

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED ORIGINAL

JUL 26 2010

Form ACO-1
October 2008
Form Must Be Typed

KCC WICHITA

7/26/11

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 # 33493

Name: American Eagle Drilling, LLC

Wellsite Geologist: Mike Kidwell

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>6/11/2010</u>	<u>6/20/2010</u>	<u>6/20/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25993-0000

Spot Description: _____

SE SE SE Sec. 12 Twp. 11 S. R. 19 East West

330' 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: Ellis

Lease Name: Thiel "A" Well #: 1-12

Field Name: Cochran West

Producing Formation: n/a

Elevation: Ground: 1940' Kelly Bushing: 1947'

Total Depth: 3520' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 211' 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 DA WBI 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: Gary Sharp

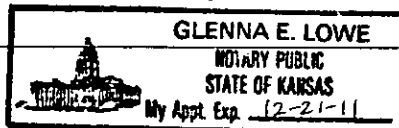
Title: Vice President Date: 7/26/10

Subscribed and sworn to before me this 26th day of July

20 10

Notary Public: Glenna E. Lowe

Date Commission Expires: _____



KCC Office Use ONLY

Letter of Confidentiality Received 7/26/10 - 7/26/11

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: Trans Pacific Oil Corporation Lease Name: Thiel "A" Well #: 1-12
 Sec. 12 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 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 Dual Compensated Porosity, Microresistivity	<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"	23#	211'	Common	150	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 (Amount and Kind of Material Used)	Depth

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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: Thiel A 1-12

STR: 12-11S-19W

Cty: Ellis

State: Kansas

Log Tops:

Anhydrite	1299' (+648) -8'
B/Anhydrite	1325' (+622) -2'
Topeka	2938' (-991) -7'
Heebner	3164' (-1217) -11'
Lansing	3204' (-1257) -7'
Stark	3391' (-1444) -9'
BKC	3431' (-1484) -10'
Conglomerate Chert	3468' (-1521) -6'
RTD	3520' (-1573)

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ALLIED CEMENTING CO., LLC. 041724

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

SERVICE POINT:
Russell KS

DATE <u>6-19-2010</u>	SEC. <u>12</u>	TWP. <u>11 S</u>	RANGE <u>19 W</u>	CALLED OUT	ON LOCATION	JOB START <u>11:30 AM</u>	JOB FINISH <u>12:30 PM</u>
LEASE <u>TRIEL "A"</u>		WELL # <u>1-12</u>		LOCATION <u>Hay's Ks. N. To Rur Rd.</u>		COUNTY <u>Ellis</u>	STATE <u>KANSAS</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)		3 W' VAN INTO					

CONTRACTOR American Eagle #2 OWNER _____

TYPE OF JOB <u>Rotary Plug</u>	CEMENT AMOUNT ORDERED <u>205 #2RB</u>
HOLE SIZE <u>7 7/8</u> T.D. <u>3520'</u>	<u>230 SX 60/40 4% Grel</u>
CASING SIZE <u>8 5/8 Surface</u> DEPTH <u>222'</u>	<u>1/4" # FD-Seal RR SX</u>
TUBING SIZE _____ DEPTH _____	
DRILL PIPE <u>4 1/2 X-H</u> DEPTH <u>1325'</u>	
TOOL _____ DEPTH _____	
PRES. MAX _____ MINIMUM <input checked="" type="checkbox"/>	
MEAS. LINE _____ SHOE JOINT _____	
CEMENT LEFT IN CSG. _____	
PERFS. _____	
DISPLACEMENT _____	

COMMON	<u>133</u>	@	<u>13.50</u>	<u>1660.50</u>
POZMIX	<u>82</u>	@	<u>2.55</u>	<u>619.10</u>
GEL	<u>7</u>	@	<u>20.25</u>	<u>141.75</u>
CHLORIDE		@		
ASC		@		
<u>Fl. Seal</u>	<u>51</u>	@	<u>3.45</u>	<u>124.95</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>205</u>	@	<u>2.25</u>	<u>461.25</u>
MILEAGE <u>110/16/mile</u>				<u>307.50</u>
TOTAL				<u>3315.05</u>

EQUIPMENT

PUMP TRUCK CEMENTER Gleny G.

417 HELPER

BULK TRUCK

378 DRIVER Ron B.

BULK TRUCK

_____ DRIVER _____

REMARKS:

25 SK @ 1325'
100 SK @ 650'
40 SK @ 325'
40 SK @ 40' w/wiper plug
30 SK @ RAT Hole

THANKS

CHARGE TO: Trans Pacific Oil Corp.

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____				
PUMP TRUCK CHARGE				<u>990.00</u>
EXTRA FOOTAGE	@			
MILEAGE <u>15</u>	@	<u>7.00</u>		<u>105.00</u>
MANIFOLD	@			
	@			
TOTAL				<u>1095.00</u>

PLUG & FLOAT EQUIPMENT

8 5/8 Wiper Plug	@		<u>40.00</u>	
	@			
	@			
	@			
	@			
TOTAL				<u>40.00</u>

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 Todd E. New

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

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ALLIED CEMENTING CO.. LLC. 041539

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

SERVICE POINT:
Russell

DATE <u>6-12-10</u>	SEC <u>12</u>	TWP. <u>11S</u>	RANGE <u>19W</u>	CALLED OUT	ON LOCATION	JOB START <u>7:45 A</u>	JOB FINISH <u>3:15 P</u>
LEASE <u>Triv A</u>	WELL # <u>1-12</u>	LOCATION <u>Hwy N to River Rd</u>			COUNTY <u>Ellis</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one)		<u>3w Nit.</u>					

CONTRACTOR American Esle # 2 OWNER _____

TYPE OF JOB Surface Sls

HOLE SIZE 12 1/2 T.D. 224 CEMENT AMOUNT ORDERED 150 Can 38C 22.6l

CASING SIZE 8 1/2 DEPTH 222.03

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 17.18 161

EQUIPMENT _____

PUMP TRUCK CEMENTER _____

417 HELPER Heath

BULK TRUCK _____

410 DRIVER Shane

BULK TRUCK _____

_____ DRIVER _____

HANDLING 75 @ 2.25 168.75

MILEAGE 10/36/10 112.50

TOTAL 2624.50

SERVICE _____

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 991.00

EXTRA FOOTAGE @ _____

MILEAGE 15 @ 7.00 105.00

MANIFOLD @ _____

_____ @ _____

_____ @ _____

TOTAL 1096.00

CHARGE TO: Texas Pacific Oil Co

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES [scribble]

DISCOUNT [scribble] IF PAID IN 30 DAYS

PRINTED NAME _____

SIGNATURE Todd E. [scribble]

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REMARKS:

Row 5 1/2 8 1/2 + Landing Jt.

Est Circulation

Ordered 150 Sls

Cement Circulated!

Thanks!

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