

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL**

Form ACO-1  
October 2008  
Form Must Be Typed

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 9408  
 Name: Trans Pacific Oil Corporation  
 Address 1: 100 S. Main, Suite 200  
 Address 2: \_\_\_\_\_  
 City: Wichita State: KS Zip: 67202 + \_\_\_\_\_  
 Contact Person: Glenna Lowe  
 Phone: ( 316 ) 262-3596  
 CONTRACTOR: License # \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Wellsite Geologist: \_\_\_\_\_  
 Purchaser: N.C.R.A.  
 Designate Type of Completion:  
 \_\_\_\_\_ New Well  Re-Entry  Workover  
 Oil \_\_\_\_\_ SWD \_\_\_\_\_ SIOW  
 \_\_\_\_\_ Gas \_\_\_\_\_ ENHR \_\_\_\_\_ SIGW  
 \_\_\_\_\_ CM (Coal Bed Methane) \_\_\_\_\_ Temp. Abd.  
 \_\_\_\_\_ Dry \_\_\_\_\_ Other \_\_\_\_\_  
 (Core, WSW, Expl., Cathodic, etc.)  
 If Workover/Re-entry: Old Well Info as follows:  
 Operator: Trans Pacific Oil Corporation  
 Well Name: Allison A #8-13  
 Original Comp. Date: 4/30/09 Original Total Depth: 3510'  
 \_\_\_\_\_ Deepening  Re-perf. \_\_\_\_\_ Conv. to Enhr. \_\_\_\_\_ Conv. to SWD  
 \_\_\_\_\_ Plug Back: \_\_\_\_\_ Plug Back Total Depth  
 \_\_\_\_\_ Commingled \_\_\_\_\_ Docket No.: \_\_\_\_\_  
 \_\_\_\_\_ Dual Completion \_\_\_\_\_ Docket No.: \_\_\_\_\_  
 \_\_\_\_\_ Other (SWD or Enhr.?) \_\_\_\_\_ Docket No.: \_\_\_\_\_  
10/28/09 \_\_\_\_\_ 11/4/09  
 Spud Date or \_\_\_\_\_ Date Reached TD \_\_\_\_\_ Completion Date or  
 Recompletion Date \_\_\_\_\_ Recompletion Date \_\_\_\_\_

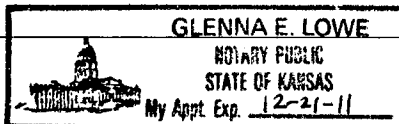
API No. 15 - 051-25852-000001  
 Spot Description: 565' FNL & 2820' FEL  
SE NE NE NW Sec. 13 Twp. 11 S. R. 19  East  West  
565' Feet from  North /  South Line of Section  
2820' Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
 County: Ellis  
 Lease Name: Allison "A" Well #: 8-13  
 Field Name: Solomon NE  
 Producing Formation: Kansas City  
 Elevation: Ground: 1962' Kelly Bushing: 1967'  
 Total Depth: 3510' Plug Back Total Depth: 3489'  
 Amount of Surface Pipe Set and Cemented at: 219' Feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set: 1278' Feet  
 If Alternate II completion, cement circulated from: 1278'  
 feet depth to: surface w/ 150 sx cm.

**Drilling Fluid Management Plan** OWWO - AH II NR  
 (Data must be collected from the Reserve Pit) 4-20-10  
 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.: \_\_\_\_\_

**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: Gay Sharp  
 Title: Vice President Date: 3/29/10  
 Subscribed and sworn to before me this 29<sup>th</sup> day of March,  
 20 10.  
 Notary Public: Glenna E. Lowe  
 Date Commission Expires: \_\_\_\_\_



**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
**RECEIVED**  
 KANSAS CORPORATION COMMISSION

MAR 30 2010

Operator Name: Trans Pacific Oil Corporation Lease Name: Allison "A" Well #: 8-13  
 Sec. 13 Twp. 11 S. R. 19  East  West County: Ellis

**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 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 <i>(Submit Copy)</i>  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum  (SEE ORIGINAL ACO-1 FOR PAGE TWO INFO) JUST ADDING NEW PERFS.
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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				

Adding  
→

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	3244' - 3248' (C zone)	500 gal 15% MCA	
		1000 gal. 15% NE	

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. <b>11/5/09</b>	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.	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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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