

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

3/11/11

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 # 33905

Name: Royal Drilling, Inc.

Wellsite Geologist: Bryce Bidleman

Purchaser: n/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: _____

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.: _____

<u>2/17/10</u>	<u>2/25/10</u>	<u>2/25/10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 053-21234-0000

Spot Description: _____

SW SW NW Sec. 19 Twp. 14 S. R. 10 East West

2970 Feet from North / South Line of Section

330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Ellsworth

Lease Name: Ford "A" Well #: 1-19

Field Name: Wilson Creek

Producing Formation: n/a

Elevation: Ground: 1669' Kelly Bushing: 1676'

Total Depth: 2965' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 263 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.} PA-DG-3/2/10

Drilling Fluid Management Plan
(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: Gay Sharp

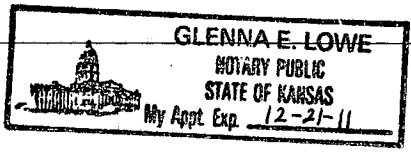
Title: Vice President Date: March 10, 2010

Subscribed and sworn to before me this 10th 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 12 2010
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Trans Pacific Oil Corporation Lease Name: Ford "A" Well #: 1-19
 Sec. 19 Twp. 14 S. R. 10 East West County: Ellsworth

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 checked="" type="checkbox"/> Yes <input 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, Borehole Compensated, Microresistivity, Dual Compensated Porosity, Computer Processed Interpretation	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name _____ Top _____ Datum _____ (See attached sheet)
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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#	263'	Common	180	3% cc, 2%gel

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. _____		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Well: Ford A 1-19

STR: 19-14S-10W

Cty: Ellsworth

State: Kansas

Log Tops:

Anhydrite	443' (+1233) +11'
B/Anhydrite	474' (+1202) + 6'
Grandhaven	2047' (-371) +11'
Stotler	2123' (-471) +15'
Tarkio	2189' (-513) +5'
Bern	2266' (-590) +5'
Howard	2334' (-658) +4'
Topeka	2411' (-735) +4'
Deer Creek	2472' (-796) +4'
Heebner	2656' (-980) +6'
Brown Lm	2750' (-1074) +6'
Lansing	2767' (-1091) +4'
RTD	2965' (-1289)

KCC
MAR 1 1 2010
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RECEIVED
KANSAS CORPORATION COMMISSION
MAR 1 2 2010
CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 036342

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell

DATE <u>2/17/00</u>	SEC. <u>19</u>	TWP. <u>14</u>	RANGE <u>10</u>	CALLED OUT	ON LOCATION	JOB START <u>10:15p</u>	JOB FINISH <u>10:45p</u>
LEASE <u>Ford A</u>	WELL # <u>1-19</u>	LOCATION <u>Wilson 1 1/2 S E 1/4 Sec 10</u>			COUNTY <u>Ellsworth</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Royal Drilling Rig #2

TYPE OF JOB Surface Job

HOLE SIZE 1 3/4 T.D. 263

CASING SIZE 6 5/8 DEPTH 263

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX. MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG: 15'

PERFS

DISPLACEMENT 15, 79 661

OWNER

CEMENT

AMOUNT ORDERED 160 Con 35 CC

28661

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

EQUIPMENT

PUMP TRUCK CEMENTER Shane

398 HELPER Glen

BULK TRUCK

378 DRIVER John

BULK TRUCK

DRIVER

KCC

MAR 1 @ 2010

CONFIDENTIAL

HANDLING @

MILEAGE @

REMARKS:

Ran 6 5/8" str and landing

Est. Circulation

Mixed 150 sts.

Cement Cure

TOTAL

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

MANIFOLD @

TOTAL

CHARGE TO: Trans Pacific

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

To Allied Cementing Co., LLC

You are hereby requested to rent cementing equipment

Thanks,

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