

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31120
Name: Pelican Hill Oil & Gas, Inc.
Address 1: 1401 N. El Camino Real
Address 2: Ste. 207
City: San Clemente State: CA Zip: 92672 +
Contact Person: Allen J. Gross
Phone: (949) 632-5783
CONTRACTOR: License # 31120
Name: Pelican Hill Oil & Gas, Inc.
Wellsite Geologist: Marc Downing
Purchaser: _____

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: _____
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.: _____

9-16-09 9-24-09
Spud Date or Date Reached TD Completion Date or
Recompletion Date per geo report - KCC-big
Recompletion Date

API No. 15 - 195-22623-00-00
Spot Description: _____
_____ _SW_ _SE_ Sec. 26 Twp. 14 S. R. 21 East West
330 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: Trego
Lease Name: Groff Trust Well #: 1-26
Field Name: Unknown
Producing Formation: Kansas City
Elevation: Ground: 2,094' Kelly Bushing: 2,105'
Total Depth: 3,925' Plug Back Total Depth: 3,200'
Amount of Surface Pipe Set and Cemented at: 226' 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 AH II NR 5-7-10
(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.: _____

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: _____
Title: Operations Date: 4/22/10
Subscribed and sworn to before me this 22 day of April
20 10
Notary Public: Mary J. Pennington
Date Commission Expires: 11/19/2011



KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION
APR 26 2010
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Pelican Hill Oil & Gas, Inc. Lease Name: Groff Trust Well #: 1-26
 Sec. 26 Twp. 14 S. R. 21 East West County: Trego

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 checked="" type="checkbox"/> Yes <input 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, Dual Comp. Porosity, Microresistivity Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>LKC</td> <td>3432'</td> <td>-1323</td> </tr> <tr> <td>BKC</td> <td>3682'</td> <td>-1573</td> </tr> <tr> <td>Marmaton</td> <td>3767'</td> <td>-1658</td> </tr> <tr> <td>Cherokee Shale</td> <td>3812'</td> <td>-1704</td> </tr> <tr> <td>Sand</td> <td>3831'</td> <td>-1725</td> </tr> <tr> <td>Arbuckle</td> <td>3870</td> <td>-1763</td> </tr> </table>	Name	Top	Datum	LKC	3432'	-1323	BKC	3682'	-1573	Marmaton	3767'	-1658	Cherokee Shale	3812'	-1704	Sand	3831'	-1725	Arbuckle	3870	-1763
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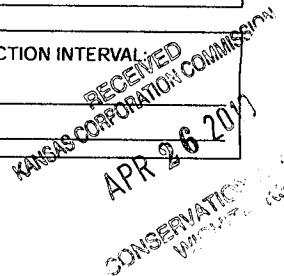
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	24	226'	Common	160	Chloride
Production	7 7/8"	4 1/2"	11.6	3920'	Sx Lite	225	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" 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 (Amount and Kind of Material Used)	Depth
4	3,830' to 3,834 - 16 holes		
4	3,770 to 3,788 - 72 holes		

TUBING RECORD: Size: <u>2 3/8"</u>		Set At: <u>3,765'</u>		Packer At: <u>3,755'</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>January 2, 2010</u>			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. <u>4</u>	Gas Mcf	Water Bbls. <u>0</u>	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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____ _____
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ALLIED CEMENTING CO., LLC. 037572

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell

DATE <i>11-12-09</i>	SEC. <i>26</i>	TWP. <i>14</i>	RANGE <i>21</i>	CALLED OUT	ON LOCATION	JOB START <i>2:00pm</i>	JOB FINISH <i>2:30pm</i>
LEASEE <i>GROFF</i>	WELL # <i>1-24</i>	LOCATION <i>Ellis 8N 2 1/2 W 1/8 N</i>			COUNTY <i>ELLIS</i>	STATE <i>KANSAS</i>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR *Fritzler Well Service*

TYPE OF JOB *CIRCULATE Cement (open Port Collar)*

HOLE SIZE *4 1/2* T.D. _____

CASING SIZE *2 3/8* DEPTH _____

TUBING SIZE *2 3/8* DEPTH _____

DRILL PIPE *x Port oil Tool's* DEPTH _____

TOOL PORT *Collar @* DEPTH *1447*

PRES. MAX *1500#* MINIMUM *500#*

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT AMOUNT ORDERED *225 Sx Lite 1/4" F10 Seal*

EQUIPMENT

PUMP TRUCK CEMENTER *Gilman*

417 HELPER *MATT*

BULK TRUCK DRIVER *ANDY*

_____ DRIVER _____

COMMON	@		
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC	@		
<i>Lite 225</i>	@	<i>11.05</i>	<i>2666.2</i>
<i>F6 56</i>	@	<i>2.45</i>	<i>137.20</i>
	@		
	@		
	@		
	@		
	@		
HANDLING <i>225</i>	@	<i>2.25</i>	<i>506.25</i>
MILEAGE <i>10.56/mile</i>			<i>675.00</i>
TOTAL			<i>3984.70</i>

REMARKS:

Bridge Plug @ 3200' Test to 1500# (Held) @ 3177'
Spot 2 Sx Sand
Port Collar @ 1447'

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<i>991.00</i>
EXTRA FOOTAGE	@		
MILEAGE <i>30</i>	@	<i>7.00</i>	<i>210.00</i>
MANIFOLD	@		
	@		
	@		
TOTAL			<i>1201.00</i>

CHARGE TO: *Pelican Hill Oil*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
TOTAL			

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

PRINTED NAME _____

SIGNATURE *David Bellis*

SALES TAX (If Any) _____

TOTAL CHARGES ~~_____~~

DISCOUNT ~~_____~~ IF PAID IN 30 DAY

RECEIVED
KANSAS CORPORATION COMMISSION
APR 26 2010
CONSERVATION DIVISION
WICHITA, KS