



1047810

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 ☐ Yes ☐ No  
(Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run ☐ Yes ☐ No

Electric Log Submitted Electronically ☐ Yes ☐ No  
(If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample  
Name Top Datum

CASING RECORD ☐ New ☐ 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 (Amount and Kind of Material Used)	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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Falcon Exploration, Inc.
Well Name	SWAYZE 2-17(SW)
Doc ID	1047810

All Electric Logs Run

CNL/CDL
BHCS
DIL
MEL

Form	ACO1 - Well Completion
Operator	Falcon Exploration, Inc.
Well Name	SWAYZE 2-17(SW)
Doc ID	1047810

#### Tops

Name	Top	Datum
HEEBNER	4438	-1968
LANSING	4647	-2177
STARK	4978	-2508
MARMATON	5104	-2634
PAWNEE	5182	-2712
CHEROKEE SH	5233	-2763
INOLA	5350	-2880
MORROW SH	5359	-2889
MISS	5378	-2908



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

December 09, 2010

CYNDE WOLF  
Falcon Exploration, Inc.  
125 N MARKET STE 1252  
WICHITA, KS 67202-1719

Re: ACO1  
API 15-025-21509-00-00  
SWAYZE 2-17(SW)  
SW/4 Sec.17-30S-22W  
Clark 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,  
CYNDE WOLF

# ALLIED CEMENTING CO., LLC.

037057

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Medicine Lodge, KS

9-13

DATE	9-14-2010	SEC.	17	TWP.	30S	RANGE	22W	CALLED OUT	10:00 PM	ON LOCATION	12:30 AM	JOB START	5:30 AM	JOB FINISH	6:00 AM
LEASE	Swaveze	WELL #	2-17	LOCATION			Kings down to 6 1/2 section				COUNTY	CLARK	STATE	KS	
OLD OR <u>NEW</u> (Circle one)															

CONTRACTOR	UGI #1	OWNER	Falcon Exploration
TYPE OF JOB	Surface	CEMENT	
HOLE SIZE	17 1/2	T.D.	406
CASING SIZE	13 3/8	DEPTH	406'
TUBING SIZE		DEPTH	
DRILL PIPE		DEPTH	
TOOL		DEPTH	
PRES. MAX		MINIMUM	
MEAS. LINE		SHOE JOINT	
CEMENT LEFT IN CSG.	20'		
PERFS.			
DISPLACEMENT	58 BBLs of Fresh water		
EQUIPMENT			
PUMP TRUCK	CEMENTER Derin F		
# 360-265	HELPER MSHAT		
BULK TRUCK			
# 356-252	DRIVER Tjason T		
BULK TRUCK			
#	DRIVER		
REMARKS:			
Pipe on bottom & break circulation pump 3 bbls of Fresh water & bleed mud 450 sy of cement Displace 58 bbls & shut in, cement did circulate			
COMMON A 450 sy @ 15.45 6952.50			
POZ MIX @ 187 20			
GEL @ 20.80 187 20			
CHLORIDE 16 sy @ 58-20 931.20			
ASC @			
HANDLING 475 @ 2.40 1140 00			
MILEAGE 475/10/40 1900 00			
TOTAL 14,110.70			

## SERVICE

DEPTH OF JOB	406'
PUMP TRUCK CHARGE	1018 00
EXTRA FOOTAGE	106 @ .85 90.10
MILEAGE	40 @ 2 27 280 00
MANIFOLD	@
Swaged UCL	@
	@

CHARGE TO: Falcon Exploration

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 1388.10

## PLUG & FLOAT EQUIPMENT

13 3/8

2- Baskets	@ 333.20	666.40
	@	
	@	
	@	
	@	
TOTAL		666.40

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.

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_

IF PAID IN 30 DAYS

PRINTED NAME X

SIGNATURE X

Thank You!!!

# ALLIED CEMENTING CO., LLC.

30821

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Liberals K.S.

DATE <u>9-23-10</u>	SEC <u>17</u>	TWP. <u>30s</u>	RANGE <u>22w</u>	CALLED OUT	ON LOCATION	JOB START <u>9:00 AM</u>	JOB FINISH <u>4:30 AM</u>
LEASE <u>Swayze</u>	WELL # <u>2-17</u>	LOCATION <u>Vec Kingsdown K.S.</u>	COUNTY <u>Clark</u>	STATE <u>KS</u>			
OLD OR NEW <u>(Circle one)</u>							

CONTRACTOR Val Rig #1 OWNER \_\_\_\_\_

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. \_\_\_\_\_

CASING SIZE 13 3/8 DEPTH 404

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE 4 1/2 DEPTH 1470

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_

EQUIPMENT \_\_\_\_\_

PUMP TRUCK CEMENTER Kennan

# 372 HELPER Cesar

BULK TRUCK \_\_\_\_\_

# 457-251 DRIVER Josc

BULK TRUCK \_\_\_\_\_

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

50 SK @ 1470 = 12.37 BBL Slurry

75 SK @ 420 = 18.56 BBL Slurry

30 SK @ 60 = 7.42 BBL Slurry

30 SK @ Rate Hole = 7.42 BBL Slurry

20 SK @ Morse Hole = 4.95 BBL Slurry

THANK YOU!!

CHARGE TO: Falcon

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLUG & FLOAT EQUIPMENT N/A

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_

EXTRA FOOTAGE \_\_\_\_\_

MILEAGE 80 @ 7.00 560.00

MANIFOLD \_\_\_\_\_

TOTAL 1577.00

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

PRINTED NAME Walter Ford

SIGNATURE Walter Ford

TERMS AND CONDITIONS" listed on the reverse side.

# Diamond Testing

## General information Report

### General Information

**Company Name** FALCON EXPLORATION, INC.

**Contact** MICHEAL MITCHELL

**Well Name** SWAYZE #2-17

**Unique Well ID** DST #1 INOLA 5,230' - 5,349'

**Surface Location** SEC 17-30S-22W CLARK COUNTY, KS

**Well License Number**

**Field**

**Well Type**

**Job Number**

**Representative** ROGER D. FRIEDLY

**Well Operator** FALCON EXPLORATION, INC.

**Report Date** 2010/09/21

**Prepared By** ROGER D. FRIEDLY

WILDCAT

Vertical

**Test Type** CONVENTIONAL

**Formation** DST #1 INOLA 5,230' - 5,349'

**Well Fluid Type** 01 Oil

**Start Test Time** 11:45:00

**Final Test Time** 20:31:00

**Start Test Date** 2010/09/21

**Final Test Date** 2010/09/21

**Gauge Name** 1150

**Gauge Serial Number**

### Test Results

RECOVERED: 30 DM 100% MUD

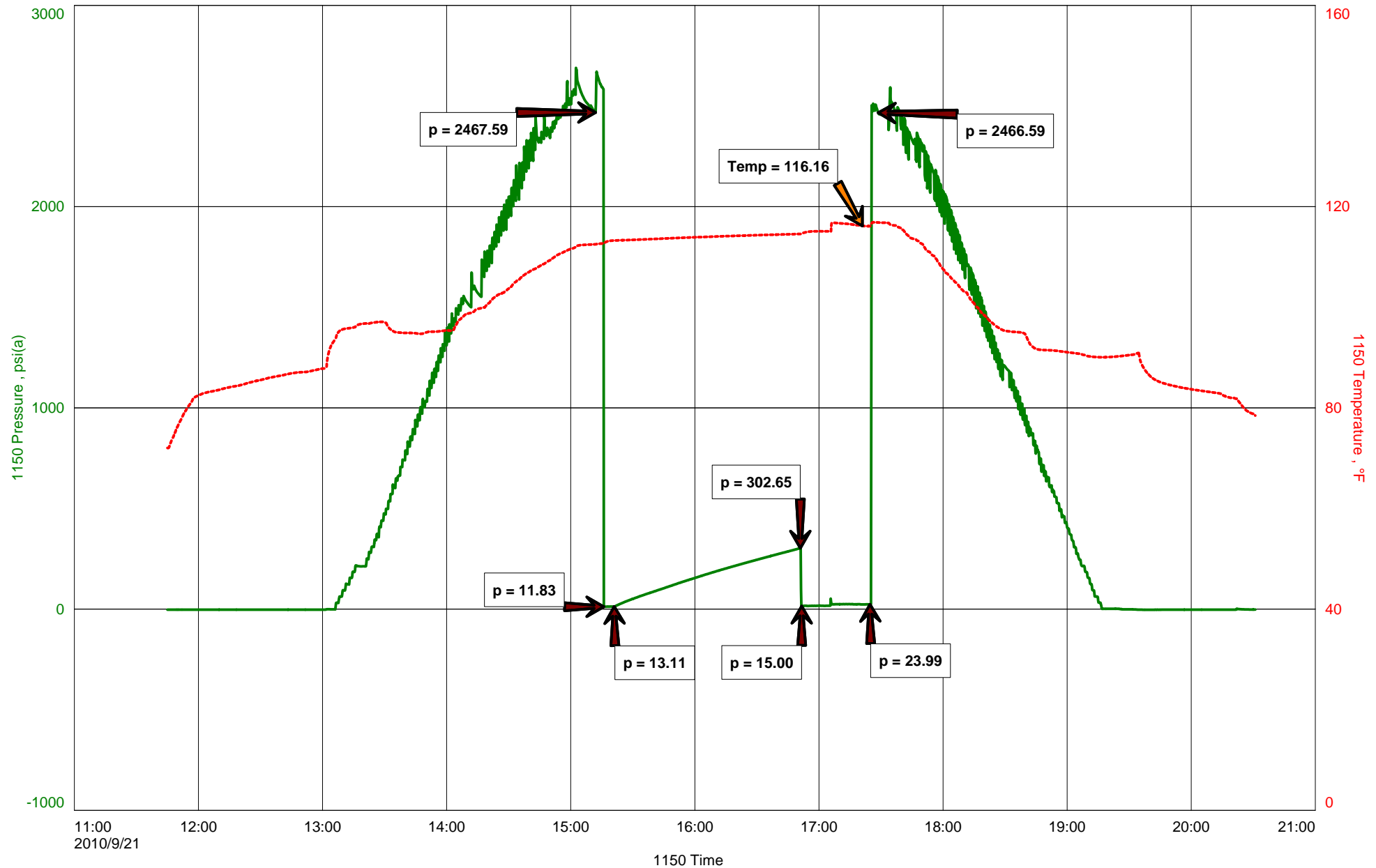
TOOL SAMPLE: 100% DM - FEW OIL SPECKS - GOOD GASSY ODOR



FALCON EXPLORATION, INC.  
DST #1 INOLA 5,230' - 5,349'  
Start Test Date: 2010/09/21  
Final Test Date: 2010/09/21

SWAYZE #2-17  
Formation: DST #1 INOLA 5,230' - 5,349'

SWAYZE #2-17





**DIAMOND TESTING**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(800) 542-7313

**DRILL -STEM TEST TICKET**

Company \_\_\_\_\_ Lease & Well No. \_\_\_\_\_  
Contractor \_\_\_\_\_ Charge to \_\_\_\_\_  
Elevation \_\_\_\_\_ Formation \_\_\_\_\_ Effective Pay \_\_\_\_\_ Ft. Ticket No. \_\_\_\_\_  
Date \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Range \_\_\_\_\_ W County \_\_\_\_\_ State KANSAS  
Test Approved By \_\_\_\_\_ Diamond Representative ROGER D. FRIEDLY

Formation Test No. \_\_\_\_\_ Interval Tested from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Total Depth \_\_\_\_\_ ft.  
Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in. Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in.  
Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in. Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in.  
Depth of Selective Zone Set \_\_\_\_\_

Top Recorder Depth (Inside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Bottom Recorder Depth (Outside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Mud Type \_\_\_\_\_ Viscosity \_\_\_\_\_ Drill Collar Length \_\_\_\_\_ ft. I.D. 2 1/4 in.  
Weight \_\_\_\_\_ Water Loss \_\_\_\_\_ cc. Weight Pipe Length \_\_\_\_\_ ft. I.D. 2 7/8 in.  
Chlorides \_\_\_\_\_ P.P.M. Drill Pipe Length \_\_\_\_\_ ft. I.D. 3 1/2 in.  
Jars: Make BOWEN Serial Number \_\_\_\_\_ Test Tool Length \_\_\_\_\_ ft. Tool Size 3 1/2-IF in.  
Did Well Flow? \_\_\_\_\_ Reversed Out \_\_\_\_\_ Anchor Length \_\_\_\_\_ ft. Size 4 1/2-FH in.  
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: \_\_\_\_\_

2nd Open: \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Remarks: \_\_\_\_\_

Price Job

Other Charges

Insurance

Total

Time Set Packer(s) \_\_\_\_\_ A.M. \_\_\_\_\_ P.M. Time Started Off Bottom \_\_\_\_\_ A.M. \_\_\_\_\_ P.M. Maximum Temperature \_\_\_\_\_

Initial Hydrostatic Pressure ..... (A) \_\_\_\_\_ P.S.I.

Initial Flow Period ..... Minutes (B) \_\_\_\_\_ P.S.I. to (C) \_\_\_\_\_ P.S.I.

Initial Closed In Period ..... Minutes (D) \_\_\_\_\_ P.S.I.

Final Flow Period ..... Minutes (E) \_\_\_\_\_ P.S.I. to (F) \_\_\_\_\_ P.S.I.

Final Closed In Period ..... Minutes (G) \_\_\_\_\_ P.S.I.

Final Hydrostatic Pressure ..... (H) \_\_\_\_\_ P.S.I.

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.