ANSAS CORPORATION COMMISSION CRIGINAL DIL & GAS CONSERVATION DIVISION

June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

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

OPERATOR: License #_ 9408 Trans Pacific Oil Corporation Spot Description: _ SW NE SW SW Sec. 30 Two. 17 S R 27 Fast West Address 1: 100 S. Main, Suite 200 Address 2: ___ Feet from D North / South Line of Section ____ State: KS Zin: 67202 825 City: Wichita _____ Feet from East / West Line of Section Contact Person: Glenna Lowe Footages Calculated from Nearest Outside Section Corner: Phone: (316) 262-3596 □NE □NW □SE ☑SW County:_Lane CONTRACTOR: License # 5929 Lease Name: Burgess "B" Name: Duke Drilling Co., Inc. 1-30 Wellsite Geologist: _Mike Kidwell Field Name: wildcat Purchaser: N.C.R.A. Producing Formation: Lansing/KC Elevation: Ground: 2685' Kelly Bushing: _ 2694' Designate Type of Completion: Total Depth: 4630' Plug Back Total Depth: 4292' New Well Re-Entry ☐ Workover Amount of Surface Pipe Set and Cemented at: 235' **√** Oil □ wsw SWD ☐ slow ☐ Gas □ D&A ☐ ENHR ☐ sigw Multiple Stage Cementing Collar Used?

✓ Yes

No If yes, show depth set: 2035' □ og ☐ gsw Temp. Abd. CM (Coal Bed Methane) If Alternate II completion, cement circulated from: Cathodic Other (Core, Expl., etc.): ___ feet depth to: surface w/ 200 If Workover/Re-entry: Old Well Info as follows: Operator: _ **Drilling Fluid Management Plan** Well Name: __ (Data must be collected from the Reserve Pit) Original Comp. Date: _____ Original Total Depth: ___ Chloride content: ____ ppm Fluid volume: _____ bbls Deepening Re-perf. Conv. to ENHR Conv. to SWD Dewatering method used: ____ Conv. to GSW Plug Back: _ Plug Back Total Depth Location of fluid disposal if hauled offsite: Commingled Permit #: Operator Name: _____ Dual Completion Permit # Lease Name: _____ License #: _____ ☐ SWD Permit #: _____ ☐ ENHR Permit #: County: _____ Permit #: _____ ☐ GSW Permit #: _ 10/23/2010 11/01/2010 01/18/2011 Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date 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. **AFFIDAVIT** KCC Office Use ONLY I am the affiant and I hereby certify that all requirements of the statutes, rules and regu-Letter of Confidentiality Received

Date: 127 11 - 127 12 lations 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. Confidential Release Date: Wireline Log Received Geologist Report Received

Title: Vice-President

☐ UIC Distribution

ALT I II III Approved by: _____ Date: _