

30178

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

COPY

APR 03 2003

063-21,552 0000

Operator: License # 9408

Name: Trans Pacific Oil Corp.

Address: 100 S. Main, Suite 200

City/State/Zip: Wichita, KS 67202

Purchaser: Cooperative Refining

Operator Contact Person: Alan D. Banta

Phone: (316) 262-3596

Contractor: Name: Shields Drilling

License: 5184

Wellsite Geologist: Kim Shoemaker

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. _____

10/4/00 10/17/00 11/17/00

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

From: Gove

County: SW NW NW Sec. 26 Twp. 15 S. R. 28 East West

2310 feet from S / (circle one) Line of Section

330 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE (NW) SW

Lease Name: Davis B Well #: 1-26

Field Name: wildcat

Producing Formation: Marmaton & Lansing

Elevation: Ground: 2454' Kelly Bushing: 2459'

Total Depth: 4330' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 213 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1935' Feet

If Alternate II completion, cement circulated from 1935'

feet depth to surface w/ 275 sx cmt.

Drilling Fluid Management Plan See 4-9-03

(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Daywatering 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.: _____

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KANSAS CORPORATION COMMISSION

JAN 08 2001

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: Bay Sharp

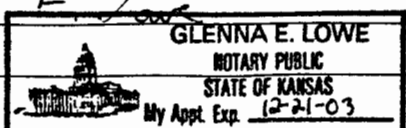
Title: Engineer Date: 1/5/01

Subscribed and sworn to before me this 5th day of January

2001

Notary Public: Glenna E. Lowe

Date Commission Expires: _____



KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

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Operator Name: Trans Pacific Oil Corp. Lease Name: Davis "B" Well #: 1-26
 Sec. 26 Twp. 15 S. R. 28 East West County: Gove

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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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	1902' (+ 558)	
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	B/Anhydrite	1938' (+ 522)	
List All E. Logs Run:		Heebner	3629' (-1469)	
Dual Induction		Lansing	3667' (-1207)	
Cement Bond		Kansas City	3740' (-1280)	
Density/Neutron		Stark	3916' (-1456)	
		Pleasanton	3990' (-1530)	
		Marmaton	4002' (-1542)	
		Labette	4160' (-1700)	
		Cherokee	4196' (-1736)	
		Mississippian	4256' (-1796)	

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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	# Sacs Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	23.5#	213'	60/40	160	3%CC, 2%gel
Production	8-1/4"	4-1/2"	10.5#	4327'	EA-2	225	

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				

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
2	Marmaton 4068'-4070'	Acidize w/250 gal.15% mud acid	
2	220' zone 3956'-3961'	Acidize w/500 gal.15% SGA	

TUBING RECORD	Size 2-3/8"	Set At 4072'	Packer At n/a	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. 11/18/00	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. 90	Gas Mcf	Water Bbls. 0	Gas-Oil Ratio	Gravity
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Disposition of Gas Vented Sold Used on Lease *(If vented, Sumit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____