

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

SUPPLEMENTAL

WELL COMPLETION FORM

AMENDED

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33971
Name: TriPower Resources, LLC
Address 1: P.O. Box 849
Address 2: _____
City: Ardmore State: Ok Zip: 73402 +
Contact Person: W.B. Curry
Phone: (580) 226-6700

CONTRACTOR: License # 33217
Name: Three Rivers Exploration, LLC
Wellsite Geologist: Jim Woodson
Purchaser: Natl. Cooperative Ref. Assoc.

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW
 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: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

_____ 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.: _____

10-13-09 10-19-09 4-15-10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15. 15015238390000

Spot Description: _____

C NW NW SE Sec. 26 Twp. 24 S. R. 4 East West

2310 Feet from North / South Line of Section

2310 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Butler

Lease Name: Mingenback Well #: 5

Field Name: Plum Grove South

Producing Formation: Mississippi Chat

Elevation: Ground: 1434 Kelly Bushing: 1439

Total Depth: 2700 Plug Back Total Depth: 2698

Amount of Surface Pipe Set and Cemented at: 200 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 Alt I NR 5-11-10
(Date must be collected from the Reserve Pit)

Chloride content: 660 ppm Fluid volume: NA 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: W.B. Curry

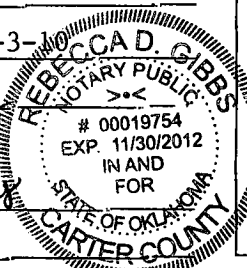
Title: Agent Date: 5-3-10

Subscribed and sworn to before me this 3rd day of May

20 10

Notary Public: Rebecca D. Gibbs

Date Commission Expires: _____



KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received RECEIVED
 UIC Distribution KANSAS CORPORATION COMMISSION
MAY 05 2010

Side Two

Operator Name: TriPower Resources, LLC Lease Name: Mingenback Well #: 5
 Sec. 26 Twp. 24 S. R. 4 East West County: Butler

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Brown Lime	1806	-567
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	1902	-463
List All E. Logs Run:		Kansas City	2180	-741
Dual Induction, Dual Compensated, Porosity, Sonic Cement Bond		Base Kansas City	2342	-902
		Marmaton	2417	-778
		Pawnee	2498	-1059
		Cherokee	2562	-1123
		Ardmore	2594	-1155
		Miss. Chat	2639	-1200

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
Surface	12-1/4	8-5/8"	23#	200'	Class A	130	3%cc-1/4#Flocele
Production	8-3/4"	5-1/2"	15.5#	2697'	Thick Set	175	2% cc-1 10#bis Meta, Silicate 5#Kulseal/sk

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
4	2640-2646	Acidized W/500 gals 10% MCA	

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 05 2010
CONSERVATION DIVISION
WICHITA, KS

TUBING RECORD:	Size: <u>2-3/8"</u>	Set At: <u>2672' -SN</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First Resumed Production, SWD or Enhr.	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
<u>4-15-10</u>				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio
	<u>1/2</u>	<u>--</u>	<u>50</u>	<u>--</u>

DISPOSITION OF GAS: No Gas	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACD-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Quality Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____ _____