



KANSAS CORPORATION COMMISSION 1050025  
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: \_\_\_\_\_



1050025

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
<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:  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

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<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> _____	_____ _____

Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	ROBERT 1-2
Doc ID	1050025

Tops

Name	Top	Datum
ANHYDRITE	1014	+992
BASE ANHYDRITE	1043	+963
HEEBNER	3345	-1339
TORONTO	3362	-1356
DOUGLAS	3372	-1366
BROWN LIME	3436	-1430
LANSING	3450	-1444
BASE KANSAS CITY	3684	-1678
VIOLA	3706	-1700
SIMPSON SHALE	3744	-1738
ARBUCKLE	3775	-1769
RTD	3780	-1774

## GENERAL INFORMATION

### Client Information:

Company: L D DRILLING INC

Contact: L D DAVIS

Phone: Fax: e-mail:

### Site Information:

Contact: JOSH AUSTIN

Phone: Fax: e-mail:

### Well Information:

Name: ROBERT 1-4

Operator: L D DRILLING INC

Location-Downhole:

Location-Surface: S2/21S/16W BARTON CTY

### Test Information:

Company: DIAMOND TESTING

Representative: JOHN RIEDL

Supervisor: JOSH AUSTIN

Test Type: CONVENTIONAL Job Number: D804

Test Unit:

Start Date: 2010/08/26 Start Time: 05:45:00

End Date: 2010/08/26 End Time: 12:30:00

Report Date: 2010/08/26 Prepared By: JOHN RIEDL

Qualified By: JOSH AUSTIN

### Remarks:

200' SLO+GCWM, 300' G+MCW,750' WATER TOTAL FLUID REC: 1250'  
GTS 2ND FLOW: GUAGED 7,120 CF/D



# DIAMOND TESTING

P.O. Box 157

HOISINGTON, KANSAS 67544

(620) 653-7550 • (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 \_\_\_\_\_  
 Test Approved By \_\_\_\_\_ Diamond Representative **JOHN C. RIEDL**

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: \_\_\_\_\_

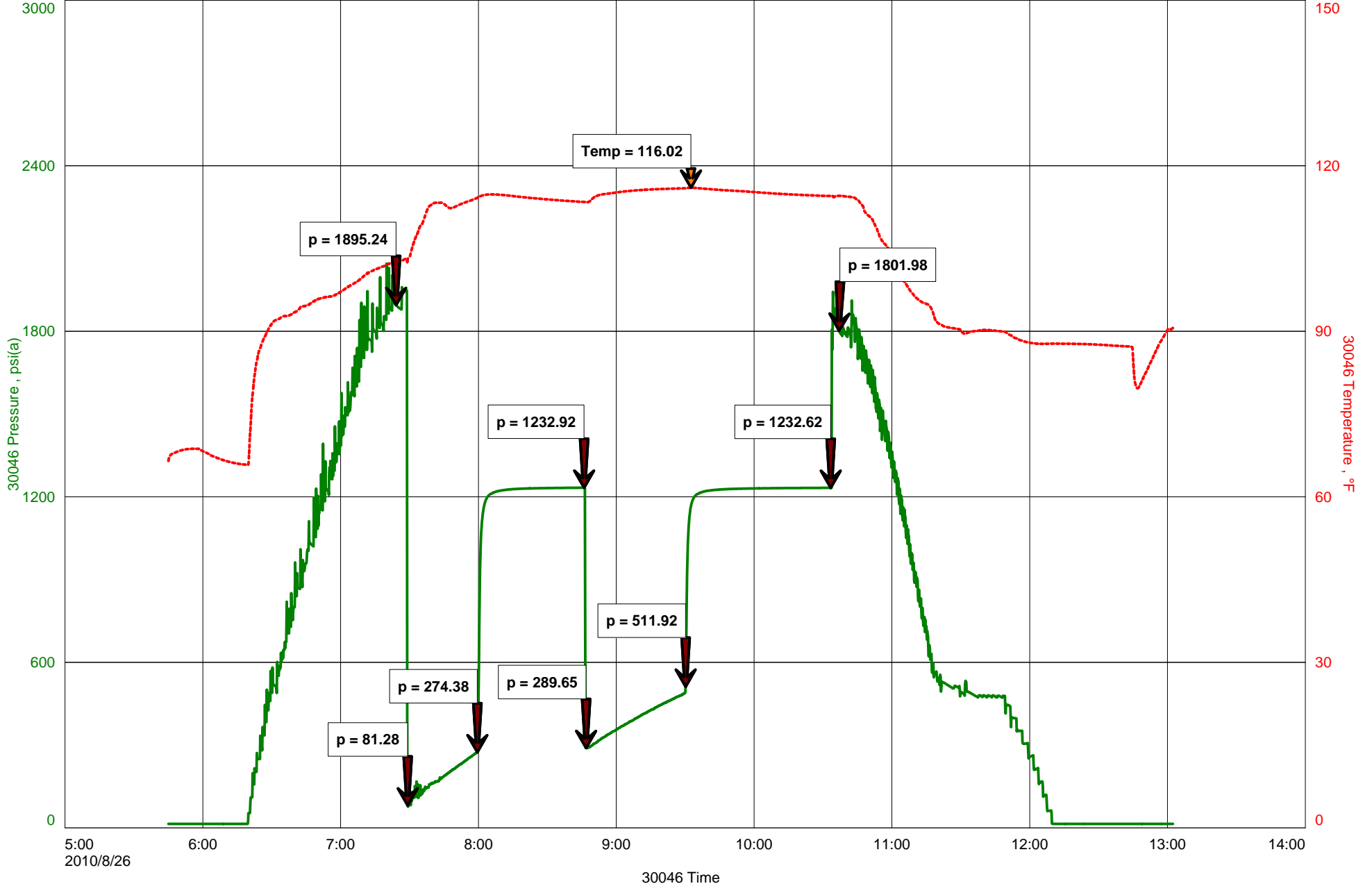
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

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.

# ROBERT 1-4





**BASIC**<sup>SM</sup>  
**ENERGY SERVICES**  
 PRESSURE PUMPING & WIRELINE

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

**FIELD SERVICE TICKET**  
 1718 02374 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB 08-22-10 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 Inc		LEASE Robert 1-2 WELL NO.								
ADDRESS		COUNTY Pawnee STATE KS								
CITY STATE		SERVICE CREW Sullivan, Nelson, Phye								
AUTHORIZED BY		JOB TYPE: CW & 3/8 Surface								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
33708-20920	50 min						08-22-10			12:00
19960-19860	50 min									02:30
19867										09:15
						RELEASED	08-22-10			09:30
						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: Jim Malle  
 (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 101	A-COD Blend cmf	SK	200		3,600.00
CP 100	common	SK	200		3,200.00
CC 102	cellfak	LB	100		370.00
CC 109	Calcium chloride	LB	940		987.00
CF 105	TOP Rubber Plug 8 3/8	EA	1		225.00
E 100	pickup miles	mi	65		276.25
E 101	Heavy Equip. mile	mi	130		910.00
E 113	Bulk Delivery	TM	1220		1,953.20
CE 202	Depth change 1000-2000'	EA	1		1,500.00
CE 240	Blend-mix change	SK	400		560.00
CE 504	plug constant Rental	EA	1		250.00
SC03	Schwie Supermax	EA	1		175.00

SUB TOTAL

CHEMICAL / ACID DATA:			

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

*Thank you*

TOTAL **9,105.49**

*DLS*

SERVICE REPRESENTATIVE Robert Sullivan

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Jim Malle  
 (WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer <i>L. D. Doolley</i>	Lease No.	Date <i>08-22-10</i>	
Lease <i>Robert</i>	Well # <i>1-2</i>		
Field Order # <i>2374</i>	Station <i>Pratt</i>	Casing <i>8 7/8</i>	Depth <i>1055</i>
Type Job <i>CNW 8 7/8 Surface</i>		County <i>Lawrence</i>	State <i>KS</i>
Formation		Legal Description <i>2-21-16</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>8 7/8</i>								
Depth <i>1055</i>	Depth	From	To	Pre Pad	Max		5 Min.	
Volume <i>65</i>	Volume	From	To	Pad	Min		10 Min.	
Max Press <i>250</i>	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection <i>PC</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <i>1050</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert J. Jellison</i>
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Service Units	<i>19867</i>	<i>33708</i>	<i>20920</i>	<i>19960</i>	<i>19860</i>				
Driver Names	<i>Sullivan</i>	<i>Melson</i>	<i>Plye</i>						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>0245</i>					<i>ON for Sat. meet</i>
					<i>Run 25 sts 8 7/8 #24 csp.</i>
<i>0800</i>					<i>CASING ON BOTTOM</i>
<i>0815</i>					<i>HOOK UP TO CIR.</i>
<i>0825</i>			<i>5</i>	<i>4</i>	<i>At SPACER</i>
			<i>91</i>	<i>5.5</i>	<i>mix leadent 200sk A-CON</i>
			<i>43</i>		<i>mix tail cnt 200sk comm</i>
					<i>shut down Release plug</i>
<i>0853</i>				<i>5.5</i>	<i>At Disp</i>
<i>0915</i>			<i>65</i>		<i>plug down</i>
					<i>circulated 30 BBL cnt to Pit</i>
					<i>job complete</i>
					<i>Thank you</i>





Customer <i>L.O. Drilling Inc</i>	Lease No.	Date <i>08-26-10</i>	
Lease <i>Robert</i>	Well # <i>1-2</i>		
Field Order # <i>2530</i>	Station <i>PRATT</i>	Casing <i>OP</i>	Depth
Type Job <i>CNW P.T.H</i>	Formation	County <i>Pawnee</i>	State <i>KS</i>
		Legal Description <i>2-21-16</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
Depth	Depth	From	To	Pre Pad	Max		5 Min.	
Volume	Volume	From	To	Pad	Min		10 Min.	
Max Press	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	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Lelland</i>
-------------------------	--------------------------------------	----------------------------------

Service Units	<i>19867</i>	<i>19959</i>	<i>19842</i>	<i>19826</i>	<i>19918</i>				
Driver Names	<i>Scotton</i>	<i>Jesley</i>	<i>Whitlow</i>	<i>Mitnick</i>	<i>Barb</i>				

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>1600</i>					<i>on for softening meeting</i>
					<i>P.T.A.</i>
					<i>Bottom Plug @ 3600'</i>
<i>1635</i>	<i>200</i>		<i>10</i>	<i>45</i>	<i>SPACER</i>
<i>1645</i>			<i>14</i>	<i>1</i>	<i>mix cmt 50 sk 60/40 PZ</i>
<i>1655</i>			<i>3</i>		<i>SPACER</i>
			<i>44</i>		<i>MOD</i>
					<i>Set Plug 1080'</i>
<i>1750</i>			<i>10</i>		<i>SPACER</i>
<i>1800</i>			<i>14</i>	<i>1</i>	<i>cmt 50 sk 60/40 PZ</i>
			<i>12</i>		<i>DISP</i>
	<i>2</i>				<i>Set Plug @ 360'</i>
<i>1817</i>	<i>200</i>		<i>10</i>		<i>SPACER</i>
<i>1825</i>			<i>14</i>	<i>1</i>	<i>mix cmt 50 sk</i>
<i>1835</i>			<i>5</i>		<i>Disp</i>
<i>1840</i>			<i>6</i>	<i>3</i>	<i>Plug TOP 60' w/ 20 sk</i>
			<i>4</i>	<i>3</i>	<i>plug R.H w/ 20 sk</i>
					<i>Job Complete</i>
					<i>Thank you</i>



James C. Musgrove  
Petroleum Geologist

Office  
(620) 588-4250

212 Main St. • P.O. Box 215 • Claflin, KS 67525

Home  
(620) 587-3444

# GEOLOGIST'S REPORT

## DRILLING TIME AND SAMPLE LOG

COMPANY L.D. Drilling Inc

LEASE Robert #1-2

FIELD Ash Creek

LOCATION Se-Nw-Ne (990' FNL; 1650' FEL)

SEC 2 TWSP 21 RGE 16

COUNTY Pawnee STATE Kansas

CONTRACTOR Petromark Drilling, LLC

SPUD 8-21-2010 COMP 8-26-2010

RTD 3780 LTD \_\_\_\_\_

MUD UP 2794 TYPE MUD Chemical Displaced

### ELEVATIONS

KB 2006'

DF \_\_\_\_\_

GL 2001'

Measurements Are All  
From KB

CASING  
SURFACE 8 5/8" @ 1055'  
PRODUCTION D/A

### ELECTRICAL SURVEYS

- None -

SAMPLES SAVED FROM 3200 TO 3780

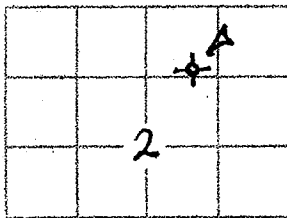
DRILLING TIME KEPT FROM 3200 TO 3780 RTD

SAMPLES EXAMINED FROM 3200 TO 3780

GEOLOGICAL SUPERVISION FROM 3370 TO 3780

GEOLOGIST ON WELL Josh Austin

FORMATION TOPS		SAMPLES
Anhydrite	1014	
Base Anhy	1043	
Heebner	3345	-1339
Toronto	3362	-1356
Douglas	3372	-1366
Brown lime	3436	-1430
Lansing	3450	-1444
	2784	-1678



The Roberts #1-2 was plugged and abandoned at the  
RTD 3780 - 1774.

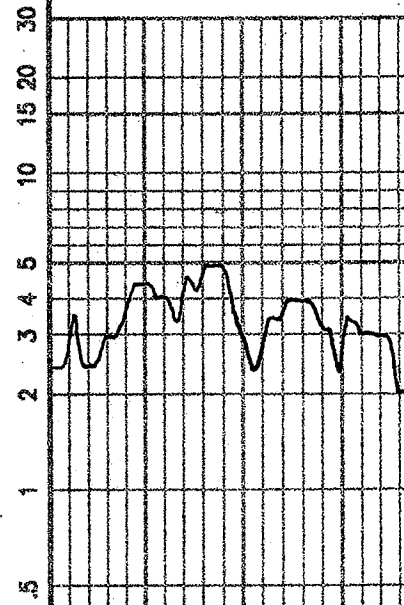
Respectfully submitted,

*Josh R. Austin*  
Petroleum Geologist

### LEGEND

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

DRILLING TIME  
Logarithmic Scale)



### SAMPLE DESCRIPTIONS

26: Tan-grey fine coarse sand / by proc. vis. 1/3

25: Tan-grey fine coarse cherty / by proc. vis. 1/3

### REMARKS

face grey - blk sh.

ls: cream-grey fxl slightly  
foss poorly dev. 1/3



blk carb shale

ls: cream buff fxl cherty  
green fxl foss/ool Scott's  
p.p.p. to Johnstone str (191) 1/360  
No color

ls: cream-tan fxl dense Ay

blk carb shale

grey - greyish green silty sh.

ls: tan-cream fxl 500 slightly  
decoloration by dense 1/3

shale, grey - greyish green soft  
slightly silty few mica

shale a a

greyish green-grey silty mica sh.

shale: grey - blk grey - greyish  
green soft silty mica

ls: tan-brown fxl dense  
Ay

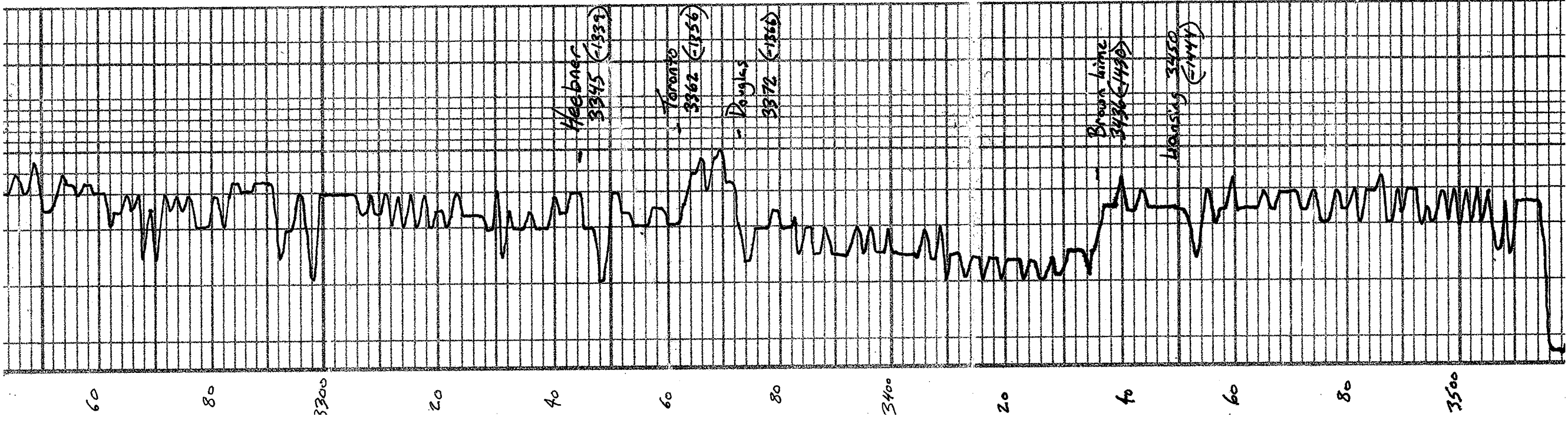
ls: blk-cream fxl fine ool cherty  
to ruggy 1/3

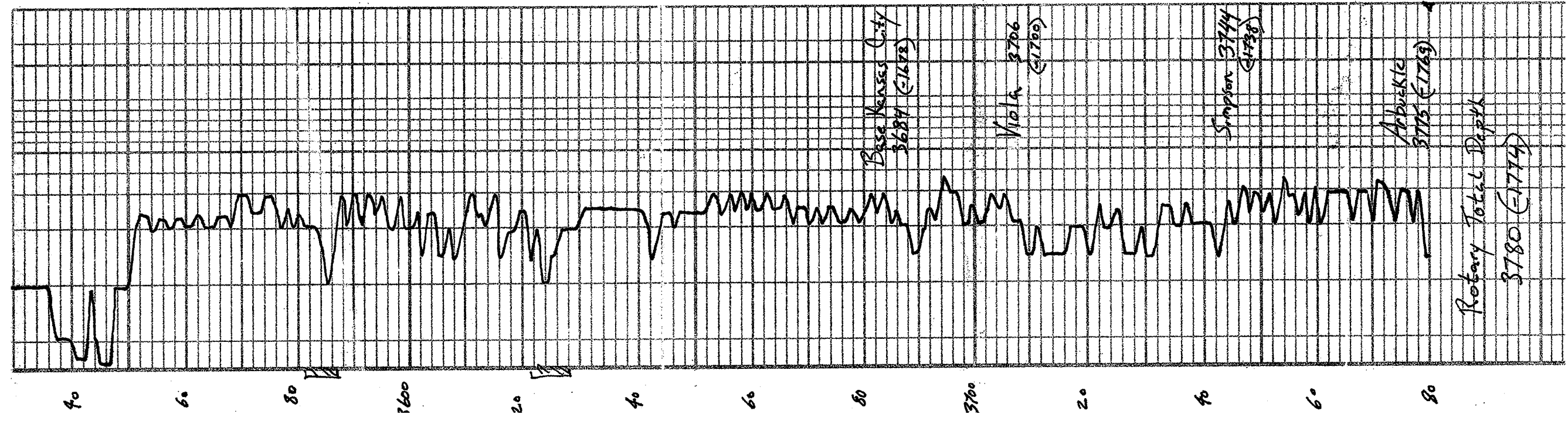
ls: cream-thick grey fxl cherty  
(den) poorly dev. 1/3

ls: tan-cream highly foss/ool in  
Best poor vis. cherty 1/3

ls: blk-cream fxl cherty dense  
slightly 1/3

ls: tan-cream ool 1/3





LS. Cream-ht grey cream, fringed  
 / carbonate (Chocoma)

LS. Cream-buff slightly calc  
 dense sh, fr grey argonaceous

LS. cream-tan fine cherty  
 few scatt'd dense in part  
 + cherty N/S

LS. Cream-Tan  
 fine green dense scatt' fossilifer,  
 fr grey bony A  
 grey-green shale

LS. Cream-ht grey fine cherty  
 dense poor vis. N/S  
 /  
 L.S.A. abundant w/ cherty

LS. Cream-Tan fine cherty dense  
 slightly fossiliferous dense N/S  
 /  
 Grey-green shale silty in  
 part; shale

Chert. wh-cream bony  
 few breasted fr-sum; top  
 blk edge strong - blk sh. N/S  
 no odor

Chert a.a., bony, of grey

Grey - greyish green - mar sh  
 Shale a.a.  
 to Sand. Cream. Breasted, fine grained  
 fairly scatt' fossils. shale inclusions  
 fr blk sh. N/S no odor

obolite wh-cream tan fine sh. chert  
 no fossiliferous sh. N/S  
 fr. sh. N/S

DST #1 3740-3780  
 30 - 45 - 45 - 60  
 Blow strong OBB in 1 min  
 Strong blow back  
 Fine. Strong OBB in 4 min. GTS  
 Strong blow back in 20 min

Recovery 200' sl: 0.8 g/cm  
 (5% oil 10% gas 25% water-50% mud)  
 300' 9.8 m.c.w  
 trace of oil  
 750' water

Pressure: T.C.O 1232 PSI

FSIP 1232 N	IFP 81-274 "	FFP 290-512 "	HSH 1998	- 1102	Gas saved 7,120 CF/D											
[Vertical lines]																
[Grid]																

