



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1196170
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: _____

1196170

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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
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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> <i>(Submit ACO-4)</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 CORP.	Job Number	M613
Well Name	STANLEY #3	Representative	MIKE COCHRAN
Unique Well ID	DST#1 4053-4102 MARMATON	Well Operator	TRANS PACIFIC OIL CORP.
Surface Location	SEC.27-18S-24W NESS CO.KS.	Report Date	2014/02/09
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	ALEX CHAPIN
		Test Unit	NO. 3

Test Information

Test Type	CONVENTIONAL		
Formation	DST#1 4053-4102 MARMATON		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2014/02/08	Start Test Time	16:40:00
Final Test Date	2014/02/09	Final Test Time	04:10:00
		Well Fluid Type	01 Oil
Gauge Name	0063		
Gauge Serial Number			

Test Results

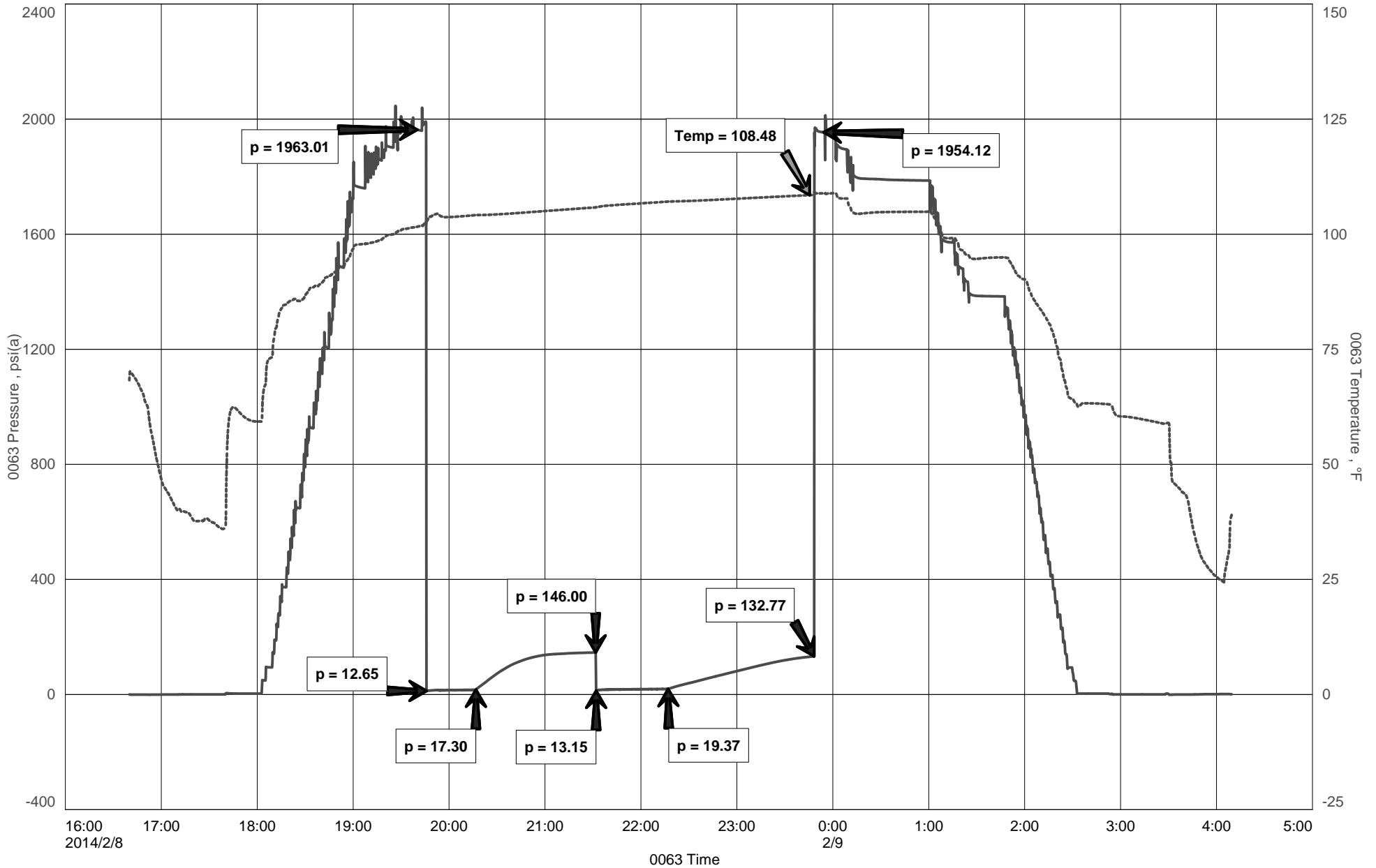
Remarks **RECOVERED:**
25' GM ~100% MUD W/ SOME GASSY BUBBLES
25' TOTAL FLUID

TOOL SAMPLE: ~1% GAS, ~99% MUD W/ A THIN SCUM OF OIL, SLIGHT ODOR

TRANS PACIFIC OIL CORP.
DST#1 4053-4102 MARMATON
Start Test Date: 2014/02/08
Final Test Date: 2014/02/09

STANLEY #3
Formation: DST#1 4053-4102 MARMATON
Pool: WILDCAT
Job Number: M613

STANLEY #3





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: STNLY3DST1

TIME ON: 1640 (2/9)
TIME OFF: 0410 (2/9)

Company TRANS PACIFIC OIL CORPORATION Lease & Well No. STANLEY #3
Contractor DUKE DRILLING CO.,INC. RIG 10 Charge to TRANS PACIFIC OIL CORPORATION
Elevation 2280 GL Formation MARMATON Effective Pay _____ Ft. Ticket No. M613
Date 2/8/2014 Sec. 27 Twp. _____ 18 S Range _____ 24 W County NESS State KANSAS
Test Approved By ALEX CHAPIN Diamond Representative MIKE COCHRAN

Formation Test No. 1 Interval Tested from 4053 ft. to 4102 ft. Total Depth 4102 ft.
Packer Depth 4048 ft. Size 6 3/4 in. Packer depth NA ft. Size 6 3/4 in.
Packer Depth 4053 ft. Size 6 3/4 in. Packer depth NA ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4042 ft. Recorder Number 0063 Cap. 6,000 P.S.I.
Bottom Recorder Depth (Outside) 4099 ft. Recorder Number E1150 Cap. 5,000 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEM Viscosity 48 Drill Collar Length 0 ft. I.D. 2 1/4 in.
Weight 9.3 Water Loss 7.2 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
Chlorides 3,800 P.P.M. Drill Pipe Length 4028 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number NA Test Tool Length 25 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NO Reversed Out NO Anchor Length 49 ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. (32" DP) Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: WSB, INC. TO 2" (NO BB)
2nd Open: 2 1/2" BLOW RIGHT AWAY, INCREASING TO 6" (NO BB)

Recovered 25 ft. of GM ~100% MUD W/ SOME GASSY BUBBLES
Recovered 25 ft. of TOTAL FLUID
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____

Remarks:	Price Job
	Other Charges
	Insurance
	Total

TOOL SAMPLE: ~1% GAS, ~99% MUD W/ A THIN SCUM OF OIL, SLIGHT ODOR

Time Set Packer(s) 7:45 P.M. A.M. P.M. Time Started Off Bottom 11:45 P.M. A.M. P.M. Maximum Temperature 108°F
Initial Hydrostatic Pressure..... (A) 1963 P.S.I.
Initial Flow Period..... Minutes 30 (B) 13 P.S.I. to (C) 17 P.S.I.
Initial Closed In Period..... Minutes 75 (D) 146 P.S.I.
Final Flow Period..... Minutes 45 (E) 13 P.S.I. to (F) 19 P.S.I.
Final Closed In Period..... Minutes 90 (G) 133 P.S.I.
Final Hydrostatic Pressure..... (H) 1954 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.



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: STNLY3DST2

TIME ON: 1020
TIME OFF: 1825

Company TRANS PACIFIC OIL CORPORATION Lease & Well No. STANLEY #3
Contractor DUKE DRILLING CO.,INC. RIG 10 Charge to TRANS PACIFIC OIL CORPORATION
Elevation 2280 GL Formation MISSISSIPPI Effective Pay _____ Ft. Ticket No. M614
Date 2/10/2014 Sec. 27 Twp. _____ 18 S Range _____ 24 W County NESS State KANSAS
Test Approved By ALEX CHAPIN Diamond Representative MIKE COCHRAN

Formation Test No. 2 Interval Tested from 4251 ft. to 4317 ft. Total Depth 4317 ft.
Packer Depth 4246 ft. Size 6 3/4 in. Packer depth NA ft. Size 6 3/4 in.
Packer Depth 4251 ft. Size 6 3/4 in. Packer depth NA ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4240 ft. Recorder Number 0063 Cap. 6,000 P.S.I.
Bottom Recorder Depth (Outside) 4314 ft. Recorder Number 6884 Cap. 5,000 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEM Viscosity 45 Drill Collar Length 0 ft. I.D. 2 1/4 in.
Weight 9.4 Water Loss 7.2 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
Chlorides 3,500 P.P.M. Drill Pipe Length 4226 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number NA Test Tool Length 25 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NO Reversed Out NO Anchor Length 66 ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. (32" DP) Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: A SURGE OF BUBBLES ON TOOL OPEN THEN A VW INTERMITTENT SB (NO BB)
2nd Open: NO BLOW (NO BB)

Recovered <u>5</u> ft. of <u>DM 100% MUD</u>	Price Job Other Charges Insurance Total
Recovered <u>5</u> ft. of <u>TOTAL FLUID</u>	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	
TOOL SAMPLE: <u>~100% MUD W/ A THIN SCUM OF OIL</u>	

Time Set Packer(s) 1:00 P.M. ^{A.M.} P.M. Time Started Off Bottom 4:00 P.M. ^{A.M.} P.M. Maximum Temperature 113°F

Initial Hydrostatic Pressure..... (A) 2068 P.S.I.
Initial Flow Period..... Minutes 30 (B) 10 P.S.I. to (C) 11 P.S.I.
Initial Closed In Period..... Minutes 75 (D) 86 P.S.I.
Final Flow Period..... Minutes 15 (E) 11 P.S.I. to (F) 12 P.S.I.
Final Closed In Period..... Minutes 60 (G) 38 P.S.I.
Final Hydrostatic Pressure..... (H) 2063 P.S.I.

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DIAMOND TESTING

Pressure Survey Report

General Information

Company Name	TRANS PACIFIC OIL CORP.	Job Number	M614
Well Name	STANLEY #3	Representative	MIKE COCHRAN
Unique Well ID	DST#2 4251-4317 MISSISSIPPI	Well Operator	TRANS PACIFIC OIL CORP.
Surface Location	SEC.27-18S-24W NESS CO.KS.	Report Date	2014/02/10
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	ALEX CHAPIN
		Test Unit	NO. 3

Test Information

Test Type	CONVENTIONAL		
Formation	DST#2 4251-4317 MISSISSIPPI		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2014/02/10	Start Test Time	10:20:00
Final Test Date	2014/02/10	Final Test Time	18:25:00
		Well Fluid Type	01 Oil
Gauge Name	0063		
Gauge Serial Number			

Test Results

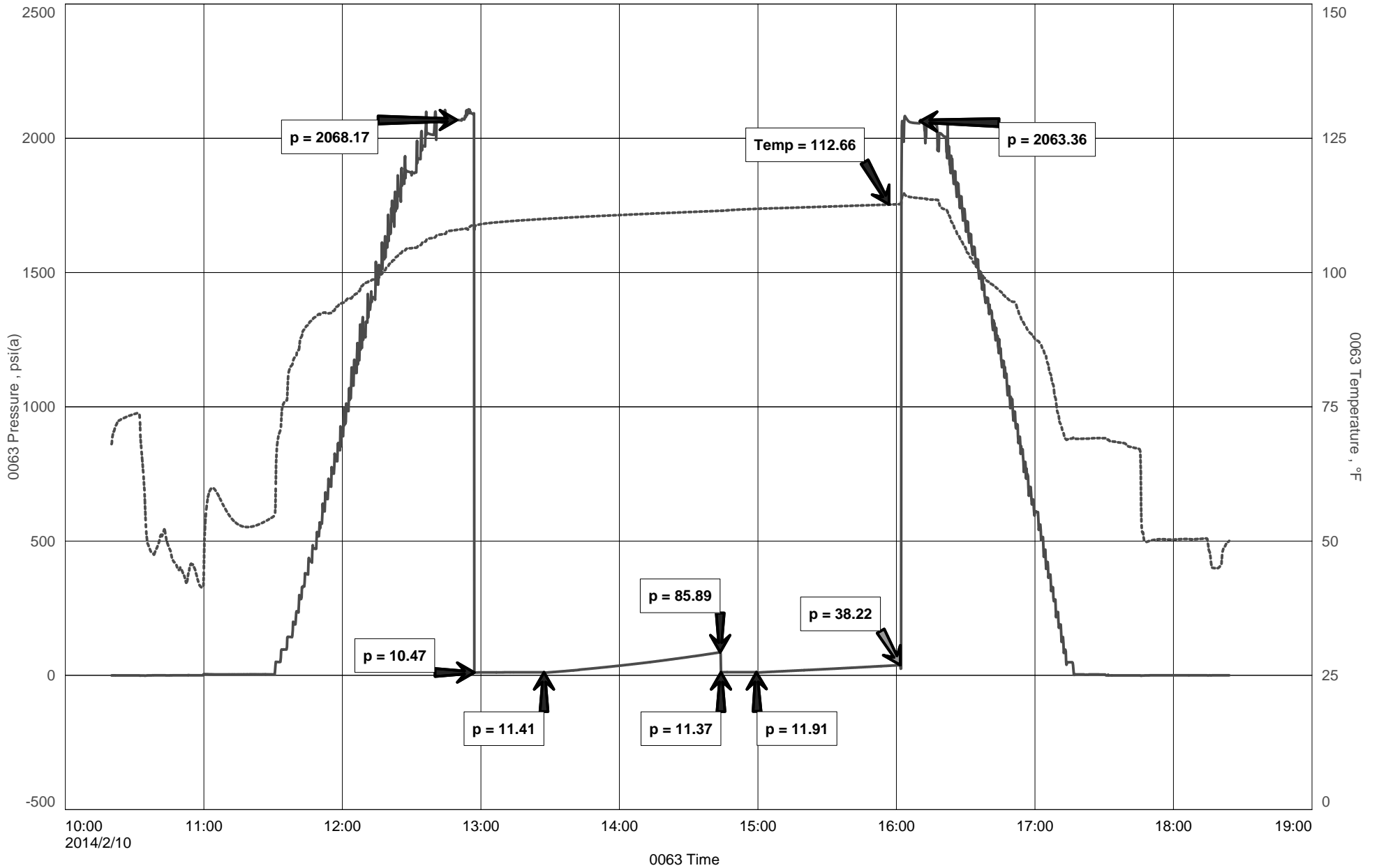
Remarks RECOVERED:
5' DM 100% MUD
5' TOTAL FLUID

TOOL SAMPLE: ~100% MUD W/ A THIN SCUM OF OIL

TRANS PACIFIC OIL CORP.
DST#2 4251-4317 MISSISSIPPI
Start Test Date: 2014/02/10
Final Test Date: 2014/02/10

STANLEY #3
Formation: DST#2 4251-4317 MISSISSIPPI
Pool: WILDCAT
Job Number: M614

STANLEY #3





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: STNLY3DST3

TIME ON: 0120
TIME OFF: 1150

Company TRANS PACIFIC OIL CORPORATION Lease & Well No. STANLEY #3
Contractor DUKE DRILLING CO.,INC. RIG 10 Charge to TRANS PACIFIC OIL CORPORATION
Elevation 2280 GL Formation MISSISSIPPI Effective Pay _____ Ft. Ticket No. M615
Date 2/11/2014 Sec. 27 Twp. 18 S Range 24 W County NESS State KANSAS
Test Approved By ALEX CHAPIN Diamond Representative MIKE COCHRAN

Formation Test No. 3 Interval Tested from 4246 ft. to 4324 ft. Total Depth 4324 ft.
Packer Depth 4241 ft. Size 6 3/4 in. Packer depth NA ft. Size 6 3/4 in.
Packer Depth 4246 ft. Size 6 3/4 in. Packer depth NA ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4235 ft. Recorder Number 0063 Cap. 6,000 P.S.I.
Bottom Recorder Depth (Outside) 4321 ft. Recorder Number 6884 Cap. 5,000 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEM Viscosity 48 Drill Collar Length 0 ft. I.D. 2 1/4 in.
Weight 9.4 Water Loss 7.6 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
Chlorides 3,800 P.P.M. Drill Pipe Length 4221 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number NA Test Tool Length 25 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NO Reversed Out NO Anchor Length 78 ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. (63'DP) Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: WSB, INC. TO 2" (NO BB)
2nd Open: WSB, INC. TO 1 1/2" (NO BB)

Recovered <1 ft. of GOCM 2% GAS,10% OIL, 88% MUD
Recovered 24 ft. of DM 100% MUD
Recovered ~25 ft. of TOTAL FLUID

Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Recovered _____ ft. of _____	Insurance
Remarks: _____	
TOOL SAMPLE: <u>4% OIL, 96% MUD W/ SOME GASSY BUBBLES, SLIGHT ODOR</u>	Total

Time Set Packer(s) 4:45 A.M. ^{A.M.}/_{P.M.} Time Started Off Bottom 9:00A.M. ^{A.M.}/_{P.M.} Maximum Temperature 111°F

Initial Hydrostatic Pressure..... (A) 2037 P.S.I.
Initial Flow Period..... Minutes 30 (B) 12 P.S.I. to (C) 15 P.S.I.
Initial Closed In Period..... Minutes 75 (D) 855 P.S.I.
Final Flow Period..... Minutes 60 (E) 15 P.S.I. to (F) 19 P.S.I.
Final Closed In Period..... Minutes 90 (G) 728 P.S.I.
Final Hydrostatic Pressure..... (H) 2034 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.

DIAMOND TESTING

Pressure Survey Report

General Information

Company Name	TRANS PACIFIC OIL CORP.	Job Number	M615
Well Name	STANLEY #3	Representative	MIKE COCHRAN
Unique Well ID	DST#3 4246-4324 MISSISSIPPI	Well Operator	TRANS PACIFIC OIL CORP.
Surface Location	SEC.27-18S-24W NESS CO.KS.	Report Date	2014/02/11
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	ALEX CHAPIN
		Test Unit	NO. 3

Test Information

Test Type	CONVENTIONAL		
Formation	DST#3 4246-4324 MISSISSIPPI		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2014/02/11	Start Test Time	01:20:00
Final Test Date	2014/02/11	Final Test Time	11:50:00
		Well Fluid Type	01 Oil
Gauge Name	0063		
Gauge Serial Number			

Test Results

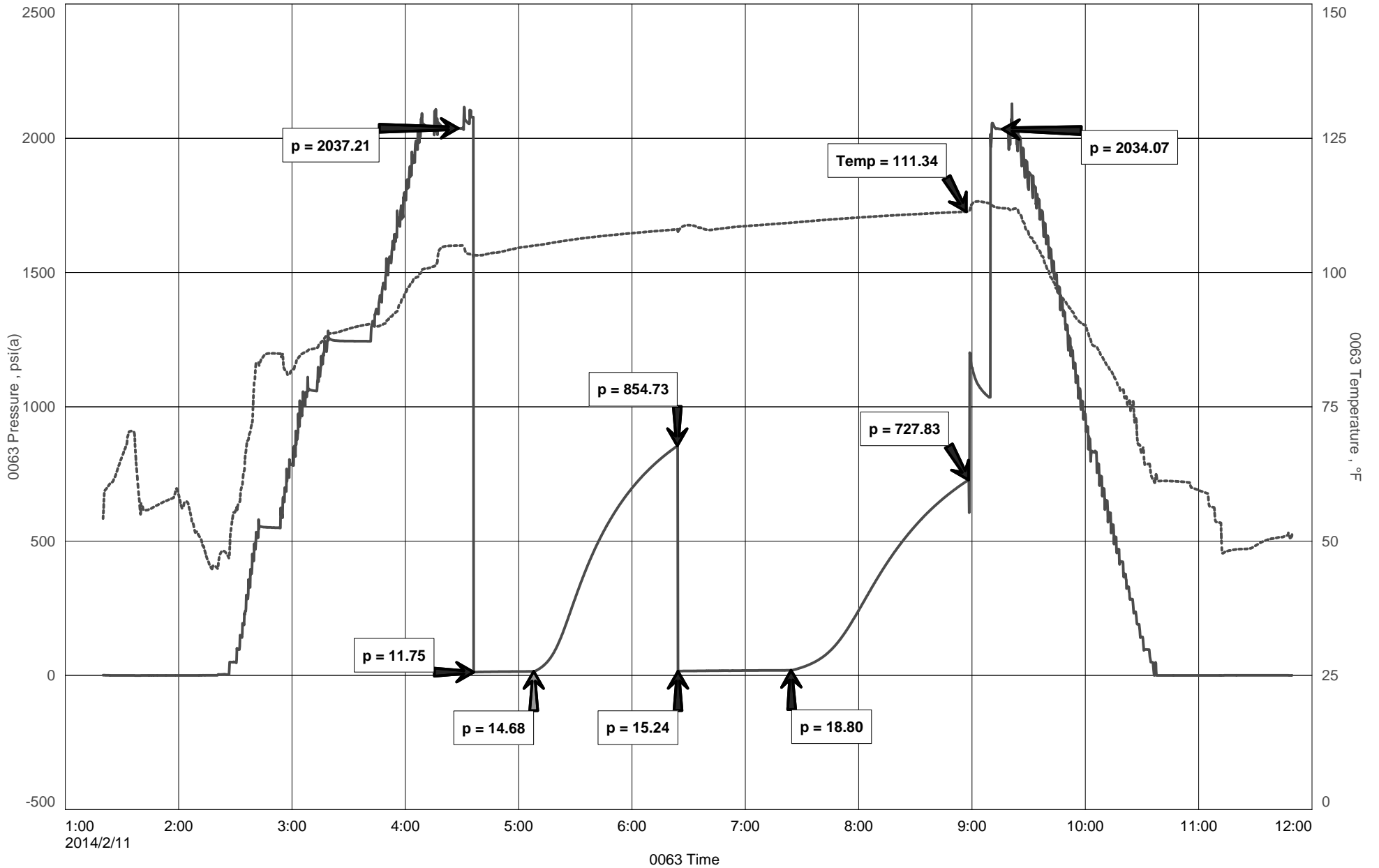
Remarks RECOVERED:
 <1' GOCM 2% GAS, 10% OIL, 88% MUD
 24' DM 100% MUD
 ~25' TOTAL FLUID

TOOL SAMPLE: 4% OIL, 96% MUD W/ SOME GASSY BUBBLES, SLIGHT ODOR

TRANS PACIFIC OIL CORP.
DST#3 4246-4324 MISSISSIPPI
Start Test Date: 2014/02/11
Final Test Date: 2014/02/11

STANLEY #3
Formation: DST#3 4246-4324 MISSISSIPPI
Pool: WILDCAT
Job Number: M615

STANLEY #3





Stanley 3
Drilling Report

API: 15-135-25730

STR: 28-18S-24W

County: Ness

Log Tops:

Anhydrite	1562' (+729) -12'
B/Anhydrite	1598' (+693) -10'
Topeka	3360' (-1069) -12'
Heebner	3662' (-1371) -11'
Lansing	3703' (-1412) -11'
BKC	4002' (-1711) -10'
Marmaton	4062' (-1771) -15'
Ft. Scott	4206' (-1915) -12'
Mississippi Dol.	4310' (-2019) -2'
RTD	4400' (-2109)

ALLIED OIL & GAS SERVICES, LLC 055029

Federal Tax I.D.# 20-5975804

REMITTO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell, Ks

DATE <u>2.1.14</u>	SEC <u>27</u>	TWP. <u>18</u>	RANGE <u>24</u>	CALLED OUT	ON LOCATION	JOB START <u>7:00 pm</u>	JOB FINISH <u>7:30 pm</u>
LEASE <u>Stanley</u>	WELL # <u>23</u>	LOCATION <u>Ness Cr. 4y Ks</u>	COUNTY <u>Ness</u>			STATE <u>Ks</u>	
OLD OR NEW (Circle one) <u>NEW</u>		<u>2 w 4 n east into</u>					

CONTRACTOR Duke #10

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D.

CASING SIZE 8 3/8 DEPTH 241'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 14.39 gal/100

OWNER

CEMENT AMOUNT ORDERED 175 sk Com

2 1/2 gal + 37.00

COMMON	<u>175 sk</u>	@	<u>17.90</u>	<u>\$3,132.50</u>
POZMIX		@		
GEL	<u>3.3 sk</u>	@	<u>23.40</u>	<u>\$77.22</u>
CHLORIDE	<u>10 sk</u>	@	<u>64.00</u>	<u>\$640.00</u>
ASC		@		

THANDLING 410.5 @ 2.60 \$1072.50

MILEAGE 175 @ 2.48 \$434.00

TOTAL \$5,356.22

EQUIPMENT

PUMP TRUCK CEMENTER Long P.

417 HELPER Deany S

BULK TRUCK

473 DRIVER Josse C.

BULK TRUCK

DRIVER

REMARKS:

See Cementing Job log.

Permit to Surface

CHARGE TO: Trans Pacific

STREET

CITY STATE ZIP

SERVICE

DEPTH OF JOB 241'

PUMP TRUCK CHARGE \$1,512.25

EXTRA FOOTAGE @

MILEAGE Ness 50m @ 7.7 \$385.00

MANIFOLD Ness 50m @ 4.4 \$220.00

TOTAL \$2,117.25

PLUG & FLOAT EQUIPMENT

[Signature] @

@

@

@

@

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.

PRINTED NAME Neeraj Joshi

SIGNATURE [Signature]

TOTAL

SALES TAX (If Any)

TOTAL CHARGES \$7,473.47

DISCOUNT \$6,868.36 IF PAID IN 30 DAYS

Net 5605.11

RECEIVED

FEB 17 2014

BY: _____

ALLIED OIL & GAS SERVICES, LLC 054981

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell, KS

DATE <u>2-12-14</u>	SEC. <u>27</u>	TWP. <u>18</u>	RANGE <u>24</u>	CALLED OUT	ON LOCATION	JOB START <u>6:00pm</u>	JOB FINISH <u>6:30pm</u>
LEASE <u>Stanley</u>	WELL # <u>3</u>	LOCATION <u>Ness City KS 4W NE in to</u>			COUNTY <u>Ness</u>	STATE <u>KS</u>	
OLD OR (NEW) (Circle one)							

CONTRACTOR Duke #10

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 4400

CASING SIZE DEPTH

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 16.6 DEPTH 1600

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER

CEMENT

AMOUNT ORDERED 250 6 3/4 4 2/3 2 1/4 4/6

EQUIPMENT

PUMP TRUCK CEMENTER Robert Y

409 HELPER Nathan D

BULK TRUCK

473 DRIVER Jesse C

BULK TRUCK

DRIVER

COMMON	@		
POZMIX	@		
GEL <u>8.60#</u>	@	<u>.24</u>	<u>206.40</u>
CHLORIDE	@		
ASC	@		
<u>Com/Pac mix 2.50</u>	@	<u>14.93</u>	<u>3732.50</u>
<u>Slit Seal 6.3#</u>	@	<u>2.97</u>	<u>187.11</u>
	@		
	@		
	@		
	@		
HANDLING <u>2.66</u> <u>573</u>	@	<u>2.48</u>	<u>659.68</u>
MILEAGE <u>560.575</u> <u>7/10</u>	@	<u>2.60</u>	<u>1457.50</u>
		TOTAL	<u>6243.19</u>

REMARKS:

see log

SERVICE

DEPTH OF JOB		<u>1600</u>	
PUMP TRUCK CHARGE		<u>2299.84</u>	
EXTRA FOOTAGE	@		
MILEAGE <u>50 HVM</u>	@	<u>7.70</u>	<u>385.00</u>
MANIFOLD	@		
<u>50 HVM</u>	@	<u>4.40</u>	<u>220.00</u>
	@		
		TOTAL	<u>2854.84</u>

CHARGE TO: Trans Pac

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>8 5/8 Wooden plug</u>	@	<u>110.00</u>	<u>110.00</u>
	@		
	@		
	@		
	@		
		TOTAL	<u>110.00</u>

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.

PRINTED NAME _____

SIGNATURE Alejandro Bidonci

SALES TAX (if Any) _____

TOTAL CHARGES 9208.03

DISCOUNT 1919.66 2246.66 IF PAID IN 30 DAYS

net 7388.42 # 696137



BY: _____

