

Diamond Testing

General information Report

General Information

Company Name MULL DRILLING COMPANY, INC.

Contact	ERNIE MORRISON	Job Number	
Well Name	WATERSON 'A' #1-17	Representative	ROGER D. FRIEDLY
Unique Well ID	DST #3 LANS 'L' 4,290' - 4,340'	Well Operator	MULL DRILLING COMPANY, INC.
Surface Location	SEC 17-17S-27W LANE COUNTY, KS	Report Date	
Well License Number		Prepared By	ROGER D. FRIEDLY
Field	WILDCAT		
Well Type	Vertical		

Test Type	CONVENTIONAL	Start Test Time	21:15:00
Formation	DST #3 LANS 'L' 4,290' - 4,340'	Final Test Time	05:18:00
Well Fluid Type	01 Oil		
Start Test Date	2010/10/06		
Final Test Date	2010/10/07		
Gauge Name	1150		
Gauge Serial Number			

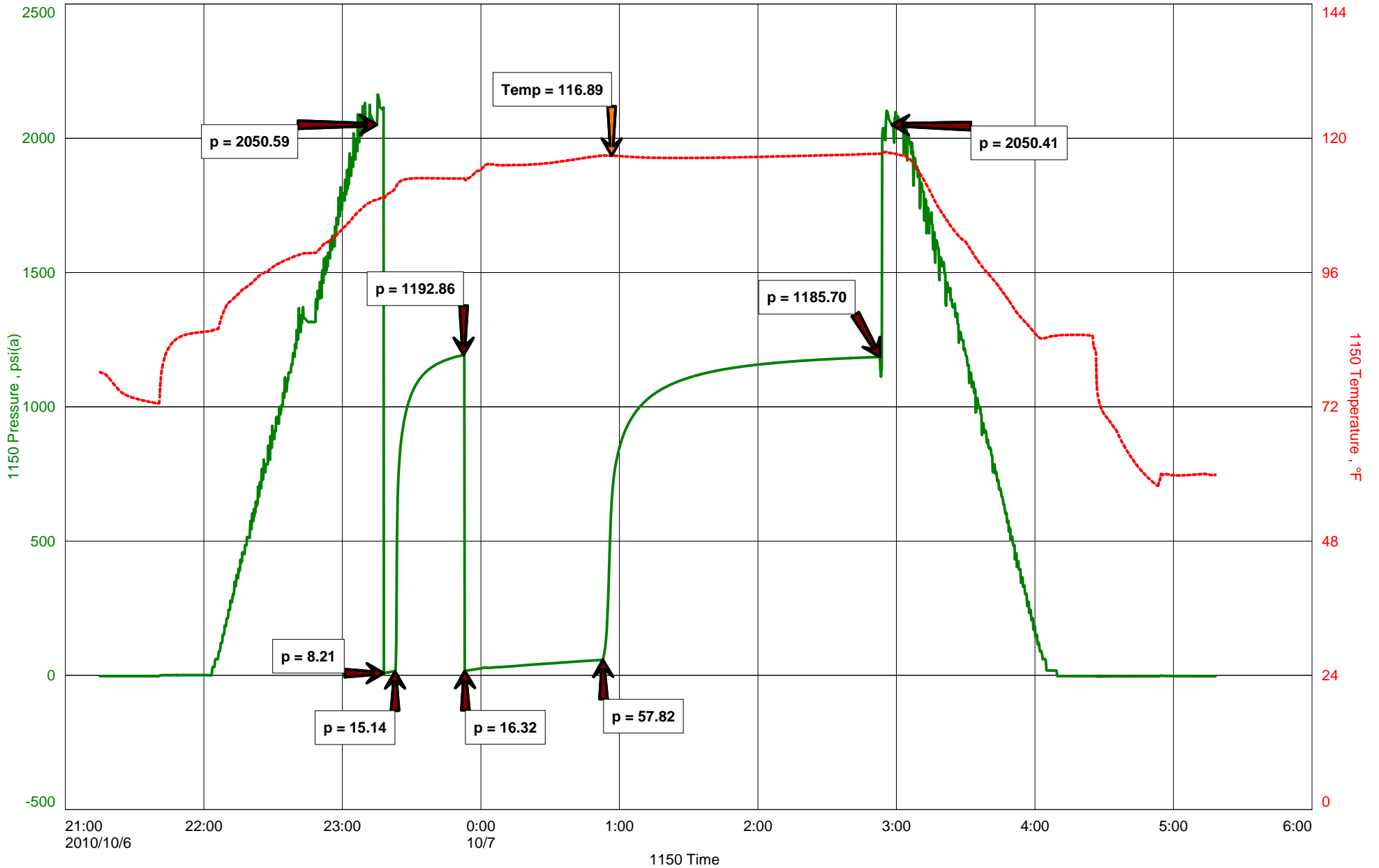
Test Results

RECOVERED: 45' OCWM 2% OIL, 28% WTR, 70% MUD
62' MW 57% WTR, 43% MUD
107' TOTAL FLUID

TOOL SAMPLE: 2% OIL, 26% WTR, 72% MUD

CHLORIDES: 42,500 Ppm
PH: 7.0
RW: .17 @ 67 deg

WATERSON 'A' #1-17





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.