CRM → TU, EX, MOST DSE,
CHRY IN PT. NS.
SH-AA
LM-TU-TU → GRN, FX, FOS, SCAT
FX VGLG, FOS, MOSTLY CHRY
IN PT.
LM-CRM → TM → TL, GY, F, TM,
DSE, CHRY IN PT.
SH-RD → GRN → GY.
LM-TU → GY, FOS, FEW DGLIES,
DSE, CHRY IN PT.
SH-RD → GRN → GY. TR GY 0.01 CNT.
LM-TU → TM → PWS, FOS, DGLI IN PT.
DSE, CHRY.
CHT-GY → WH, SHP.
SH-AA
LM-AA EL HER W GY, CHY-AA
SH-RD → GRN → GY → BSK, CARB.
LM-TU, F → MX, DGLI, GD COMAD
CHY, CHRY, NS.
LM-CRM → TU, FX, FOS, DGLI IN
PT, MOST DSE, CHRY IN PT. NS.
SH-RD → GY.
LM-TU, FX, DSE, HARD FEW
DGLIES, FOS, MOSTLY FROM ABOVE.
LM-AA
SH-RD → GRN → GY → BLK.
LM-TU → GY, FX, MOSTLY DSE,
CHY, SHLY-RD → GY, 20%
GY GLASS.
LM-WH → GRN → TU, FX, FEW
FOS, MOSTLY DSE.
CHT-WH → TU, TRAMS, FOS, NS.
LM-CRM → TU, FX, FEW FOS
DSE, CHRY IN PT. CHY-AA
LM-AA
SH-AA → GRN → GY → BLK.
LM-CRM → TU, FX, MOSTLY DSE,
HARD
SH-RD → GRN → GY, SOME GY
GLASS.
LM-TU, F → MX, FEW FOS,
DGLI, GD COMAD, NS.
LM-TU, FX, FOS, DGLI IN PT, FEW
DGLIES, MOSTLY DSE.
SH-GY
LM-CRM → TU, FX, FEW SCAT
FOS, VGLG, DSE, CHRY IN PT. NS.
LM-CRM → TU, FX, FOS, DSE.
CHT-CRM → TU, FOS.
LM-TU, FX, DSE, SOME GY DSE
SH-RD → GRN → GY → BLK.
LM-TU, FX, DSE, CHRY IN PT.
SH-RD → GRN → GY.
LM-CRM → TU, FX, FOS, CHRY IN PT.
MOSTLY DSE, CHRY IN PT.
LM-AA
SH-AA → GRN → GY.
LM-AA, SH-RD, ER AMT, SOFT
RD GLASS, TR ER RD, CHY.
LM-WH → GRN, FX, FEW FOS
ER AMT, CHY, TR RD → OR, CHY.
SH-AA
LM-CRM → TU, FX, MOSTLY DSE, CHRY

Grid lines and other markings on the right side of the page.



DEPTH 3750 (1759) -13

DRILLING TIME Minutes/Foot

Rate of Penetration Increases

5' 10' 15' 20' 25'

COMPANY Trans Pacific Oil Corporation

LEASE Suttle A-1-9

LOCATION 1240' E 5L 2290' E 1L SEC 9 T1P 18S R10W

COUNTY Rush STATE Kansas

ELEVATION: K.B. 2091

LM-TU → FX, DSE, CHKY W. PT.
SH-TD → GRN → GY

LM-CRM → TU, FX, Foss (w/PT)
MOSTLY DSE, CHKY W. PT.

LM-AA
SH-MAR → GRN → GY

LM-AA SH-RD. FR AMT SOFT
RD CLAYS. TR GRD. SMT.

LM-LH → GRM, FX, FPM Foss,
FR AMT CHX. TR RD → OR ENT.
SH-AA

LM-CRM → TU, FX, MOSTLY DSE, CHAT
10 FT. SL. REAR IN ENT-ORANGE,
CL. F. F. F. F.

SH-AA. SPA WASHED SL. RED.

LM-CRM → TU, FX, MOSTLY DSE, FR
AMT. CHX. FR AMT ORANGE CHX.
SH-GY

LM-AA, ORANGE CHT.
SH-MAR → GRN → GY. SOME BROWN
CLAYS.

LM-TU → GY-TU, FX, DSE.
ENT-ORANGE, TRANS, JHR.

LM-TU → GY, F → MY, DSE.
SH-MAR → GRN → GY → BK.

LM-GY-TU → AT GY, FX, DSE,
HARD, SB-LITCH.

DOL-CRM → GRM, F → MY, SUGAR LPT.
RE WY-AL → F → GY, F → TU, F → TU,
PROPERTY, FEW STOPS AT STN,
WK OOK, FR FLU.

LITHOLOGY

SAMPLE DESCRIPTIONS

REMARKS

DST #1 3825-3854'
30-75-60-90
1st Open - Built to 8"
2nd Open - 808/43" (W)
Rec: 150' 61P
165' 60 (9520)
119' SWC 65Y MCO
— (5620, 28W
284' Total F. M.
FP: 18-51 / 56-1.
SIP: 1220 / 1217
HP: 1843 / 1813

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

August 08, 2013

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

Re: ACO1
API 15-165-22017-00-00
Suttle A 1-9
SE/4 Sec.09-18S-18W
Rush 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