



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: _____



1051574

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	L. D. Drilling, Inc.
Well Name	IRVIN 1-35
Doc ID	1051574

Tops

Name	Top	Datum
TOPEKA	2809	-975
HEEBNER	3100	-1266
BROWN LIME	3233	-1399
LANSING	3255	-1421
BASE KANSAS CITY	3485	-1651
VIOLA	3508	-1674
SIMPSON	3532	-1698
ARBUCKLE	3578	-1744



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

0040245810

FIELD SERVICE TICKET

1718 02684 A

DATE _____ TICKET NO. _____

DATE OF JOB 10-26-10 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 IRVIN #1-35 WELL NO.							
ADDRESS		COUNTY Stafford 35-12-21 STATE KANSAS							
CITY STATE		SERVICE CREW A. Worth							
AUTHORIZED BY		JOB TYPE: 8 5/8" Surface <i>SNW</i>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
28443 PU	1						10-26-10	PM	1200
33708-20920	1					ARRIVED AT JOB	10-26-10	PM	300
19959-21010	1					START OPERATION	10-26-10	PM	400
						FINISH OPERATION	10-26-10	PM	500
						RELEASED	10-26-10	PM	530
						MILES FROM STATION TO WELL 4.5 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	
CP101	A-con Blend	SK	175		\$ 3150.00	
CP100	Common	SK	200		\$ 3200.00	
CC102	cell Flake	lb	94		\$ 347.80	
CC109	Calcium Chloride	lb	10.59		\$ 111.96	
CC200	Cement Gel	lb	37.5		\$ 94.00	
CF153	Wooden cement Plug 8 5/8"	EA	1		\$ 160.00	
E100	Unit mileage charge Pickup	mi	45		\$ 191.25	
E101	Heavy Equip mileage	mi	90		\$ 630.00	
E113	Bulk Delivery Charge	Ton	74		\$ 1270.80	
CB200	Depth Charge 0'-500'	4-hrs	1		\$ 1000.00	
CB240	Blending & mixing Service Charge	SK	375		\$ 525.00	
CB504	Plug Container Utilization Charge	Job	1		\$ 252.00	
S002	Service Supervisor first 8hrs on loc.	EA	1		\$ 1750.00	
					SUB TOTAL	16847.06
					SERVICE & EQUIPMENT	%TAX ON \$
					MATERIALS	%TAX ON \$
					TOTAL	8474.06

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		8474.06

SERVICE REPRESENTATIVE *Alan F. Worth* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Lu B. Speckle*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____

BASIC

energy services, L.P.

TREATMENT REPORT

Customer <i>L.D. Drilling Inc</i>	Lease No.	Date <i>10-26-10</i>	
Lease <i>IRVIN</i>	Well # <i>1-35</i>	County <i>Stafford</i> State <i>KANS</i>	
Field Order # <i>02684A</i>	Station <i>Pratt KS</i>	Casing " <i>8 5/8</i>	Depth <i>348</i>
Type Job <i>8 5/8 SURFACE</i>	Formation <i>CNW</i>	Legal Description <i>T0348 35-21-12</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>8 5/8</i>			<i>175SK</i>	<i>A-con @ 12.6#</i>				
Depth <i>348</i>	Depth	From	To	Pre Pad	Max		5 Min	
Volume <i>20.836</i>	Volume	From	To	Pad	Min		10 Min.	
Max Press <i>300#</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>32.8</i>	Packer Depth	From	To	Flush <i>Disp H2O</i>	Gas Volume		Total Load	

Customer Representative	Station Manager <i>scotty</i>	Treater <i>Allen F. Werth</i>
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Service Units <i>28443</i>	<i>33706</i>	<i>20920</i>	<i>19959</i>	<i>2106</i>					
Driver Names <i>A. Werth</i>	<i>Steve</i>	<i>Orlando</i>	<i>BRAD</i>						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>300</i>					<i>ON Loc. Discuss Safety, Setup, Plan Job</i>
<i>315</i>					<i>Pulling Collars out of Hole</i>
<i>330</i>					<i>out of Hole w/ bit</i>
<i>345</i>					<i>start 8 5/8 casing 24#</i>
<i>420</i>					<i>casing @ 348' Hookup cir w/ Rig</i>
<i>430</i>	<i>100#</i>		<i>66</i>	<i>5</i>	<i>start mix 175SKs A-con @ 12.6#</i>
)			<i>5</i>	<i>start mix 2008ks common with</i>
			<i>48</i>		<i>2% gel, 3% CC, 1/4# cell make 15</i>
<i>450</i>				<i>5</i>	<i>Finish mix - Prop 8 5/8 wooden Plug.</i>
<i>500</i>	<i>300#</i>		<i>21</i>	<i>3</i>	<i>start Disp</i>
					<i>Plug down - Shut in @ well</i>
					<i>Release PSI.</i>
					<i>Washup + Rackup Equip.</i>
					<i>Job complete.</i>

(ent cir. To Pit)

*Thanks Allen, Steve
Brad*

Taylor Printing, Inc. 620-672-3658



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 02794 A

DATE _____ TICKET NO. _____

DATE OF JOB: 10-31-10	DISTRICT: PRATT, KS	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: LID DRILLING	LEASE: IRVIN	WELL NO. 1-35								
ADDRESS:	COUNTY: STAFFORD	STATE: KS								
CITY:	STATE:	SERVICE CREW: KG, LUCAS, DME								
AUTHORIZED BY:	JOB TYPE: CNW - LOWESTIRING									
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
19907							10-31			1600
						ARRIVED AT JOB				1830
27463	1/2					START OPERATION				2230
19960	1/2					FINISH OPERATION				2330
19918						RELEASED				2400
						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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP103	60/40 Pz2	150 SK			1800.00
CP103	60/40 Pz2	30 SK			360.00
CC102	CELLULASE	38 lb.			140.60
CC111	SVA21	1334 lb.			667.00
CC112	CFR	65 lb.			390.00
CC201	GLYSOWATE	750 lb.			502.50
CE103	5/8" TOP RUBBER PLUG	1 EACH			105.00
CE251	5/8" GUIDE STOPS	1 EACH			250.00
CE1451	5/8" 1451 DUSTY PLUGS	1 EACH			215.00
CE1651	5/8" TURBOLIZER	5 EACH			550.00
C704	CS-1L KCL	1 gal			35.00
CC151	MUD FISH	500 gal			430.00
E100	PICKUP MILE	45 mile			191.25
E101	TRUCK MILE	90 mile			630.00
E113	BULL DELIVERY	349 TM			558.00
CE204	PUMP CHANGE	1 EACH			2160.00
CE240	BLEND CHANGE	180 SK			252.00
CE504	PLUG CONTAINER	1 EACH			250.00
5003	SEW RE SUPERWISOL	1 EACH			175.00
SUB TOTAL					

CHEMICAL / ACID DATA:			

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

6473.10

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

Customer <i>LD DRILLING</i>	Lease No.	Date <i>10-31-10</i>
Lease <i>IRVIN</i>	Well # <i>1-35</i>	
Field Order # <i>2144</i>	Station <i>PRATT KS</i>	Casing <i>5 1/2</i>
Type Job <i>CNW - LONG STRING</i>	Depth <i>3684</i>	County <i>STAFFORD</i>
	Formation <i>TD - 3690'</i>	State <i>KS</i>
		Legal Description <i>35-21-12</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>5 1/2</i>								
Depth <i>3684</i>	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 <i>3671</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative <i>LD</i>	Station Manager <i>SCOTT</i>	Treater <i>GUMBLEY</i>
Service Units <i>19947 27463</i>	<i>19960-19918</i>	
Driver Names <i>MG</i>	<i>LUCAS</i>	<i>DAVE</i>

Time	Casing Pressure	Tubing Pressure	Bbbs. Pumped	Rate	Service Log
<i>1830</i>					<i>ON LOCATION</i>
					<i>RUN 3680 5 1/2 CSC 92-JTS</i>
					<i>GUIDE SHOE, INSERT 1ST COLUMN</i>
					<i>CENT. - 1-3-5-7-9</i>
<i>2145</i>					<i>THRU BOTTOM - DROP BACK - CIRC</i>
					<i>SET 5 1/2 AT 3684' w/ COLLAR AT G.L.</i>
<i>2300</i>	<i>300</i>		<i>20</i>	<i>6</i>	<i>Run 20 bbl 2% HCL A20</i>
	<i>300</i>		<i>12</i>	<i>6</i>	<i>Run 12 bbl MUD FLUSH</i>
	<i>300</i>		<i>3</i>	<i>6</i>	<i>Run 3 bbl H₂O</i>
	<i>200</i>		<i>31</i>	<i>6</i>	<i>Run 150 SK 60/40 P02</i>
					<i>18% START, 1/2% CTR, 5TH CDS 1/4" CF</i>
					<i>STOP - WASH LINE - DROP PUMP</i>
	<i>0</i>		<i>0</i>	<i>6</i>	<i>STARTING DISP.</i>
	<i>200</i>		<i>72</i>	<i>6</i>	<i>LIFT CEMENT</i>
	<i>600</i>		<i>80</i>	<i>3</i>	<i>SLOW RATE</i>
<i>2330</i>	<i>1000</i>		<i>89.7</i>	<i>3</i>	<i>PLUG DOWN - HOLD</i>
					<i>PUMP RATE HOLD - 30 SK 60/40 P02</i>
<i>2400</i>					<i>JOB COMPLETE</i>
					<i>KEVIN</i>

DIAMOND TESTING

Drill Test Report

General Information

Company Name L.D. DRLG

Contact L.D. DAVIS
Well Name IRVIN #1-35
Unique Well ID DST#1 3525-3587 ARB
Surface Location SEC 35-21S-12W STAFFORD CO. KS
Field WILDCAT
Well Type Vertical

Job Number M042
Representative MIKE COCHRAN
Well Operator L.D. DRLG
Report Date 2010/10/30
Prepared By MIKE COCHRAN

Test Information

Test Type CONVENTIONAL
Formation DST#1 3525-3587 ARB
Well Fluid Type 01 Oil
Test Purpose (AEUB)

Start Test Time 07:14:00
Final Test Time 14:28:00

Start Test Date 2010/10/30
Final Test Date 2010/10/30

Gauge Name 30037
Test Type Name

Test Results

RECOVERED: 1422' GIP
90' HOCM 49% OIL, 51% MUD
121' MCO 2% GAS, 62% OIL, 36% MUD
211' TOTAL FLUID

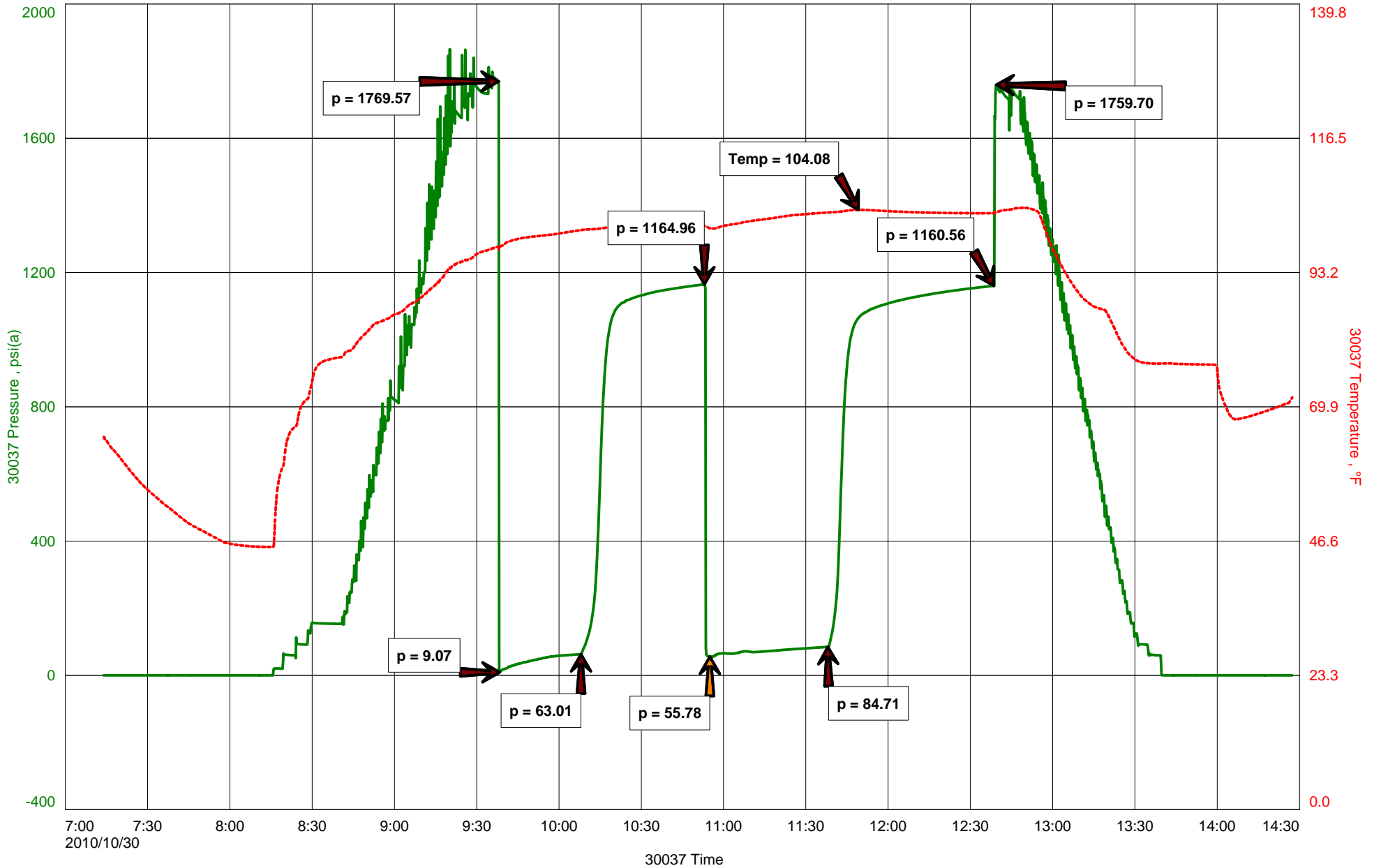
TOOL SAMPLE: 75% OIL, 25% MUD

GRAVITY 41.0 @ 60 DEG

L.D. DRLG
DST#1 3525-3587 ARB
Start Test Date: 2010/10/30
Final Test Date: 2010/10/30

IRVIN #1-35
Formation: DST#1 3525-3587 ARB
Pool: WILDCAT
Job Number: M042

IRVIN #1-35





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 _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

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 IRVIN #1-35
Unique Well ID DST#2 3584-3594 ARB
Surface Location SEC 35-21S-12W STAFFORD CO. KS
Field WILDCAT
Well Type Vertical

Job Number M043
Representative MIKE COCHRAN
Well Operator L.D. DRLG
Report Date 2010/10/30
Prepared By MIKE COCHRAN

Test Information

Test Type CONVENTIONAL
Formation DST#2 3584-3594 ARB
Well Fluid Type 01 Oil
Test Purpose (AEUB)

Start Test Time 19:39:00
Final Test Time 03:09:00

Start Test Date 2010/10/30
Final Test Date 2010/10/31

Gauge Name 30037
Test Type Name

Test Results

RECOVERED: 3242' G.I.P. (GTS)
189' CLEAN OIL
91' CLEAN OIL
30' MUDDY OIL, 98% OIL, 2% MUD
310' TOTAL FLUID

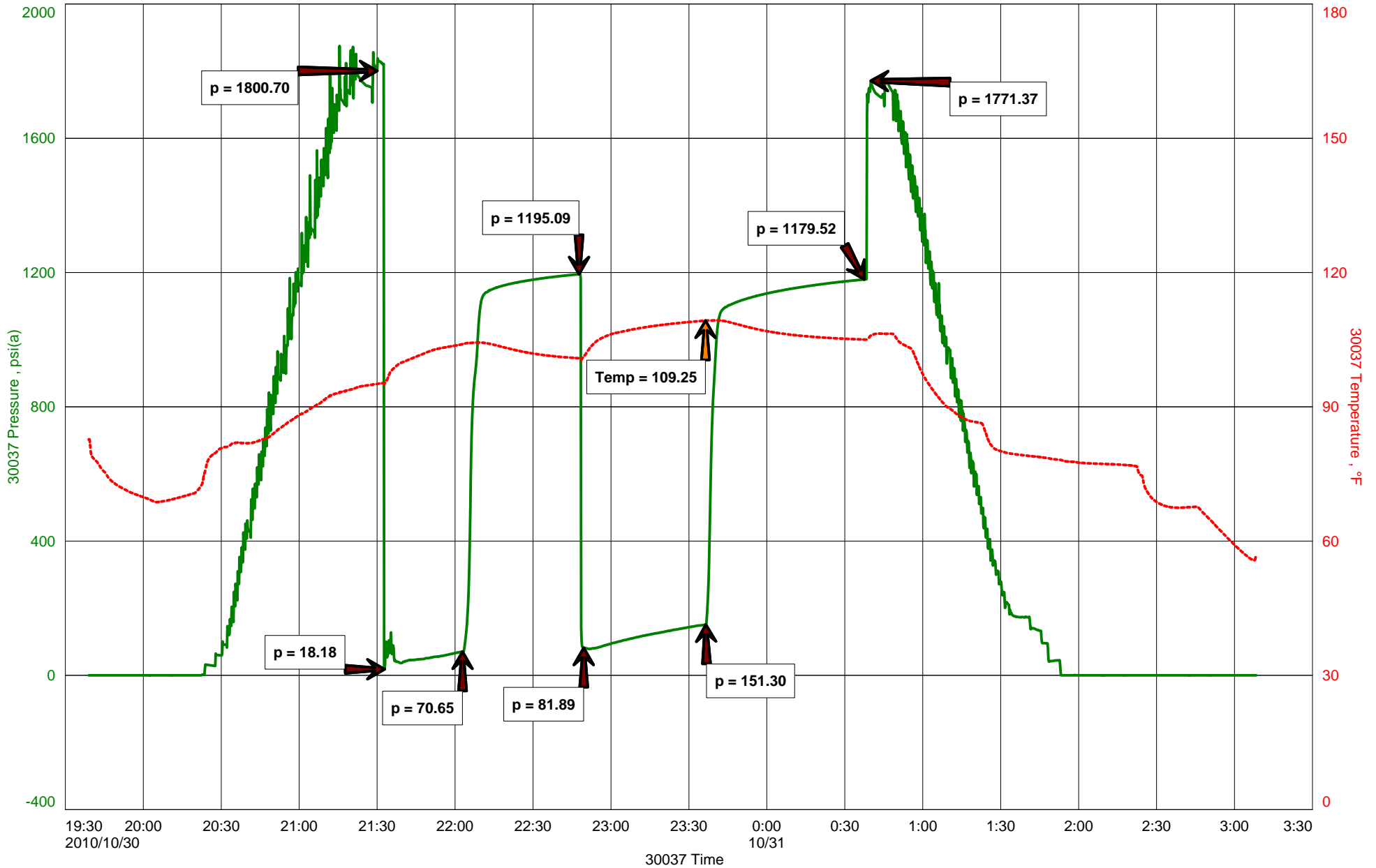
TOOL SAMPLE 100% GAS

GRAVITY: 41.9 @ 60 DEG

L.D. DRLG
DST#2 3584-3594 ARB
Start Test Date: 2010/10/30
Final Test Date: 2010/10/31

IRVIN #1-35
Formation: DST#2 3584-3594 ARB
Pool: WILDCAT
Job Number: M043

IRVIN #1-35





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 _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

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.

KIM B. SHOEMAKER

CONSULTING GEOLOGIST

318-684-9708 * WICHITA, KS

GEOLOGIST'S REPORT

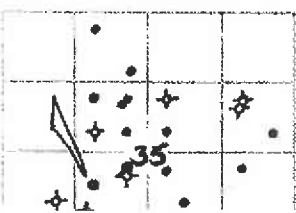
DRILLING TIME AND SAMPLE LOG

COMPANY L. D. DRILLING, INC.
 LEASE # 1-35 IRVIN
 FIELD MAX
 LOCATION 1826' FSL & 1517' FWL
 TWP 35 R WSP S 21s T 12w
 COUNTY STAFFORD STATE KANSAS
 DRILLER PETROMARK RIG 2
 START 10-25-10 COMP 10-31-10
 WELLS 3690 LTD 3691
 MUD UP 2800 TYPE MUD CHEMICAL

ELEVATIONS
 KB 1834
 DF _____
 GL 1829
 Measurements Are All From 1834 KB
 CASING SURFACE 8 5/8" @ 343'
 PRODUCTION 5 1/2" @
 ELECTRICAL SURVEYS
 DUAL IND, N-DENS.

SAMPLES SAVED FROM 3000 TO 3690
 DRILLING TIME KEPT FROM 2800 TO 3690
 SAMPLES EXAMINED FROM 3000 TO 3690
 GEOLOGICAL SUPERVISION FROM 3100 TO 3690
 GEOLOGIST ON WELL KIM B. SHOEMAKER

FORMATION TOPS	LOG	SAMPLES
ANHYDRITE	Not Present	
TOPEKA	2809-975	2809-975
HEEBNER	3100-1266	3101-1267
BROWN LIME	3233-1399	3232-1398
LANSING	3255-1421	3255-1421
B/KC	3485-1651	3484-1650
VIOLA	3508-1674	3507-1673

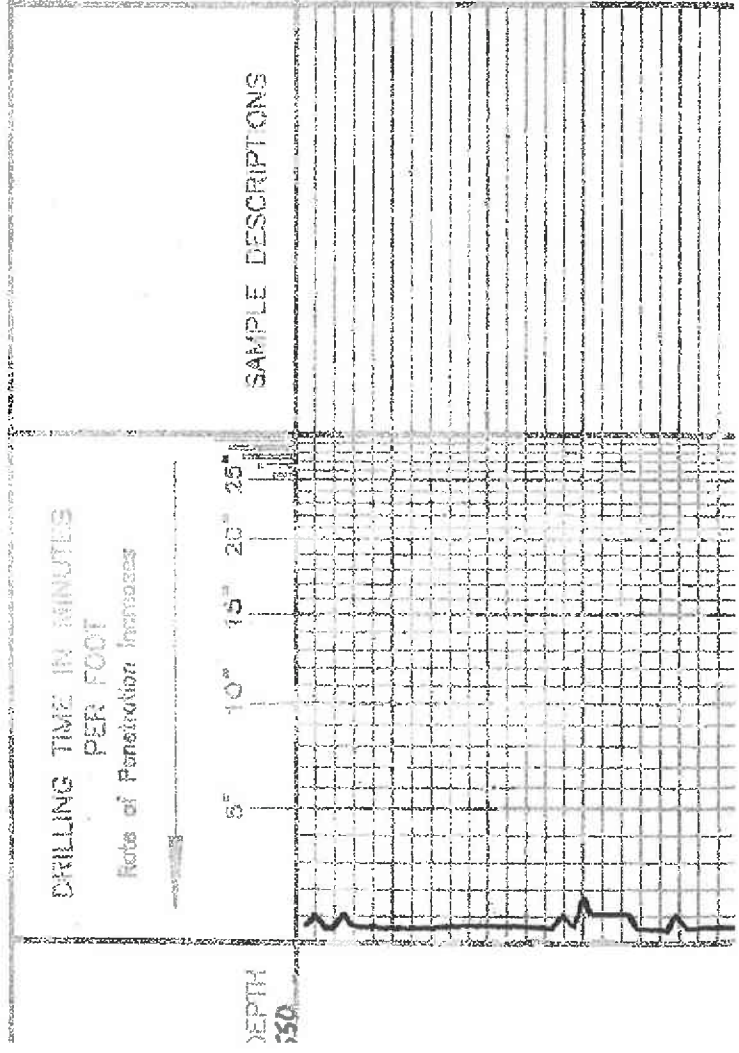


API: 15-185-23689

D. Spud 346' 550' 572' 267' 287' 220' 90'

LEGEND

- Anhydrite
- Sandsstone
- Shale
- Core sh.
- Limestone
- Cool. Lime
- Chert
- Dolomite



REMARKS

00

50

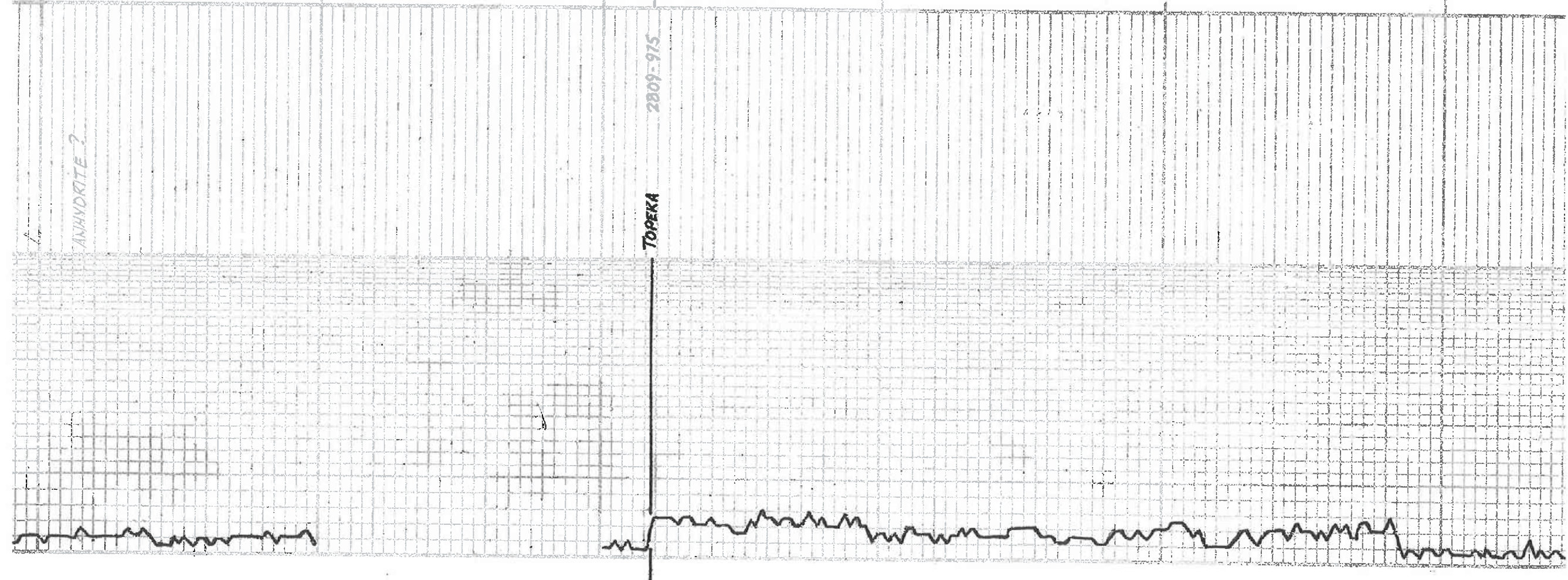
100

0

ANHYDRITE?

TOPEKA

2809-915



Samples are tagged

13. Tmly. Foss.

Sh. dk G.

15. Tmly. Sh. Foss. Sil. A

15. wt. chly.

15. Tmly. Sh. Foss. Sil. Chly.

Sh. G.

15. Tmly. Foss. and V. Sil. Chly.

15. wt. chly.

15. wt. G. Sil. Chly.

15. Tmly. Sil. Foss.

A. dk. G.

HEEBNER 3101-1267

Sh. Blk. Carb. (3/20)

15. Tmly. Sil. Foss.

Sh. Lt. Blue-G.

15. Tmly. V. Foss. Sil. Foss. Sil. Chly.

15. wt. dk. ool. X. Chly.

Sh. G. G. Silly.

Sh. Lt. G. Silly.

Sh. G. G.

Sh. Chly. Silly. Sh.

Sh. G. G.

BROWN LIME 3232-1398

15. Sh. Sil. Foss.

15. wt. G.

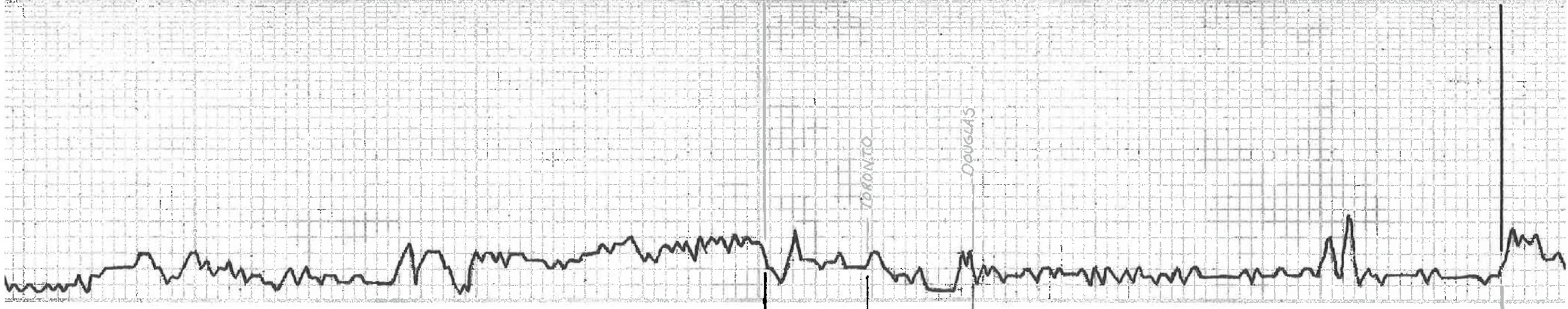
1000

1100

1200

TORONTO

DOUGLAS



Sh. Gy. 5119.284

Sh. Blue ls. Silty

LANSING 3255-1421

Ls. F. Sil. Foss. YSA, A

Ls. L.A. G. Sil. Foss.

Sh. Blue ls.

Ls. F. L.A. G. ool. Sil. A

Ls. F. wt. Sil. Foss. Sil. A

Sh. G.

Ls. B. G. Shool. B. Y. G. P. B. Sp. M. F. P. No Flow. No Ool. (3310)

Ls. F. G. Sil. A. Calcite.

Ls. B. Sil. Foss.

Sh. L. Blue ls.

Ls. B. G. Shool. Foss. P. Y. G. P. B. Sp. M. F. P. No Flow. No Ool. (3330)

Sh.

Ls. wt. Shool. ool. Sil. A. F. P. Y. G. P. No Flow. No Ool. (3337.30)

Ls. G. Du.

A. M. E.

Ls. F. YSA. Foss. Sil. A

A. wt. F.

Ls. F. Sil. A. Ls. wt. chky.

Sh. L. G.

Ls. F. G. Sil. Foss. Sil. A. Ls. G.

Sh. G. Ls. wt. ool., A G.

Ls. F. L.A. G. Sil. A

Sh. G. G. M.

Ls. F. wt. Sil. Foss. Sil. A

Ls. F. wt. ool. Sil. Chky.

Ls. F. Du. Calcite.

Sh. L. G. G.

Ls. wt. Sil. Chky.

Ls. wt. Shool. Sil. Chky.

Ls. G. Du.

Sh. G. G.

Ls. Ls. G. Du.

B/KC 3484-1650

Sh. L. G. G.

Ls. F. YSA. Foss. Sil. A. P. Y. G. P. B. Sp. M. F. P. No Flow. No Ool. (3310)

Viola 3507-1673

A. wt. G. F. Foss. G. L. wt. G. P. B. Sp. M. F. P. No Flow. No Ool.

A. wt. G. F. Foss. G. L. wt. G. P. B. Sp. M. F. P. No Flow. No Ool.

3300

3400

3500

A. wt. 7.0. Sh. Top. R. 200 ft. R. 11.5 ft. VES. 1.58 PD. No Flow. No. 0087

SIMPSON 3529-1695

Sh. 1.1 ft.

Sh. Bre. w. Yellow

Sh. Blue, Yellow, G.

Sh. Ty. Yellow Blue, G. Blue

Sh. Ty.

ARBUCKLE 3579-1715

Dol. 7. A. red. br. F. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

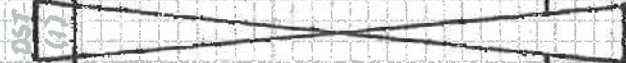
Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

A. wt. 1.08

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

Dol. 7. A. red. br. Mg. X. H. G. L. H. Sh. 54. 55. 56. F. Flow. G. br.

PTO 36905-1856



WIS: 57 WIT: 95
WIS: 80 WIT: 2600

3600'

3700'

DST (1) 3525-3587

1500 ft. Bottom bucket 11 min. 88. Hour
2400 ft. " " 24. " 88. 50

30. 45. 45. 60

Re. 1922' G.I.P.

9.5' X 10.5' (40' X 10.5')

12.5' X 10.5' (40' X 10.5')

17. 21'

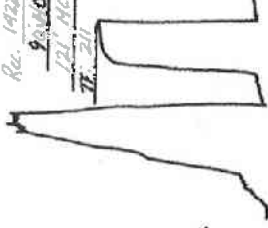
RF: 9.63

54. 84. 2

SF: 1165

1161 #

Temp 104.2°



DST (2) 3581-3591

1500 ft. Bottom bucket 1 min. 88. Bottom Bucket

2400 ft. " " 1 min. 88. " "

30. 45. 45. 60

Re. 2880' G.I.P.

30.540' (30' X 10.5')

37. 310'

RF: 18.71

82. 151 #

SF: 1185

1180 #

Temp 104.2°

