

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

January 2018

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

Gas DH EOR

OG GSW

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 EOR Conv. to SWD
 Plug Back Liner Conv. to GSW Conv. to Producer

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

EOR Permit #: _____

GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No.: _____

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 Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT I II III Approved by: _____ Date: _____

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 Geologist Report / Mud Logs <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				

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: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
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> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Trans Pacific Oil Corporation
Well Name	LOVE 4-4
Doc ID	1717461

All Electric Logs Run

Dual Induction
Micro Log
Compensated Density Neuron Log
Sonic Log
Cement Bond Log

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 8914
Name: H & C Oil Operating, Inc.
Address: P.O. Box 86
City/State/Zip: Plainville, KS 67663
Purchaser: Coffeyville Resources
Operator Contact Person: Charles R. Ramsay
Phone: (785) 434-7434
Contractor: Name: American Eagle Drilling
License: 33493
Wellsite Geologist: Marc Downing

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

10-1-07	10-6-07	10-26-07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 163-23649-00-00
County: Rooks
NE NE NE Sec. 4 Twp. 9 S. R. 18 East West
500 feet from S / (N) (circle one) Line of Section
330' feet from (E) / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: Love Well #: 4-4
Field Name: Yohe
Producing Formation: Lansing Kansas City
Elevation: Ground: 2015 Kelly Bushing: 2022
Total Depth: 3520 Plug Back Total Depth: 3430
Amount of Surface Pipe Set and Cemented at 220 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1354 Feet
If Alternate II completion, cement circulated from 1354
feet depth to Surface w/ 225 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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

Alt 2 - Dlg - 2/12/09

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Charles R Ramsay
Title: President Date: 11/21/07

Subscribed and sworn to before me this 21st day of November
2007.

Notary Public: Irene Fellhoelter

Date Commission Expires: April 4, 2011

NOTARY PUBLIC - State of Kansas
IRENE FELLHOELTER
My Appt. Expires 4/4/11

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
NOV 26 2007

CONSERVATION DIVISION
WICHITA, KS

Operator Name: H & C Oil Operating, Inc. Lease Name: Love Well #: 4-4
 Sec. 4 Twp. 9 S. R. 18 East West County: Rooks

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction, Microlog, Compensated Density Neutron Log, Sonic Log, Cement Bond Log	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1380'</td> <td>+642</td> </tr> <tr> <td>Anhydrite Base</td> <td>1422</td> <td>+600</td> </tr> <tr> <td>Topeka</td> <td>2942</td> <td>-920</td> </tr> <tr> <td>Heebner</td> <td>3154</td> <td>-1132</td> </tr> <tr> <td>Toronto</td> <td>3176</td> <td>-1154</td> </tr> <tr> <td>Lansing Kansas City</td> <td>3195</td> <td>-1173</td> </tr> <tr> <td>Arbuckle</td> <td>3449</td> <td>-1428</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Anhydrite	1380'	+642	Anhydrite Base	1422	+600	Topeka	2942	-920	Heebner	3154	-1132	Toronto	3176	-1154	Lansing Kansas City	3195	-1173	Arbuckle	3449	-1428
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample																										
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Toronto	3176	-1154																										
Lansing Kansas City	3195	-1173																										
Arbuckle	3449	-1428																										

CASING RECORD <input checked="" 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
Surface	12 1/4"	8 5/8"	20#	220'	Common	160	2% Gel, 3% C.C.
Production	7 7/8"	5 1/2"	14#	3515	Common	180	10% salt

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	1356' - Surface	60/40 Posmix	225	6% gel, 1/4# floseal per sack

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
4 SPF	3450-3454	300 Gallon 15% MCA	3450
4 SPF	3364-3373	1000 Gallon 15% MCA	3364
	Set CIBP @ 3430'		3430
4 SPF	3348-3353	500 Gallon 15% MCA	3353
4 SPF	3231-3239	500 Gallon 15% MCA	3231

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8"	3423			
Date of First, Resumerd Production, SWD or Enhr. 10/28/07			Producing Method			
			<input type="checkbox"/> Flowing	<input checked="" type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift	<input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	
	12	0	28		36	

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

RECEIVED
KANSAS CORPORATION COMMISSION

NOV 26 2007

 CONSERVATION DIVISION
 WICHITA, KS

ALLIED CEMENTING CO., INC.

25752

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

SERVICE POINT:

DATE <u>10-2-07</u>	SEC. <u>4</u>	TWP. <u>9</u>	RANGE <u>18</u>	CALLED OUT	ON LOCATION <u>mid-nite</u>	JOB START <u>10-3-07</u> <u>5:00</u>	JOB FINISH <u>6:40 AM</u>
LEASE <u>Love</u>	WELL # <u>4-4</u>	LOCATION <u>Phainville SW 1/4</u>			COUNTY <u>ROOKS</u>	STATE <u>KANSAS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>1/4 S 1/4 W INTO</u>				

CONTRACTOR AMERICAN Eagle Rig#

OWNER

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4 T.D. 224

CEMENT

CASING SIZE 8 5/8 DEPTH 224

AMOUNT ORDERED 160 SK Comm.

TUBING SIZE DEPTH

2 7/8 Gel

DRILL PIPE DEPTH

3 7/8 CC

TOOL DEPTH

PRES. MAX MINIMUM

COMMON 160 @ 11.10 1776.00

MEAS. LINE SHOE JOINT

POZMIX @

CEMENT LEFT IN CSG. 15'

GEL 3 @ 16.65 49.95

PERFS.

CHLORIDE 5 @ 46.60 233.00

DISPLACEMENT 13 / 88L

ASC @

EQUIPMENT

PUMP TRUCK CEMENTER Glenn

398 HELPER John

BULK TRUCK

378 DRIVER Chuck

BULK TRUCK

DRIVER

HANDLING 168 TOTAL SK @ 1.90 319.20

MILEAGE 50 Ton Mile @ 1.52 756.00

TOTAL 3134.15

REMARKS:

Cement Circulated

THANKS

CHARGE TO: H & C Oil Company

STREET

CITY STATE ZIP

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE 215.00

EXTRA FOOTAGE @

MILEAGE 50 @ 6.00 300.00

MANIFOLD @

@

@

TOTAL 1115.00

PLUG & FLOAT EQUIPMENT

2 5/8 Sued @ 30.00

@

@

@

@

TOTAL 60.00

To Allied Cementing Co., Inc.

You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX

TOTAL CHARGE

DISCOUNT IF PAID IN 30 DAYS

SIGNATURE Rob Wagon

PRINTED NAME

RECEIVED
KANSAS CORPORATION COMMISSION

NOV 26 2007

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., INC.

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

SERVICE POINT: 28021
Russell

DATE <i>10-7-07</i>	SEC. <i>4</i>	TWP. <i>9S</i>	RANGE <i>18W</i>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <i>8:00 a.m.</i>
LEASE <i>Love</i>	WELL# <i>4-4</i>	LOCATION <i>Plainville 1W 4 3/4 N</i>	COUNTY <i>Rooks</i>	STATE <i>Ks.</i>			
<input checked="" type="checkbox"/> OLD OR <input type="checkbox"/> NEW (Circle one)		<i>Winto</i>					

CONTRACTOR *American Eagle Drilling Rig #3* OWNER

TYPE OF JOB *Production String*

HOLE SIZE *7 7/8* T.D. *3520*

CASING SIZE *5 1/2 14"* DEPTH *3515.35*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

FOOT *P.C.* DEPTH *1365*

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT *25.96*

CEMENT LEFT IN CSG. *25.96*

PERFS.

DISPLACEMENT *85.14 66*

CEMENT

AMOUNT ORDERED *180 Can 10% Salt*

1/4 # Flo Seal

500 Gal WFR-2

EQUIPMENT

PUMP TRUCK CEMENTER *Shane*

866 HELPER *John Roberts*

BULK TRUCK DRIVER *Chris Beck*

345

BULK TRUCK DRIVER

COMMON	<i>180</i>	@	<i>110</i>	<i>1998.00</i>
POZMIX		@		
GEL		@		
CHLORIDE		@		
ASC		@		
FLOSEAL	<i>45#</i>	@	<i>2.00</i>	<i>90.00</i>
SALT	<i>17</i>	@	<i>19.20</i>	<i>326.40</i>
WFR-2	<i>500gals</i>	@	<i>1.00</i>	<i>500.00</i>
HANDLING	<i>197</i>	@	<i>1.90</i>	<i>374.30</i>
MILEAGE	<i>94/SK/Mile</i>			<i>886.50</i>
TOTAL				<i>4175.20</i>

REMARKS:

Rat Hole 15 sks

Insert @ 3489.39

Landed Plug @ 1200 psi

Float Held !

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE *1610.00*

EXTRA FOOTAGE @

MILEAGE *50* @ *6.00* *300.00*

MANIFOLD @

TOTAL *1910.00*

CHARGE TO: *H + C*

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

<i>Blue Post Cillar</i>		<i>1750.00</i>
<i>Guide Shoe</i>	@	<i>170.00</i>
<i>AFU-Insert</i>	@	<i>260.00</i>
<i>2-Baskets</i>	@	<i>165.00</i>
<i>5-Centralizers</i>	@	<i>50.00</i>
<i>Rubber Plug</i>	@	<i>65.00</i>
TOTAL		<i>2825.00</i>

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

Signature: *Charles Ramsay*

TAX

TOTAL CHARGE

DISCOUNT IF PAID IN 30 DAYS

PRINTED NAME: *CHARLES RAMSAY*

RECEIVED
KANSAS CORPORATION COMMISSION
NOV 26 2007
CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., INC.

25407

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

SERVICE POINT:

Russell

DATE <u>10-25-07</u>	SEC. <u>12</u>	TWP. <u>18</u>	RANGE <u>17</u>	CALLED OUT	ON LOCATION	JOB START <u>6:00 PM</u>	JOB FINISH <u>2:00 PM</u>
LEASE <u>Love</u>	WELL # <u>4</u>	LOCATION <u>Plainville SN 1 1/2 W SIMR</u>			COUNTY <u>ROCKS</u>	STATE <u>KANSAS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR CHITOS Well Service OWNER _____
 TYPE OF JOB OPEN PORT Collar Circ. Cement
 HOLE SIZE _____ T.D. _____
 CASING SIZE 5 1/2" DEPTH _____
 TUBING SIZE 2" DEPTH _____
 DRILL PIPE Dan's Packer DEPTH (Jessy D.)
 TOOL PORT Collar @ DEPTH 1356'
 PRES. MAX 1,000 # MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 4 1/2 BBL
 EQUIPMENT _____

CEMENT AMOUNT ORDERED 325 SK 60 406 2 Gel
4 # F10 Seal
2 1/2 Sand Per SK Used 225 mbl

COMMON	<u>135</u>	@	<u>11.10</u>	<u>1498.50</u>
POZMIX	<u>90</u>	@	<u>6.20</u>	<u>558.00</u>
GEL	<u>11</u>	@	<u>16.60</u>	<u>182.60</u>
CHLORIDE		@		
ASC		@		
Flo Seal	<u>56</u>	@	<u>2.00</u>	<u>112.00</u>
Sand	<u>2</u>	@	<u>10.50</u>	<u>21.00</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>340</u>	@	<u>1.90</u>	<u>646.00</u>
MILEAGE	<u>52 Ton Mile @</u>			<u>1591.20</u>
TOTAL				<u>4609.85</u>

PUMP TRUCK CEMENTER Glenn
 # 398 HELPER Gary
 BULK TRUCK
 # 362 DRIVER Doug
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

RBP @ 2550' - TEST TO 1,000 # (HELD)
Spot 2 SK SAND @ 1957. Came
up + FOUND P.C. @ 1356; OPENED
+ Pumped 80 BBL DRUG. med. HAD
Very Good CIRCULATION AROUND
ANNULAS. - mixed 225 sk Cement
+ Cement CIRCULATED TO SURFACE,
Displaced 4 1/2 BBL. Closed PC, TEST TO
1,000 # - HELD. RAN SJTS, & WASHED CLEAN.

CHARGE TO: H & C Oil Company
 STREET _____
 CITY _____ STATE _____ ZIP _____

Cement Did Circulate!
KCC. (STATE REP. ON LOCATION)
PAT @.

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Charles Ramsey

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____ 955.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 52 @ 6.00 312.00
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL 1267.00

PLUG & FLOAT EQUIPMENT

RECEIVED
 KANSAS CORPORATION COMMISSION
 NOV 26 2007
 CONSERVATION DIVISION
 WICHITA, KS
 TOTAL _____

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

STATE OF KANSAS

Rooks

COUNTY

Affidavit of SS. Publication

Frank Mercer, being first duly sworn, deposes and says: That he is publisher of the *Plainville Times*, a weekly newspaper printed in the State of Kansas, and published in and of general circulation in Rooks County, Kansas, with a general paid circulation on a weekly basis in Rooks County, Kansas, and that said newspaper is not a trade, religious or fraternal publication.

Said newspaper is a weekly published one day a week and has been published continuously and uninterruptedly in said county and state for a period of more than five years prior to the first publication of said notice; and has been admitted at the post office of Plainville, Kansas, in said county as second class matter.

That the attached notice is a true copy thereof and was published in the regular and entire issue of said newspaper for one consecutive Week, the first publication thereof being made as aforesaid on the 8th day of June, 20 23, with subsequent publications being made on the following dates:

_____, 20____, 20____
_____, 20____, 20____
_____, 20____, 20____

Signed: [Signature]

Subscribed and sworn to before me this 8th day of June, 20 23.



[Signature]
Notary Public's Signature

Publication Fee \$ 48.38
Affidavit, Notary's Fee \$ 1.00
Additional copies @ \$ —
Total Publication Fee \$ 49.38

(Published in the June 8, 2023 issue of the Plainville Times) 1t

BEFORE THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS
NOTICE OF FILING APPLICATION

RE: Trans Pacific Oil Corporation – Application for an order to permit injection of salt water into the Love 4-4 well located in Rooks County, Kansas.

TO: All Oil and Gas Producers, Unleased Mineral Interest Owners, Landowners, and all Persons whosoever concerned.

You, and each of you, are hereby notified that Trans Pacific Oil Corporation has filed an application to commence the injection of salt water into the Lansing Kansas City zone at the Love 4-4, located in the NE/4, Section 4-9S-18W, Rooks County, Kansas, with a maximum operating pressure of 500# and a maximum injection rate of 1,000 barrels per day.

Any persons who object to or protest this application shall be required to file their objections or protests with the Conservation Division of the State Corporation Commission of the State of Kansas within thirty (30) days from the date of the publication. These protests shall be filed pursuant to Commission regulations and must state specific reasons why the grant of the application may cause waste, violate correlative rights or pollute the natural resources of the state of Kansas. If no protests are received, this application may be granted through a summary proceeding. If valid protests are received, this matter will be set for hearing.

All persons interested or concerned shall take notice of the foregoing and shall govern themselves accordingly.
Trans Pacific Oil Corporation
100 S. Main, Suite 200
Wichita, KS 67202
(316) 262-3596

No.

Plaintiff

Defendant

Filed 20

Clerk

Approved 20

Judge