



KANSAS CORPORATION COMMISSION 1046906
OIL & GAS CONSERVATION DIVISION

Form ACO-1

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., 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
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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

(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 #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1046906

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ 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: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	BLASDEL A 1
Doc ID	1046906

All Electric Logs Run

ARRAY COMPENSATED RESISTIVITY
BOREHOLE SONIC ARRAY
SPECTRAL DENSITY DUAL SPACED NEUTRON
MICROLOG
CEMENT BOND

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	BLASDEL A 1
Doc ID	1046906

Tops

Name	Top	Datum
HEEBNER	4078	-1106
LANSING	4142	-1170
MARMATON	4765	-1793
CHEROKEE	4936	-1964
ATOKA	5109	-2137
MORROW	5220	-2248
CHESTER	5348	-2346
ST. GENEVIEVE	5435	-2463

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	BLASDEL A 1
Doc ID	1046906

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
6	5332-5346 MORROW	20 bbls 7% KCl	5332-5346
4	4803-4815, 4780-4790 MARMATON	20 bbls 7% KCl	4803-4815, 4780-4790
		2000 gal 15% HCl ACID DOUBLE STRENGTH FLUSH 1000 gal 7% KCl	4803-4790
4	4672-4678 KANSAS CITY B	20 bbl 7% KCl	4672-4678
		1000 gal 15% DS HCl Fe ACID W/ ADDITIVES	4672-4678
		FLUSH 1176 gal 7% KCl WATER	
4	4223-4229 LANSING B	20 bbl 7% KCl	4223-4229
		1000 gal 15% DS HCl Fe ACID W/ADDITIVES	4223-4229
		FLUSH 1050 gal 7% KCl WATER	
		1000 gal 15% DS HCl Fe ACID W/ADDITIVES	4223-4229
		FLUSH 1050 gal 7% KCl WATER	



*Mark Parkinson, Governor
Thomas E. Wright, Chairman
Joseph F. Harkins, Commissioner
Ward Loyd, Commissioner*

November 11, 2010

LAURA BETH HICKERT
OXY USA Inc.
5 E GREENWAY PLZ
PO BOX 27570
HOUSTON, TX 77227-7570

Re: ACO1
API 15-081-21912-00-00
BLASDEL A 1
NW/4 Sec.04-30S-33W
Haskell County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
LAURA BETH HICKERT



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.
P.O. Box 129
Liberal, Kansas 67905
Phone 620-624-2277

FIELD SERVICE TICKET

1717 00873 A

DATE _____ TICKET NO. _____

DATE OF JOB: 7/22/10	DISTRICT: 1717	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:	
CUSTOMER: Oxy USA		LEASE: Blasdel "A"		WELL NO.:		1		
ADDRESS:		COUNTY: Waskell		STATE: Ks				
CITY:		STATE:		SERVICE CREW: Royce, Ruben M, Jose				
AUTHORIZED BY: Sorry Bennett IRB		JOB TYPE: 45% Surface 242						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	TIME
19866	4	19866	4					AM 11:00
30463	4					ARRIVED AT JOB		AM 12:15
19843	4					START OPERATION		AM 13:31
19805	4					FINISH OPERATION		AM 15:18
19863	4					RELEASED		AM 16:00
19827	4					MILES FROM STATION TO WELL		

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: *[Signature]*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL101	A-Con blend	SK	430		7998.00
CL110	Prem. Plus Cement	SK	200		3260.00
CC109	Calcium Chloride	lb	1591		1670.52
CC102	Cellofloc	lb	265		980.50
CC130	C-51	lb	31		2025.00
CE1453	Flapper Float Valve 45/8"	ea	1		280.00
CE253	Guide Shoe Reg 45/8"	ea	1		380.00
CE1773	Centralizer 45/8"	ea	5		725.00
CE1903	Basket 45/8"	ea	1		315.00
CE105	Top Plug 45/8"	ea	1		225.00
E101	Heavy Equip mileage	mi	150		1050.00
CE240	Blending & Mixing Charge	SK	630		882.00
E113	Bulk Delivery	Tr	1443		2372.80
CE202	Depth Charge 1001' to 2000'	hr	4		1500.00
CE504	Ply Container	Job	1		250.00
E100	Pickup Mileage	mi	50		212.50
5003	Service Supervisor	ea	1		175.00

SUB TOTAL **14869.56**

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE: *[Signature]*
THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *[Signature]*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

BASIC

energy services, L.P.

TREATMENT REPORT

Customer: Oxy USA	Lease No.	Date: 7/22/10
Lease: Blasdel "A"	Well # 1	
Field Order #	Station: Liberal	Casing: 6 5/8 Depth: 1621 County: Haskell State: KS
Type Job: 6 5/8" surface Z4Z	Formation	Legal Description: 4-30-33

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing: 6 5/8"	Tubing Size	Shots/Ft		Prep: 200 gal A-Con @ 11.4 #	Max Press: 210 C.C.	Min:	
Depth: 1621	Depth	From	To	Prep: 1200 gal WC-1 @	Max: 96 C.C.	Min:	
Volume: 113.1	Volume	From	To	Prep: 200 gal Prem. + @ 14.8 #	Max: 210 C.C.	Min:	
Max Press: 2000	Max Press	From	To	Fluc: 1.34 CWT/HK	Avg: 6.3 gal/sk	15 Min.	
Well Connection: P.C.	Annulus Vol.	From	To		HHP Used	Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush: Fresh	Gas Volume	Total Load	

Customer Representative: Wes Williams	Station Manager: Sorel Barnett	Treater: Chas Collins
Service Units: 19555 30463 19553 19505 19529 19566		
Driver Names: Chas Collins R. Olds R. Martinez J. Martinez		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
12:15					on loc, spot trucks, safety rig
12:50					Break Circ
13:05					Engage w/ Rig + Collman
13:31	0-2000				Psi Test
13:35	200		0	5.4	start mix A-Con @ 11.4 #
14:16	200		226	4	switch to tail @ 14.8 #
14:36	0		47	3	Finish mixing
14:39	0		-	-	Shut Down, Drop plug
14:48	0		0	4-5	start disp washup on Plug
15:10	550		90	3	slow Rate
15:17	150-1100		113	-	Plug Down
15:18	1100-0				Release Psi float held
					Job Complete
					Thank You
					Chas Collins



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.
P.O. Box 129
Liberal, Kansas 67905
Phone 620-624-2277

FIELD SERVICE TICKET
1717 00935 A

7-30-10 DATE TICKET NO.

DATE OF JOB 7-30-10	DISTRICT Liberal	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:
CUSTOMER OXY USA	LEASE BLASDEI "A"		WELL NO. 1				
ADDRESS		COUNTY HASKEL	STATE KS				
CITY		STATE		SERVICE CREW JASON ARRINGTON, Carlos Lopez			
AUTHORIZED BY JERRY BENNETT JRB		JOB TYPE: Productive Casing 242					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	7-30-10 DATE AM PM TIME
30464	11						11:00
19919	11					ARRIVED AT JOB	7-30-10 AM 11:00
19828	11					START OPERATION	7-30-10 AM 22:54
33016	11					FINISH OPERATION	7-31-10 AM 0:52
33021	11					RELEASED	7-31-10 AM 1:30
19883	11					MILES FROM STATION TO WELL	50

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED Wes Will
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL 161	'A' CON BLEND	SKS	120		2232 00
CL 104	50/50 F02	SKS	215		2365 00
CL 113	Gypsum	lb	905		678 75
CC 111	SALT	lb	1194		597 00
CC 124	FLA-115	lb	169		1635 00
CC 201	Gilsonite	lb	1071		717 57
CC 107	C-42P	lb	46		368 00
CC 109	Calcium Chloride	lb	226		237 30
CC 102	CELDFAKE	lb	31		114 70
CC 103	C-51	lb	23		575 00
CF 1451	Flapper Type Insert Valve 5 1/2" Blue	ea	1		215 00
CF 251	Guide Shoe - Regular 5 1/2" Blue	ea	1		250 00
CF 1651	Turbolizer 5 1/2" Blue	ea	35		3850 00
CF 103	Top Rubber Cement Plug 5 1/2"	ea	1		105 00
CC 155	Super Flush	gal	500		765 00
E 101	Heavy Equipment Mileage	mi	150		1050 00
CE 240	Blending & Mixing Service Charge	SK	335		469 00
E 113	Proppant and Bulk Delivery Charges, Per Ton Minimum		735		1176 00
CE 206	Depth Charge; 5001-6000		4 HRS		2880 00
SUB TOTAL					13,213.69

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE Carlos Lopez THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Wes Will
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer <i>OXY USA</i>	Lease No.	Date
Lease <i>BIASDEI "A"</i>	Well # <i>1</i>	<i>5568</i>
Field Order # <i>1717 02935</i>	Station <i>Liberal 1717</i>	Casing <i>5 1/2</i>
Type Job <i>Production Casing 2-42</i>	Depth 11750	County <i>HASLEI</i>
	Formation	State <i>KS</i>
		Legal Description <i>4-30-33</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>5 1/2 15.5#</i>	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth <i>5568</i>	Depth	From	To	Pre Pad		Max		5 Min.
Volume <i>31.5 bbls</i>	Volume	From	To	Pad		Min		10 Min.
Max Press <i>1500</i>	Max Press	From	To	Frac		Avg		15 Min.
Well Connection	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush		Gas Volume		Total Load

Customer Representative <i>Wes</i>	Station Manager <i>Jerry BENNETT</i>	Treater <i>Carlos Lopez</i>
Service Units <i>30464 19919 19828 33016 33021 19883 19820</i>		
Driver Names <i>Carlos Lopez Robert Cox Roben Chavez J. ARRINGTON</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>14:00</i>					<i>ON LOCATION</i>
<i>14:05</i>					<i>Safety Meeting</i>
<i>14:10</i>					<i>Spot in Trucks</i>
<i>14:15</i>					<i>Rig up IRON</i>
<i>22:50</i>					<i>Safety Meeting</i>
<i>22:54</i>	<i>2500</i>				<i>Test lines</i>
<i>22:58</i>	<i>300</i>	2	<i>5</i>	<i>3.5</i>	<i>Pump H2O Pad</i>
<i>23:00</i>	<i>300</i>		<i>12</i>	<i>3.5</i>	<i>Superflush</i>
<i>23:05</i>	<i>300</i>		<i>5</i>	<i>3.5</i>	<i>Pump H2O PAD</i>
<i>23:17</i>	2		<i>10</i>	<i>3</i>	<i>Plug RAT Hole Mouse Hole</i>
<i>23:24</i>	<i>400</i>		<i>36</i>	<i>4.5</i>	<i>Pump 70 sls "A" CON @ 11.4#</i>
<i>23:37</i>	<i>200</i>		<i>58</i>	<i>5</i>	<i>Pump 215 sls 50/50 pot @ 13.8#</i>
<i>0:10</i>				4	<i>Drop Plug - Wash up lines</i>
<i>0:17</i>	<i>200</i>		2	<i>4</i>	<i>START DISPLACEMENT</i>
<i>0:49</i>	<i>900</i>		<i>120</i>	<i>2.5</i>	<i>Slow Down Pumping Rate</i>
<i>0:51</i>	<i>1500</i>		<i>128</i>	<i>2.5</i>	<i>Bump Plug</i>
<i>0:52</i>	2				<i>Released Pressure</i>
					<i>Float Held</i>
<i>0:53</i>					<i>Rig Down</i>
<i>1:30</i>					<i>DEPART FROM LOCATION</i>
					<i>30 bbls to TC lost Circ. Got RETURNS when we Dropped Plug</i>

DRILLER'S LOG
OXY USA, INC.
BLASDEL A #1
SECTION 4-T30S-R33W
HASKELL COUNTY, KANSAS

COMMENCED: 07-20-10
COMPLETED: 07-31-10

SURFACE CASING: 1821' OF 8 5/8" CMTD
W/430 SKS A CONN + 3% CC + 1/4 #/SK
CELL FLAKE. TAILED W/200 SKS
PREMIUM PLUS + 2% CC + 1/4#/SK CELL
FLAKE.

FORMATION	DEPTH
OGALLALA	0 - 330
SAND	330 - 603
DAKOTAS	603 - 1539
RED BED	1539 - 1913
PERMIAN	1913 - 2340
STONE CORRAL	2340 - 2600
SHALE & LIMESTONE	2600 - 3040
COUNCIL GROVE	3040 - 4105
LANSING	4105 - 4290
SHALE & LIMESTONE	4290 - 4480
CHEROKEE	4408 - 4620
KANSAS CITY	4620 - 4776
MARMATON	4776 - 4825
CHEROKEE	4825 - 5105
ATOKA	5105 - 5200
MORROW	5200 - 5327
CHESTER	5327 - 5445
ST. LOUIS	5445 - 5570 RTD

I DO HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

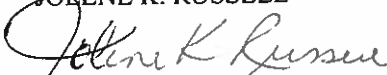
TRINIDAD DRILLING LP


JACK PEPPER

STATE OF KANSAS: ss:

SUBSCRIBED AND SWORN TO BEFORE ME THIS 6TH DAY OF AUGUST, 2010.



JOLENE K. RUSSELL

NOTARY PUBLIC



DRILL STEM TEST REPORT

Prepared For: **Oxy USA Inc.**

5 E Greenway Plz.
Houston Tx. 77227

ATTN: Austin G.

4 30 33 Haskell KS

Blasdel

Start Date: 2010.07.25 @ 23:00:00

End Date: 2010.07.26 @ 09:14:15

Job Ticket #: 39337 DST #: 1

Trilobite Testing, Inc
PO Box 1733 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Oxy USA Inc.

Blasdel

5 E Greenway Plz.
Houston Tx. 77227

4 30 33 Haskell KS

Job Ticket: 39337

DST#: 1

ATTN: Austin G.

Test Start: 2010.07.25 @ 23:00:00

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 40.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.57 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 10000.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
0.00	300 GIP	0.000
150.00	5%gas5%water 40%mud50%oil	0.738

Total Length: 150.00 ft Total Volume: 0.738 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: Sampler Data-15 CFD g 500 ML oil trace of mw @ 850 PSI.



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Oxy USA Inc.
5 E Greenway Plz.
Houston Tx. 77227

ATTN: Austin G.

Blasdel
4 30 33 Haskell KS
Job Ticket: 39337 DST#: 1
Test Start: 2010.07.25 @ 23:00:00

Tool Information

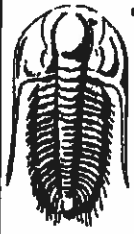
Drill Pipe:	Length: 3915.00 ft	Diameter: 3.80 inches	Volume: 54.92 bbl	Tool Weight: 2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 298.00 ft	Diameter: 2.25 inches	Volume: 1.47 bbl	Weight to Pull Loose: 90000.00 lb
			<u>Total Volume: 56.39 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	15.00 ft			String Weight: Initial 85000.00 lb
Depth to Top Packer:	4228.00 ft			Final 85000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	10.00 ft			
Tool Length:	40.00 ft			
Number of Packers:	2	Diameter: 7.75 inches		

Tool Comments:

Tool Description Length (ft) Serial No. Position Depth (ft) Accum. Lengths

Change Over Sub	1.00			4199.00	
Shut In Tool	5.00			4204.00	
Sampler	3.00			4207.00	
Hydraulic tool	5.00			4212.00*	
Jars	5.00			4217.00	
Safety Joint	2.00			4219.00	
Packer	5.00			4224.00	30.00 Bottom Of Top Packer
Packer	4.00			4228.00	
Stubb	1.00			4229.00	
Perforations	1.00			4230.00	
Recorder	0.00	8678	Inside	4230.00	
Recorder	0.00	8677	Inside	4230.00	
Perforations	5.00			4235.00	
Bullnose	3.00			4238.00	10.00 Bottom Packers & Anchor

Total Tool Length: 40.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Oxy USA Inc.
5 E Greenway Plz.
Houston Tx. 77227
ATTN: Austin G.

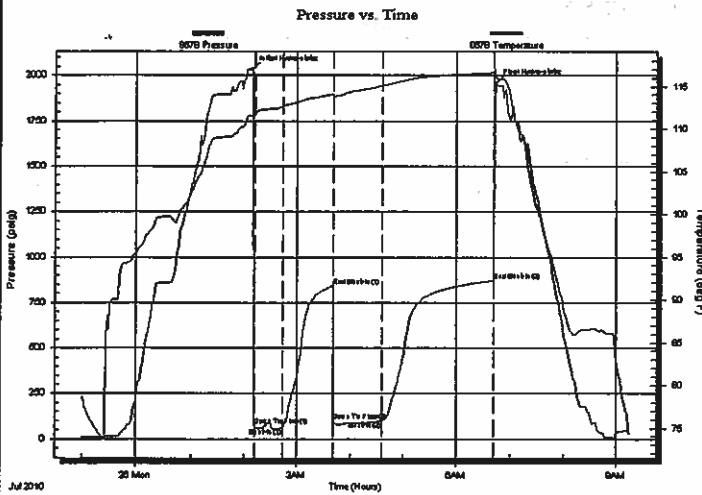
Blasdel
4 30 33 Haskell KS
Job Ticket: 39337 **DST#: 1**
Test Start: 2010.07.25 @ 23:00:00

GENERAL INFORMATION:

Formation: **Lansing**
 Deviated: **No Whipstock** ft (KB)
 Time Tool Opened: 02:11:30
 Time Test Ended: 09:14:15
 Interval: **4228.00 ft (KB) To 4238.00 ft (KB) (TVD)**
 Total Depth: **4238.00 ft (KB) (TVD)**
 Hole Diameter: **7.78 inches** Hole Condition: **Fair**
 Test Type: **Conventional Bottom Hole**
 Tester: **Harley Davidson**
 Unit No: **33**
 Reference Elevations: **2973.00 ft (KB)**
2962.00 ft (CF)
 KB to GR/CF: **11.00 ft**

Serial #: 8678 Inside
 Press@RunDepth: **62.78 psig @ 4230.00 ft (KB)** Capacity: **8000.00 psig**
 Start Date: **2010.07.25** End Date: **2010.07.26** Last Calib.: **2010.07.26**
 Start Time: **23:00:01** End Time: **09:14:15** Time On Btm: **2010.07.26 @ 02:08:15**
 Time Off Btm: **2010.07.26 @ 06:44:15**

TEST COMMENT: IF- Weak building blow 7" into bucket.
 IS- No blow back.
 FF- Weak building blow 5" into bucket.
 FS- No blow back.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2033.29	111.61	Initial Hydro-static
4	71.16	111.68	Open To Flow (1)
35	62.78	112.63	Shut-In(1)
93	841.07	114.03	End Shut-In(1)
93	98.72	113.72	Open To Flow (2)
148	98.16	115.10	Shut-In(2)
274	871.33	116.60	End Shut-In(2)
276	1957.71	116.12	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
0.00	300 GIP	0.00
150.00	5%gas5%w ater 40%mud50%oil	0.74

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

Pressure vs. Time

