



KANSAS CORPORATION COMMISSION 1050018
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: _____



1050018

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	MAURICE 1-4
Doc ID	1050018

Tops

Name	Top	Datum
CHASE	1836	+145
WINFIELD	1886	+95
TOPEKA	2929	-948
HEEBNER	3173	-1192
BROWN LIME	3243	-1262
LANSING	3251	-1270
BASE KANSAS CITY	3475	-1494
REAGAN	3548	-1567
GRANITE WASH	3582	-1601
LTD	3633	



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 02370 A

DATE _____ TICKET NO. _____

DATE OF JOB 08-13-10		DISTRICT PRATT		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 L. D. DRILLING				LEASE MAURICE		1-4		WELL NO.	
ADDRESS				COUNTY BARTON		STATE KS			
CITY				STATE KS		SERVICE CREW Sullivan, Melson, Phye			
AUTHORIZED BY				JOB TYPE: CNW 8 7/8 Surface					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
33708-20970	50					08-13-10		PM	1230
19881-19867	50							AM	1430
19867								AM	1840
								AM	1930
						RELEASED	08-13-10	AM	1950
						MILES FROM STATION TO WELL		65	

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
CP 101	H-CON cmt	SK	200		3600.00
CP 100	Common	SK	200		3200.00
CC 102	CellHcke	lb	100		370.00
CC 109	caloria blade	lb	1,128		1,184.40
CC 200	CMT PCL	lb	376		94.00
CF 105	TOP Rubber plug 8 7/8	SA	1		225.00
E 100	pickup milips	mi.	65		276.25
E 101	Heavy Seal milips	mi.	130		910.00
E 113	Bulk Pcl	TN	1222		1,955.20
CE 201	Depth Charge 501-1000'	SA	1		1,200.00
CE 240	Blender-Mixer Charge	SK	400		560.00
CE 504	plug chaster 8 7/8	SA	1		250.00
S003	Solvent Separator	SA	1		175.00
				SUB TOTAL	

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
	TOTAL	9,099.90

Thank you
DLS

SERVICE REPRESENTATIVE <u>[Signature]</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>[Signature]</u>
FIELD SERVICE ORDER NO. _____	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer <i>L.D. Drilling</i>	Lease No.	Date <i>08-13-10</i>			
Lease <i>MAURICE</i>	Well # <i>1-4</i>				
Field Order # <i>2370</i>	Station <i>PRA4</i>	Casing <i>8 7/8</i>	Depth <i>1016</i>	County <i>BARTON</i>	State <i>KS</i>
Type Job <i>CNW 8 7/8 SURFACE</i>	Formation	Legal Description <i>4-19-15</i>			

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>8 7/8</i>	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth <i>1016</i>	Depth	From	To	Pre Pad		Max		5 Min.
Volume <i>26</i>	Volume	From	To	Pad		Min		10 Min.
Max Press <i>400</i>	Max Press	From	To	Frac		Avg		15 Min.
Well Connection <i>P.C.</i>	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth <i>976</i>	Packer Depth	From	To	Flush		Gas Volume		Total Load

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Sullivan</i>
Service Units <i>19867 33708 20920 19831 19862</i>		
Driver Names <i>Sullivan melson Phye</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>1445</i>					<i>on for softy mostly</i>
					<i>Run 24 str 8 7/8 #24 csp.</i>
<i>1820</i>					<i>CASING ON BOTTOM</i>
<i>1830</i>					<i>Hook Rig to circ</i>
<i>1840</i>	<i>200</i>		<i>5</i>	<i>4</i>	<i>1st spacer</i>
			<i>91</i>		<i>mix lead cmt 200st A-con blend cmt</i>
	<i>300</i>		<i>51</i>	<i>5.5</i>	<i>mix Tail cmt 200st comm 2' plug 3 1/2 ccl 4' Acc</i>
					<i>cmt mix shut down</i>
					<i>Release Plug</i>
<i>1908</i>				<i>5.5</i>	<i>1st Drop</i>
<i>1930</i>	<i>300</i>		<i>63</i>		<i>plug down</i>
					<i>circ 20 BBL cmt to pit</i>
					<i>job complete</i>
					<i>Thank you</i>



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 02265 A

DATE _____ TICKET NO. _____

DATE OF JOB 8-19-10 DISTRICT KANSAS		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 L.O. Drilling, Inc		LEASE maurice 1-4 WELL NO.							
ADDRESS		COUNTY Barton 4-19-15 STATE Kansas							
CITY STATE		SERVICE CREW A. Wenth, M. Mathal, Edmond							
AUTHORIZED BY		JOB TYPE: 5/2" L.S. CWW							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
28443 P.U	1						8-19-10	PM	1200
19903-19905	1					ARRIVED AT JOB	8-19-10	AM	230
19831-19862	1					START OPERATION	8-19-10	AM	700
						FINISH OPERATION	8-19-10	AM	800
						RELEASED	8-19-10	PM	830
						MILES FROM STATION TO WELL	65 miles		

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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM# PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CF103	60/40 Por		125-SK		\$ 1500.00
CF103	60/40 Por		30-SK		\$ 360.00
CC111	SALT (FINE)		1117-1b		\$ 558.50
CC112	Cement Friction Reducer		54-1b		\$ 324.00
CC201	Gilsonite		625-1b		\$ 418.75
CF607	Latch Down Plug + Baffle 5/2" Blue		1-en		\$ 400.00
CF1101	Cement Shoe Basket Type 5/2" Blue		1-en		\$ 1700.00
CF1651	Turbulizer 5/2" Blue		5-en		\$ 550.00
C704	CS-1K KCL Sub.		1-gal		\$ 35.00
CC151	MUD Flush		500-gal		\$ 430.00
E100	Unit mileage charge pickup		65-mi		\$ 276.25
E101	Heavy Equipment mileage		130-mi		\$ 910.00
E113	Bull & Del. Chg.		436-TM		\$ 696.80
CF203	Depth Charge 2001-3000		1-4hrs		\$ 1800.00
CF240	Blending + mixing Service chg		155-SK		\$ 217.00
CF504	Plug container Utilization chg		1-Job		\$ 250.00
5003	Service Supervisor first 8hrs on loc		1-en		\$ 175.00
SUB TOTAL					

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		ALS \$6890.85

SERVICE REPRESENTATIVE *Allen F. Wenth* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY *David R. ...*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____

Customer <i>L.D. Drilling INC</i>	Lease No.	Date <i>8-19-10</i>
Lease <i>Maurice</i>	Well # <i>1-4</i>	
Field Order # <i>02265A</i>	Station <i>Pratt KS</i>	Casing <i>5/2</i>
Type Job <i>5/2 L.S.</i>	Formation <i>CRMW</i>	Depth <i>2099.57</i>
		County <i>Barton</i>
		State <i>KS</i>
		Legal Description <i>4-19-15</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size <i>5/2</i>	Tubing Size	Shots/Ft		Acid <i>10-5Ks 60/40 Poz</i>	DATE <i>8-19-10</i>	PRESS <i>@ 13.4</i>	ISIP
Depth <i>2099.</i>	Depth	From	To	Pre Pad <i>125 sks 60/40 Poz</i>	Max	<i>@ 15.4</i>	5 Min.
Volume <i>51 BBL</i>	Volume	From	To	Pad <i>20 BBL 2% KCL</i>	Min		10 Min.
Max Press <i>1500 #</i>	Max Press	From	To	Frac <i>12 BBL mud Flush</i>	Avg		15 Min.
Well Connection <i>PC</i>	Annulus Vol.	From	To	Flush <i>Disp/H2O</i>	HHP Used		Annulus Pressure
Plug Depth <i>2083</i>	Packer Depth	From	To		Gas Volume		Total Load

Customer Representative <i>(L.D.) Dave Rone</i>	Station Manager <i>Scotty</i>	Treater <i>Allen F. Werth</i>
Service Units <i>28443 19903 19905 19831 19862</i>		
Driver Names <i>Werth Mike Mathl Edmundo</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>230 pm</i>					<i>Petromark II on loc. Discuss Safety, setup, Plan Job</i>
					<i>Rig laying down D.P.</i>
					<i>out of Hole w/ O.P. Laydown Kelly.</i>
					<i>Rig up to Run 5/2" csg. 24'</i>
<i>455</i>					<i>start 5/2" csg. Shoe Joint 16 bbl w/ Basket Type shoe. L.D. Baffle in collar-cent, 1-3-5-7-9.</i>
<i>530</i>					<i>Fill csg.</i>
<i>609</i>					<i>Pipe @ 2099' Fill csg. + CIR</i>
<i>614</i>					<i>Drop Setting Ball + CIR</i>
<i>620</i>	<i>800"</i>				<i>Basket Shoe set @ 800" w/ Rig CIR w/ Rig Pump.</i>
<i>705</i>			<i>20</i>	<i>5</i>	<i>Pump 20 BBL 2% KCL</i>
			<i>12</i>	<i>5</i>	<i>Pump 12 BBLs Mud Flush</i>
			<i>3</i>	<i>5</i>	<i>Pump 3 BBLs H2O</i>
			<i>5</i>	<i>5</i>	<i>Mix + pump 10 sks 60/40 scavenger @ 13.4</i>
			<i>26</i>	<i>5</i>	<i>Mix + pump 125 sks 60/40 Poz @ 15.4</i>
					<i>washout Pump + Line</i>
					<i>Drop L.D. Plug. Start Disp.</i>
					<i>caught lift - 32 BBLs</i>
<i>730</i>					<i>Plug Down.</i>
<i>830</i>					<i>Plug Rat hole w/ 30 sks 60/40 Poz -</i>

KIM B. SHOEMAKER

CONSULTING GEOLOGIST

316-684-9709 * WICHITA, KS

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

COMPANY L. D. DRILLING, Inc.

LEASE # 1-4 MAURICE

FIELD OTIS-ALBERT

LOCATION 2210' ENL & 2310' FEL

SEC 4 TWSP 19s RGE 15w

COUNTY BARTON STATE KANSAS

CONTRACTOR PETROMARK RIG 2

SPUD 8-12-2010 COMP 8-19-10

RTD 3630 LTD 3633

MUD UP 2700 TYPE MUD CHEMICAL

ELEVATIONS

KB 1981

DF _____

GL 1976

Measurements Are All From 1981 KB

CASING
SURFACE 85/2" @ 1011'
PRODUCTION 5 1/2" @ 2000'

ELECTRICAL SURVEYS
DUAL IND., DENS.-N.

SAMPLES SAVED FROM 1800-1900 2900 TO 3630

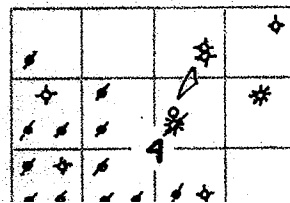
DRILLING TIME KEPT FROM 1700-1900 2800 TO 3630

SAMPLES EXAMINED FROM 1800 2800 TO 3630

GEOLOGICAL SUPERVISION FROM 1800 3000 TO 3630

GEOLOGIST ON WELL KIM B. SHOEMAKER

FORMATION TOPS	LOG	SAMPLES
ANHYDRITE		938+1043
CHASE	1836+145	1831+150
WINFIELD	1886+95	1885+96
TDPEKA	2929-948	2929-948
HEEBNER	3173-1192	3173-1192
BROWN LIME	3243-1262	3243-1262
LANSING	3251-1270	3252-1271



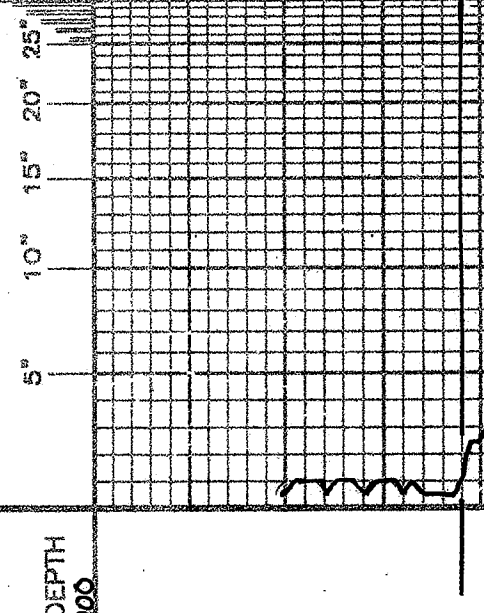
API: 15-009-25430

90' 016' 894' 746' 100' 165' 30'

LEGEND

- Anhydrite
- Salt
- Sandstone
- Shale
- Carb sh
- Limestone
- Ool. Lime
- Chert
- Dolomite

DRILLING TIME IN MINUTES
PER FOOT
Rate of Penetration Increases



SAMPLE DESCRIPTIONS

REMARKS

ANHYDRITE 938+1043

S/ANIL 9701-1011

900

700

800

Gyp. Chert. silty

SH. DE. G. PL.

Gyp. clay

SH. PL. LL. G. SILTY

CHASE 1831 + 150

Dd. 1/4. silty. V. earth. clay. V. earth. fossils
F. CL. on Bed. 16/100

Dd. G. LL. B. V. earth. silty. 10/100
F. CL.

Dd. F. silty. V. earth. silty

DST (A) 1804-1894

1500 FT. : Carboniferous 7 MM.
 2000 FT. : " " Imm. : GTS 15 MM. 2180 CFS

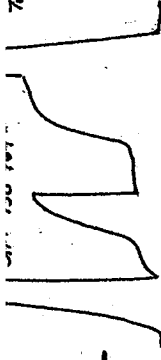
30' 45" 45-60'

Rec. 272' (11.6% 74% wt. 25' Mud)
1566 MW
SP: 16.70 99.102*

CD: 85-000

DST (A)

Temp. 99%



WINFIELD 1885-96

Det. wt. Yeastle. Sw. Gal. K. L. p. 7. Gas on brine. No. 2000

1900

2800

DOWNWARD

VIS. 76
WT. 87
ML. 76
CAL. 800

1900

Samples are Lagged

Sh. Lt. G. G. S. Silby

TOPEKA 2929-948

LS. Tan. Lt. Sil. Foss. Y. Sil. Ch. G.

LS. Red. Sil. A

LS. Tan. Lt. Y. Sil. Foss. Y. Sil. Ch. G.

LS. wt. G. G. Sil. Foss.

LS. Tan. Lt. G. G. Sil. A

3000

LS. Tan. Lt. G. G. Sil. A

1100

1200

Sh. chg.

ls. chg. sh. foss.

ls. med. shool. sh. chg.

Sh. chg.

ls. med. shool. sh. chg.

ls. med. shool. sh. chg.

Sh. chg.

ls. med. shool. sh. chg.

Sh. chg.

ls. med. shool. sh. chg. w/ DE. sh. foss. (No. 1000)

ls. med. shool. sh. chg. (No. 1000)

Sh. chg.

ls. med. shool. sh. chg. (No. 1000)

ls. med. shool. sh. chg.

ls. med. shool. sh. chg.

ls. med. shool. sh. chg.

ls. med. shool. sh. chg.

HEBNER 3173-1192

Sh. chg.

ls. med. shool. sh. chg.

ls. med. shool. sh. chg.

Sh. chg.

Sh. chg.

BROWN LIME 3293-1262

DST (2)

LANSHING 3252-1271

ls. med. shool. sh. chg. (No. 1000)

ls. med. shool. sh. chg.

ls. med. shool. sh. chg. (No. 1000)

ls. med. shool. sh. chg.

DST (2) 3246-3300

1500 ft. Bottom bucket 1/2 m

88' None

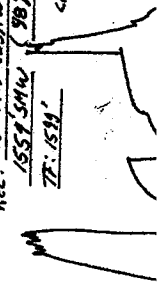
30-45-45-60

Rec. 45' NW (157' W)

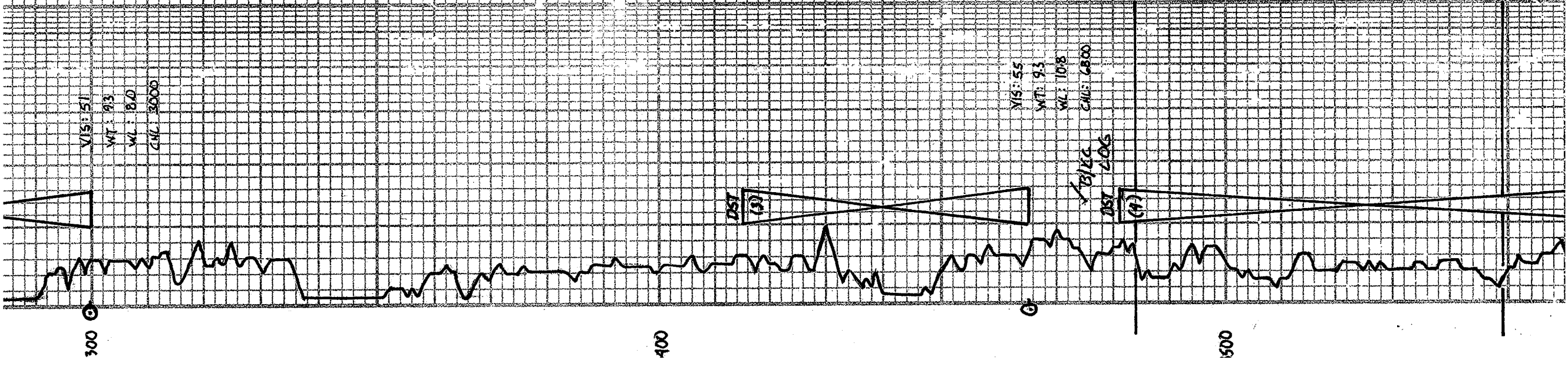
1557 SHW (987' W)

77' 1574

cm: 6800



520-761A
SIP: 902-929*



ls. Tan. Sil. Chky

ls. Red. Sil. Sand

ls. wh. sil. Sil. Chky

ls. Tan. & Br. conc. gd. m. p

ls. wh. chky

ls. wh. chky

ls. y. On.

Sl. Galy.

Sl. Galy.

ls. wh. & Br. Sil. Sand

ls. Tan. Sil. Sand. Fairly p. y. p. R. Sand. Sil. Sand. No. Sand. No. Sand.

Sl. Galy.

ls. wh. chky. conc. gd. p. p. R. Sand. Sil. Sand. No. Sand. No. Sand.

ls. wh. Sil. Fair. Sil. A

ls. Tan. Sil. Fair. Sil. Chky

B1K

3181-1503

ls. Tan. & Br. conc. gd. m. p

Sl. Galy.

Sl. Red. Galy.

Sl. Red. Galy. A Yellow. Anticorrod. Anticorrod.

Sl. wh. sil. sand

Sl. Red. Sil.

REAGAN

3519-1568

Sl. Chky. Fair. Conc. Sil. Sand. Fairly p. y. p. R. Sand. Sil. Sand. No. Sand. No. Sand.

DST (3) 3181-1503

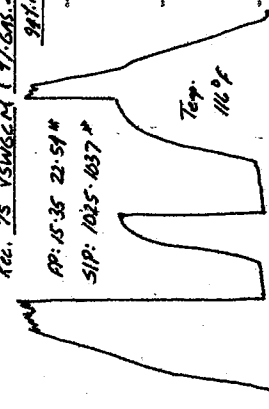
1500cc: Bottom Bucket 1 Min. 2400cc: " " 2 "

30.45.45.60

Rec. 75' VSINGGM (9' GAS. 21' WY. 987M)

PP: 15.35 21.54*

SIP: 1025-1037*



DST (1) 3181-3571

1500cc: Bottom Bucket 1 Min. 2400cc: " " 2 "

30.45.45.60

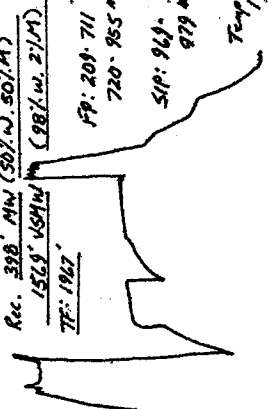
Rec. 308' MIN (50' W. 50' M) 1568' VSINGM (98' W. 2' M)

PP: 208-711

720-955*

SIP: 969-979*

Temp 129.9°



Sl. Pt. Rd. Co. On Property. P. 1st of F.M.G. Sub Pt.
Asphalt. 3500 No. 1st. VNF/D. 1941.

Sl. Pt. Rd. Co. Mill Co. Wash. F. 1st D.
No.

GRANITE WASH 3584-1603

Sh. G. Pt. Rd. Minners -

Granite etc. w/ w/ Macosta. sps.

Sh. G. Pt. Rd. w/ Min.

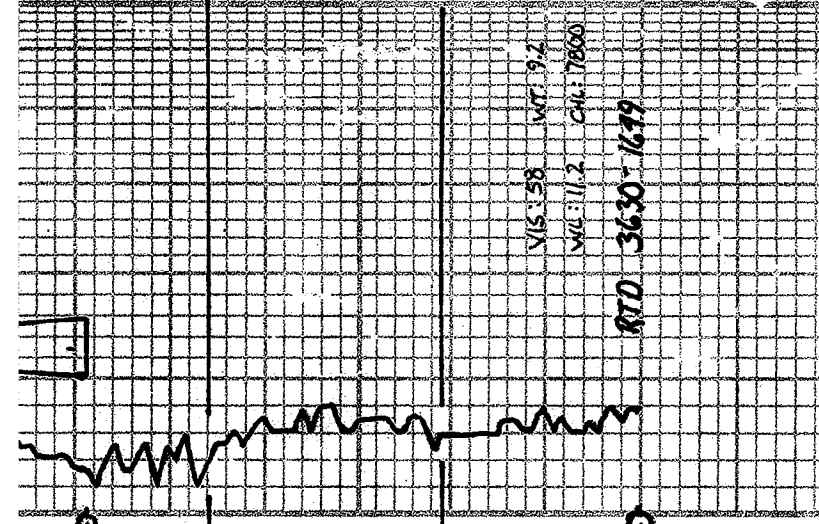
GRANITE 3601-1628

Gr. Co. Co. Dm. w/ Hill. Flakes.

600

VIS: 58 WT: 9.2
VAL: 11.2 CHL: 7800

RTD 3630-1649



DIAMOND TESTING

Drill Test Report

General Information

Company Name

Contact L.D. DAVIS
Well Name MAURICE #1-4
Unique Well ID DST#1 CHASE/WINF. 1804-1894
Surface Location SEC 4-19s-15w BARTON Co. Ks.
Field WILDCAT
Well Type Vertical

Job Number M015
Representative MIKE COCHRAN
Well Operator L.D. DRLG
Report Date 2010/08/15
Prepared By MIKE COCHRAN

Test Information

Test Type CONVENTIONAL
Formation DST#1 CHASE/WINF. 1804-1894
Well Fluid Type 02 Gas
Test Purpose (AEUB) Initial Test

Start Test Time 23:11:00
Final Test Time 07:12:00

Start Test Date 2010/08/14
Final Test Date 2010/08/15

Gauge Name 30037
Test Type Name

Test Results

RECOVERED: 30' VSOCMW 1% GAS, 69% WTR, 30% MUD
242' VSOCMW 1% GAS, 78% WTR, 28% MUD
272' TOTAL FLUID

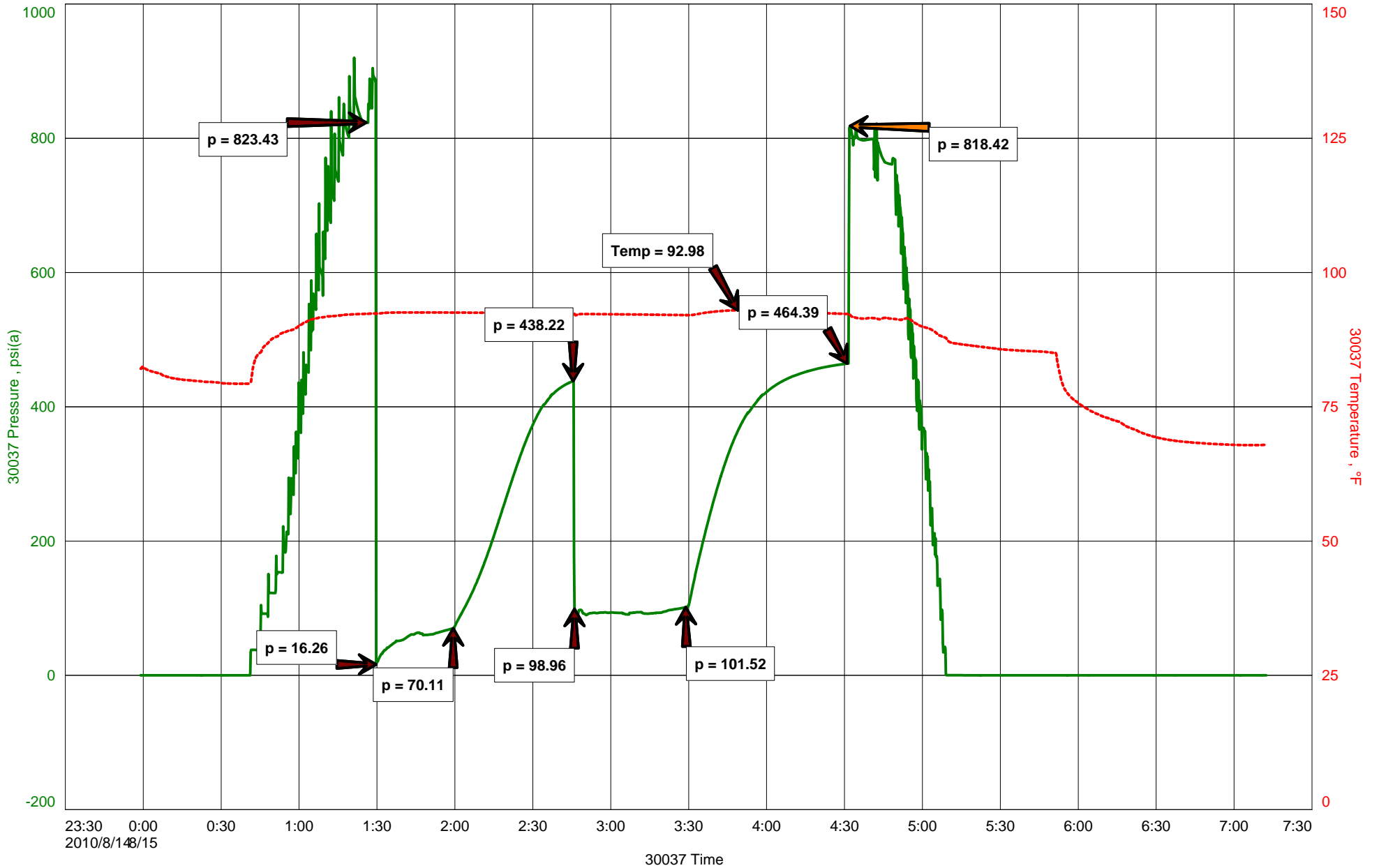
GAS TO SURFACE. 15 MIN INTO FINAL FLOW PERIOD
GAUGED @ 2,180 CF/D
GAS BURNED NICELY

PH 10.5
CHLOR 88,000
RW .07 @ 69 DEG

DST#1 CHASE/WINF. 1804-1894
Start Test Date: 2010/08/14
Final Test Date: 2010/08/15

MAURICE #1-4
Formation: DST#1 CHASE/WINF. 1804-1894
Pool: WILDCAT
Job Number: M015

MAURICE #1-4





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

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 _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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.

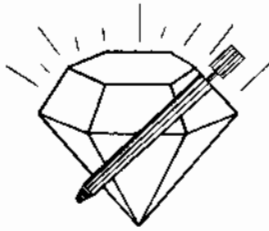
Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.
Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF 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 _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	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.



DIAMOND TESTING
 P. O. Box 157
HOISINGTON, KANSAS 67544
 (316) 653-7550
GAS VOLUME REPORT

Company L.D. DRLG Lease & Well No. MAURICE #1-4
 Date 08/15/2010 Sec. 4 Twp. 19S Rge. 15W Location _____ County BARTON State KS
 Drilling Contractor PETROMARK RIG #2 Formation CHASE/WINF. DST No. 1

Remarks: DST#1 1804-1894 30-45-45-60
GAS TO SURFACE 15 MIN INTO 2ND OPENING. GAUGED@ 2,180 CF/D. GAS BURNED NICELY

INITIAL FLOW PSI

Time O'Clock	Orifice Size	Gauge	CF/D
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	

FINAL FLOW INCHES OF WATER

Time O'Clock	Orifice Size	Gauge	CF/D
3:05 A.M.	1.000 in.	TSTM in.	TSTM
3:10 A.M.	0.125 in.	⁹ OZ/IN. SQ. in.	1,590
3:20 A.M.	0.125 in.	9 in.	1,590
3:25 A.M.	0.125 in.	14 in.	1,980
3:30 A.M.	0.125 in.	17 in.	2,180
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	

SAMPLE TAKEN -YES

FINAL FLOW---- 17 OZ/SQ IN.

DIAMOND TESTING

Drill Test Report

General Information

Company Name L.D. DRLG

Contact L.D. DAVIS
Well Name MAURICE #1-4
Unique Well ID DST#2 LANS. A & B 3246-3300
Surface Location SEC 4-19s-15w BARTON Co. Ks.
Field WILDCAT
Well Type Vertical

Job Number M016
Representative MIKE COCHRAN
Well Operator L.D. DRLG
Report Date 2010/08/17
Prepared By MIKE COCHRAN

Test Information

Test Type CONVENTIONAL
Formation DST#2 LANS. A & B 3246-3300
Well Fluid Type 01 Oil
Test Purpose (AEUB) Initial Test

Start Test Time 04:41:00
Final Test Time 12:43:00

Start Test Date 2010/08/17
Final Test Date 2010/08/17

Gauge Name 30037
Test Type Name

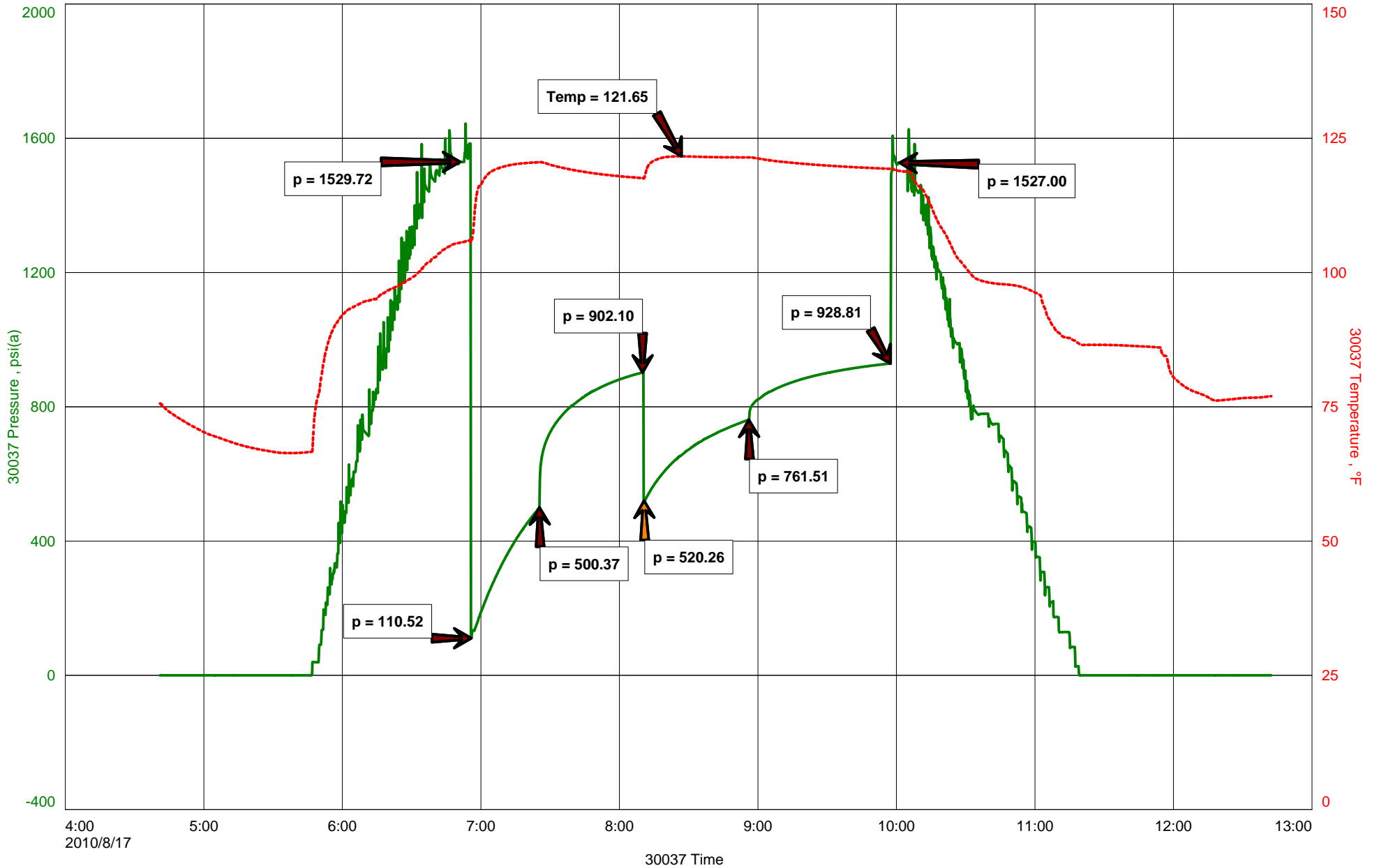
Test Results

RECOVERED: 45' OF MW, 65% WTR, 35% MUD
1449' OF MW, 98% WTR, 2% MUD
105' OF MW, 97% WTR, 3% MUD
15' MUD
1614' TOTAL FLUID

TOOL SAMPLE: 98 1/2% WTR, 1 1/2% MUD

PH 8.5
CHLOR 68,000 Ppm
RW .06@75 DEG.

MAURICE #1-4





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

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 _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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 STERLING 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 _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	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.



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

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 _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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 STERLING 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 _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	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.

DIAMOND TESTING

Drill Test Report

General Information

Company Name L.D. DRLG

Contact L.D. DAVIS
Well Name MAURICE #1-4
Unique Well ID DST#3 L/KC I.J. 3415-3465
Surface Location SEC 4-19s-15w BARTON Co. Ks.
Field WILDCAT
Well Type Vertical

Job Number M017
Representative MIKE COCHRAN
Well Operator L.D. DRLG
Report Date 2010/08/18
Prepared By MIKE COCHRAN

Test Information

Test Type CONVENTIONAL
Formation DST#3 L/KC I.J. 3415-3465
Well Fluid Type 01 Oil
Test Purpose (AEUB) Initial Test

Start Test Time 23:25:00
Final Test Time 06:51:00

Start Test Date 2010/08/17
Final Test Date 2010/08/18

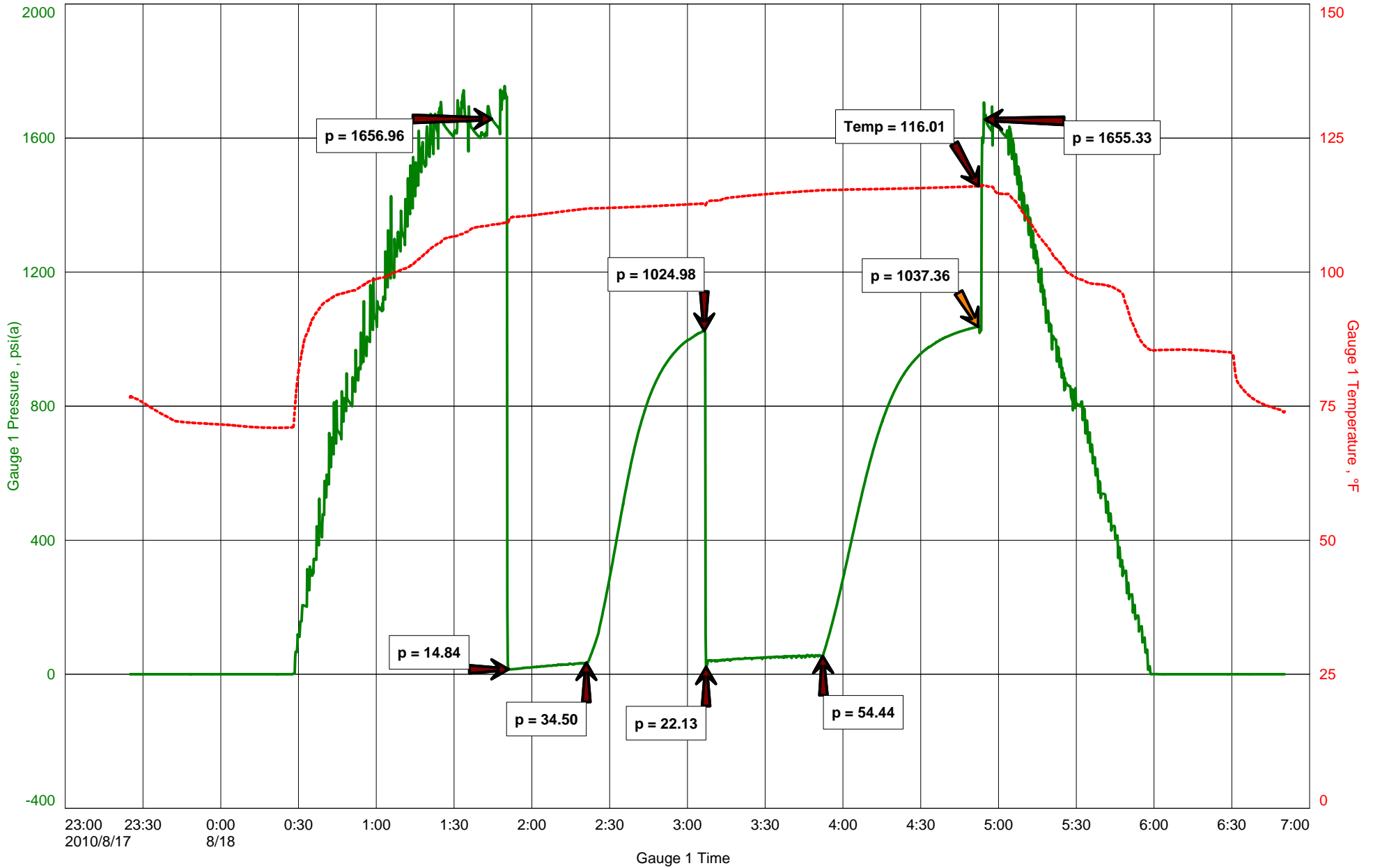
Gauge Name Gauge 1
Test Type Name

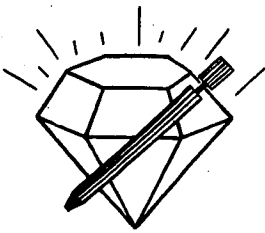
Test Results

RECOVERED: 75' GWCM 4% GAS, 2% WTR, 94% MUD
75' TOTAL FLUID

TOOL SAMPLE: 1% GAS, 27% WTR, 72% MUD, LIGHT SCUM OF OIL

MAURICE #1-4





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
STC 30037.D018

Company L. D. Drilling, Inc. Lease & Well No. Maurice No. 1-4
Elevation 1981 KB Formation Reagan Effective Pay -- Ft. Ticket No. M018
Date 8-18-10 Sec. 4 Twp. 19S Range 15W County Barton State Kansas

Test Approved By Kim B. Shoemaker Diamond Representative Michael Cochran

Formation Test No. 4 Interval Tested from 3,481 ft. to 3,571 ft. Total Depth 3,571 ft.
Packer Depth 3,476 ft. Size 6 3/4 in. Packer Depth -- ft. Size -- in.
Packer Depth 3,481 ft. Size 6 3/4 in. Packer Depth -- ft. Size -- in.
Depth of Selective Zone Set ft.

Top Recorder Depth (Inside) 3,468 ft. Recorder Number 30037 Cap. 5,000 psi
Bottom Recorder Depth (Outside) 3,568 ft. Recorder Number 13386 Cap. 3,875 psi
Below Straddle Recorder Depth ft. Recorder Number Cap. psi

Drilling Contractor Petromark Drilling, LLC - Rig 2 Drill Collar Length 120 ft. I.D. 2 1/4 in.
Mud Type Chemical Viscosity 52 Weight Pipe Length -- ft. I.D. -- in.
Weight 9.3 Water Loss 10.8 cc. Drill Pipe Length 3,397 ft. I.D. 3 1/2 in.
Chlorides 6,800 P.P.M. Test Tool Length 27 ft. Tool Size 3 1/2 - IF in.
Jars: Make Sterling Serial Number Not Run Anchor Length 27' perf. w/ 63' drill pipe Size 4 1/2 - FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2 - XH in.

Blow: 1st Open: Good, surface blow. Off bottom of bucket in 1 min. Weak, 1/8 in., blow off bottom of bucket during shut-in.
2nd Open: Fair, surface blow. Off bottom of bucket in 2 mins. No blow back during shut-in.

Recovered 398 ft. of muddy water = 5.663540 bbls. (Grind out: 50%-mud; 50%-water)
Recovered 1,449 ft. of very slightly mud cut water = 20.619270 bbls. (Grind out: 2%-mud; 98%-water)
Recovered 120 ft. of very slightly mud cut water = 5.90400 bbls. (Grind out: 2%-mud; 98%-water)
Recovered 1,967 ft. of TOTAL FLUID = 26.873210 bbls.
Recovered ft. of

Remarks Tool Sample Grind Out: 1%-mud; 99%-water Chlorides: 68,000 Ppm
PH: 7.5
RW: .10 @ 70°

Time Set Packer(s)	<u>7:10</u> XXX P.M.	Time Started Off Bottom	<u>10:10</u> XXX P.M.	Maximum Temperature	<u>129°</u>
Initial Hydrostatic Pressure	(A)	<u>1734</u>	P.S.I.		
Initial Flow Period	Minutes	<u>30</u>	(B)	<u>209</u>	P.S.I. to (C) <u>711</u> P.S.I.
Initial Closed In Period	Minutes	<u>45</u>	(D)	<u>969</u>	P.S.I.
Final Flow Period	Minutes	<u>45</u>	(E)	<u>720</u>	P.S.I. to (F) <u>955</u> P.S.I.
Final Closed In Period	Minutes	<u>60</u>	(G)	<u>979</u>	P.S.I.
Final Hydrostatic Pressure	(H)	<u>1720</u>	P.S.I.		

DIAMOND TESTING

General Information

Company Name L.D. DRLG

Contact L.D. DAVIS
Well Name MAURICE #1-4
Unique Well ID DST#4 REAGAN 3481-3571
Surface Location SEC 4-19s-16w BARTON Co. Ks.
Field WILDCAT
Well Type Vertical

Job Number M018
Representative MIKE COCHRAN
Well Operator L.D. DRLG
Report Date 2010/08/19
Prepared By MIKE COCHRAN

Test Information

Test Type CONVENTIONAL
Formation DST#4 REAGAN 3481-3571
Well Fluid Type 01 Oil
Test Purpose (AEUB) Initial Test

Start Test Time 17:00:00
Final Test Time 01:50:00

Start Test Date 2010/08/18
Final Test Date 2010/08/19

Gauge Name 30037
Test Type Name

Test Results

RECOVERED: 398' OF MW 50% WTR, 50% MUD
1449' OF VSMCW 98% WTR, 2% MUD
120' OF VSMCW 98% WTR, 2% MUD
1967' TOTAL FLUID

TOOL SAMPLE: 99% WTR, 1% MUD

PH 7.5
CHLOR 68,000 Ppm
RW .1 @ 70 DEG.

MAURICE #1-4
Formation: DST#4 REAGAN 3481-3571
Pool: WILDCAT
Job Number: M018

DST#4 REAGAN 3481-3571
Start Test Date: 2010/08/18
Final Test Date: 2010/08/19

MAURICE #1-4

