

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

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>	☐ Yes	☐ No	☐ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes	☐ No	Name	Top	Datum
Cores Taken	☐ Yes	☐ No			
Electric Log Run	☐ Yes	☐ No			
Geologist Report / Mud Logs	☐ Yes	☐ No			
List All E. Logs Run:					

CASING RECORD ☐ New ☐ 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
☐ Perforate				
☐ Protect Casing				
☐ Plug Back TD				
☐ Plug Off Zone				

1. Did you perform a hydraulic fracturing treatment on this well? ☐ Yes ☐ No (If No, skip questions 2 and 3)
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? ☐ Yes ☐ No (If No, skip question 3)
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)

Date of first Production/Injection or Resumed Production/Injection:		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:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:	
☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	Top	Bottom

Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record (Amount and Kind of Material Used)

TUBING RECORD:	Size:	Set At:	Packer At:	
----------------	-------	---------	------------	--

Form	ACO1 - Well Completion
Operator	Trans Pacific Oil Corporation
Well Name	MYERS C 1
Doc ID	1859846

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	12.25	8.625	24	669	Common	375	2% gel 3% cc
Production	7.875	4.5	9.5	3973	50/50 Poz	275	2% gel

FEB 24 2006

CONSERVATION DIVISION
WICHITA, KS

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Check Applicable Boxes:

- ☐ Oil Lease: No. of Oil Wells _____ **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☒ Saltwater Disposal Well - Permit No.: D-21761
- Spot Location: 2310 feet from ☐ N / ☒ S Line
- 4290 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: _____

**** Side Two Must Be Completed.**

Effective Date of Transfer: MARCH 1, 2006

KS Dept of Revenue Lease No.: NA

Lease Name: Myers C SWD

NE NW SW Sec. 13 Twp. 16 R. 20 ☐ E ☒ W

Legal Description of Lease: _____

County: RUSH

Production Zone(s): NA

Injection Zone(s): ARBUCKLE (3955-3965 OH)

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

_____ feet from ☐ N / ☐ S Line of Section

_____ feet from ☐ E / ☐ W Line of Section

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling **OR**

Past Operator's License No. 5042 ☒

Contact Person: JON M. CALLEN

Past Operator's Name & Address: EDMISTON OIL COMPANY, INC.
125 N MARKET SUITE 1130 WICHITA, KANSAS 67202

Phone: 316-265-5241

Title: PRESIDENT

Date: 2/23/2006

Signature: *Jon M. Callen*

New Operator's License No. 9408 ☒

Contact Person: ALAN BANTA

New Operator's Name & Address: TRANSPACIFIC OIL CORP, INC.
100 S MAIN ST. SUITE 200, WICHITA, KANSAS 67202

Phone: 316-262-3596

Oil / Gas Purchaser: NA

Title: EXECUTIVE VICE PRESIDENT

Date: 2/23/2006

Signature: *Alan Banta*

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

Trans Pacific Oil Corp is acknowledged as the
new operator and may continue to inject fluids as authorized by
Permit No.: D-21761. Recommended action: _____

Date: 5-2-06 *Carolina Montgomery*
Authorized Signature

_____ is acknowledged as the
new operator of the above named lease containing the surface pit
permitted by No.: _____

Date: _____
Authorized Signature

DISTRICT _____	EPR 4-57-06	PRODUCTION _____	UIC 5-2-06
Mail to: Past Operator 5-2-06	New Operator 5-2-06	District 1 5-2-06	

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

030106 Myers C SWD.pdf

* Lease Name: Myers C SWD * Location: NE NW SW SEC. 13 T16S R20W

* Location: NE NW SW SEC. 13 T16S R20W

A separate sheet may be attached if necessary

* When transferring a unit which consists of more than one lease please file a separate side two for each lease. If a lease covers more than one section please indicate which section each well is located.