



KANSAS CORPORATION COMMISSION 1051693  
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: \_\_\_\_\_



1051693

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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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	Roberts 1-14
Doc ID	1051693

All Electric Logs Run

BOREHOLE COMPENSATED SONIC LOG
DUAL COMPENSATED POROSITY LOG
DUAL INDUCTION LOG
MICRORESISTIVITY LOG
SONIC CEMENT BOND LOG

Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	Roberts 1-14
Doc ID	1051693

Tops

Name	Top	Datum
ANHYDRITE	629	+1217
BASE ANHYDRITE	654	+1192
HEEBNER	3106	-1260
TORONTO	3123	-1277
DOUGLAS	3135	-1289
BROWN LIME	3241	-1395
LANSING	3247	-1401
BASE KANSAS CITY	3477	-1631
VIOLA	3500	-1654
SIMPSON SHALE	3515	-1669
ARBUCKLE	3560	-1714

## 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: ROBERTS 1-14

Operator: L D DRILLING INC

Location-Downhole:

Location-Surface: S14/21S/12W

### Test Information:

Company: DIAMOND TESTING

Representative: JOHN RIEDL

Supervisor: JOSH AUSTIN

Test Type: CONVENTIONAL Job Number: D859

Test Unit:

Start Date: 2010/11/24 Start Time: 06:40:00

End Date: 2010/11/24 End Time: 13:00:00

Report Date: 2010/11/24 Prepared By: JOHN RIEDL

Qualified By: JOSH AUSTIN

### Remarks:

RECOVERY: 180' GAS IN PIPE, 150' SLIGHTLY OIL CIT GASSY MUD  
370' SLIGHTLY MUD CUT WATER



# 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: \_\_\_\_\_

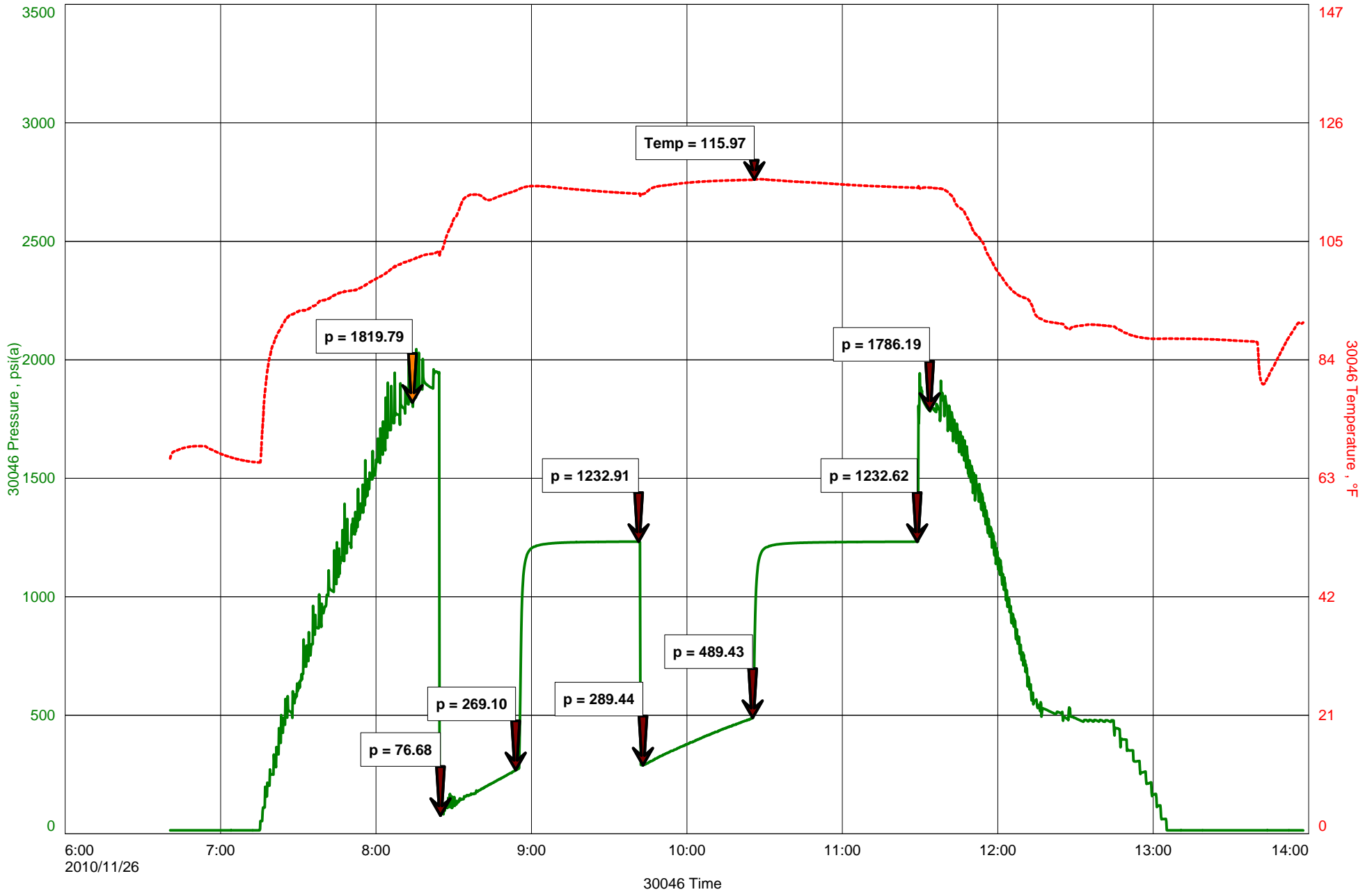
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

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.

# ROBERTS 1-14



## 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: ROBERTS 1-14

Operator: L D DRILLING INC

Location-Downhole:

Location-Surface: S14/21S/12W

### Test Information:

Company: DIAMOND TESTING

Representative: JOHN RIEDL

Supervisor: JOSH AUSTIN

Test Type: CONVENTIONAL Job Number: D860

Test Unit:

Start Date: 2010/11/25 Start Time: 03:30:00

End Date: 2010/11/25 End Time: 09:45:00

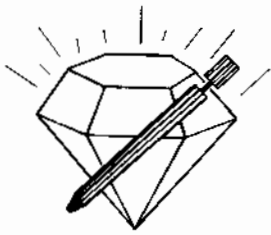
Report Date: 2010/11/25 Prepared By: JOHN RIEDL

Qualified By: JOSH AUSTIN

### Remarks:

RECOVERY: 280' GAS IN PIPE, 80' SLIGHTLY OIL CUT GASSY MUD,  
60' SLIGHTLY MUD CUT GASSY OIL





# 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: \_\_\_\_\_

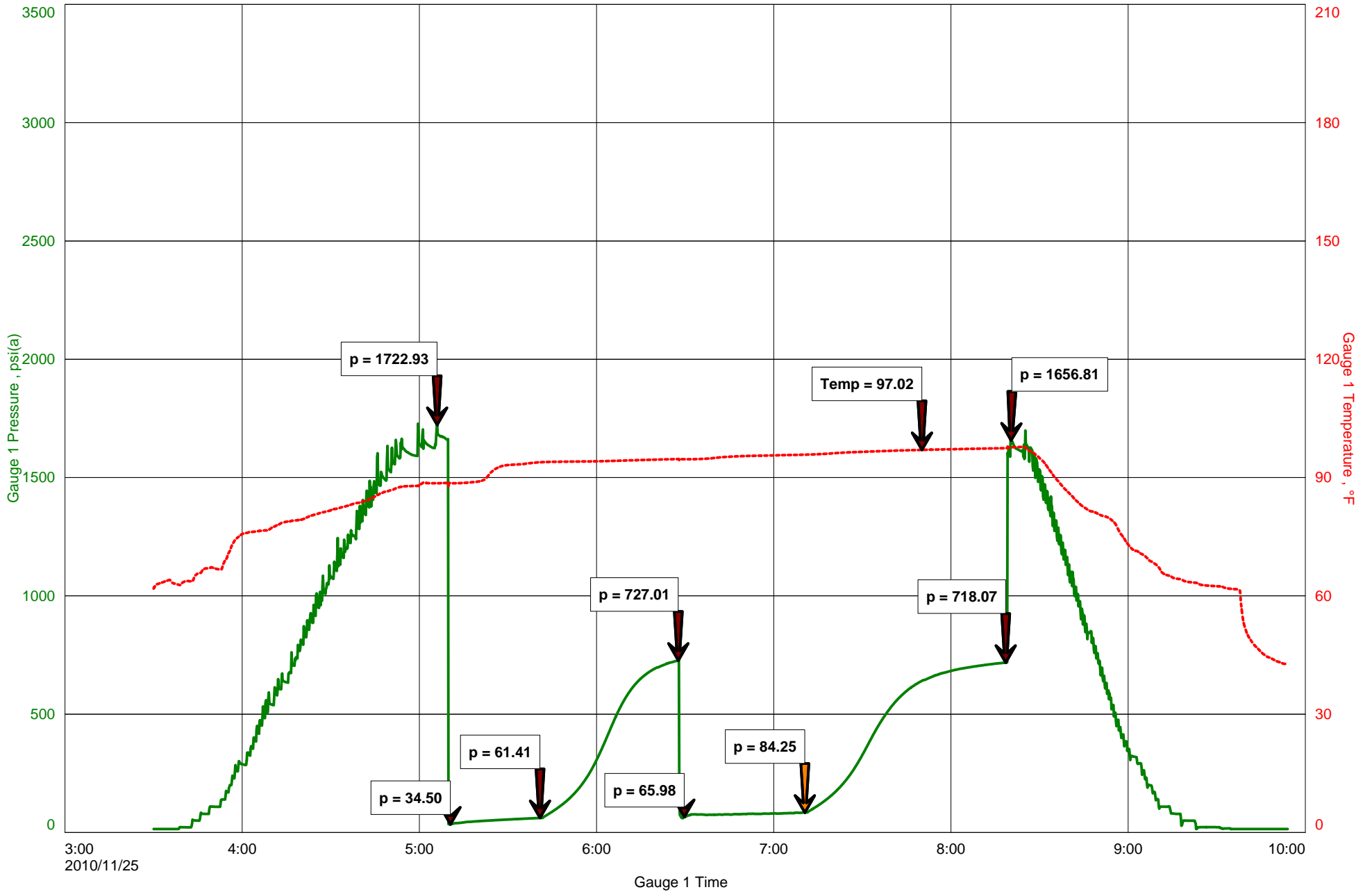
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

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.	

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# ROBERTS 1-14



## GENERAL INFORMATION

### Client Information:

Company: L D DRILLING INC

Contact: L D DAVIS

Phone: Fax: e-mail:

### Site Information:

Contact: JIM MUSGROVE

Phone: Fax: e-mail:

### Well Information:

Name: ROBERTS 1-14

Operator: L D DRILLING INC

Location-Downhole:

Location-Surface: S14/21S/12W

### Test Information:

Company: DIAMOD TESTING

Representative: JOHN RIEDL

Supervisor: JIM MUSGROVE

Test Type: CONVENTIONAL Job Number: D861

Test Unit:

Start Date: 2010/11/25 Start Time: 21:25:00

End Date: 2010/11/24 End Time: 04:15:00

Report Date: 2010/11/26 Prepared By: JOHN RIEDL

Qualified By: JIM MUSGROVE

### Remarks:

RECOVERY: 350' GAS IN PIPE  
150' GASSY OIL, 180' MUDCUT GASSY OIL



# 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: \_\_\_\_\_

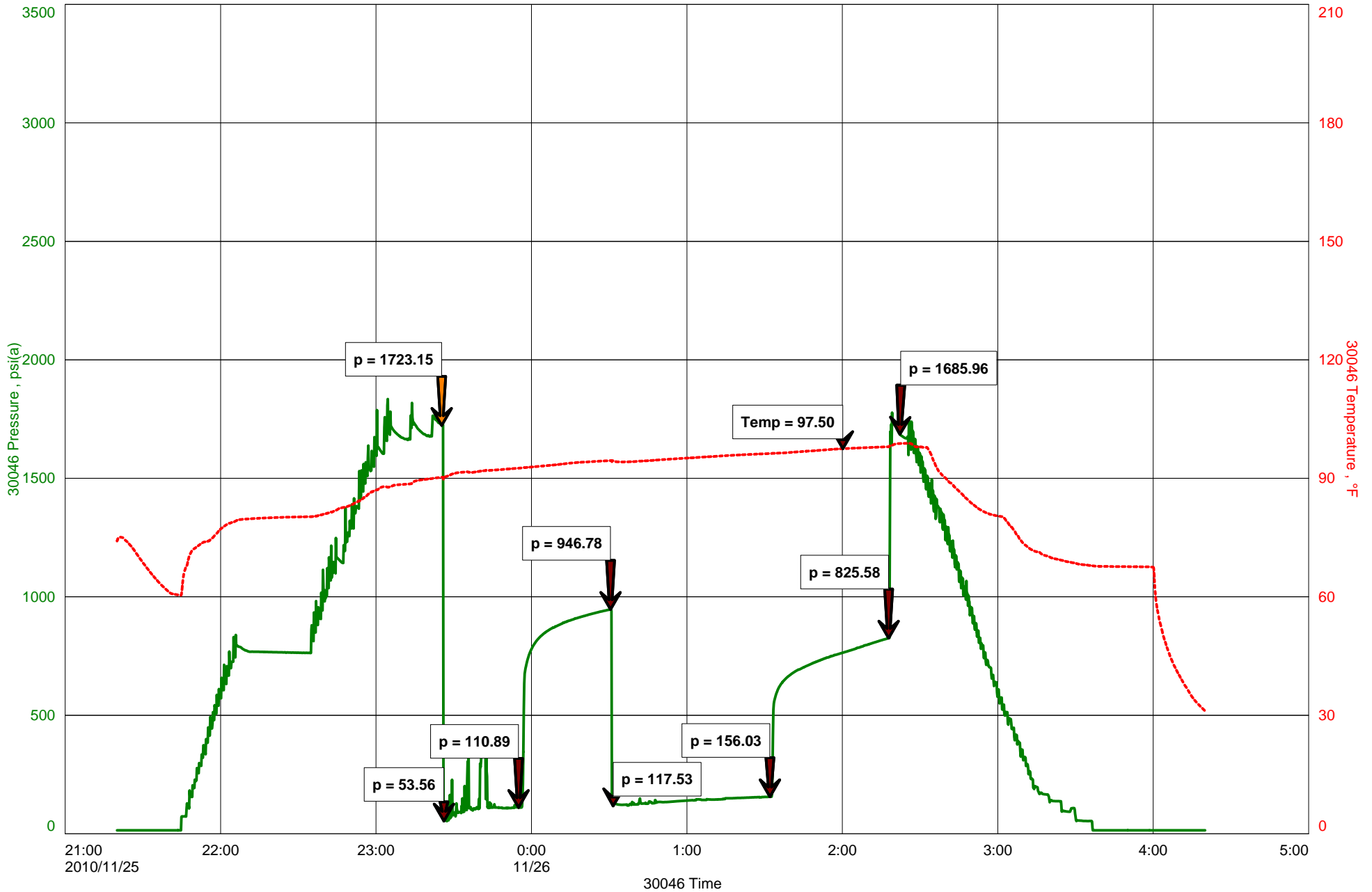
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

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.	

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# ROBERTS 1-14



## GENERAL INFORMATION

### Client Information:

Company: L D DRILLING INC

Contact: L D DAVIS

Phone: Fax: e-mail:

### Site Information:

Contact: JIM MUSGROVE

Phone: Fax: e-mail:

### Well Information:

Name: ROBERTS 1-14

Operator: L D DRILLING INC

Location-Downhole:

Location-Surface: S14/21S/12W

### Test Information:

Company: DIAMOND TESTING

Representative: JOHN RIEDL

Supervisor: JIM MUSGROVE

Test Type: CONVENTIONAL Job Number: D862

Test Unit:

Start Date: 2010/11/26 Start Time: 10:30:00

End Date: 2010/11/26 End Time: 16:00:00

Report Date: 2010/11/26 Prepared By: JOHN RIEDL

Remarks: Qualified By: JIM MUSGROVE

RECOVERY: 360' GAS IN PIPE  
140' GASSY OIL, 120' SLIGHTLY MUD CUT GASSY OIL



# 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: \_\_\_\_\_

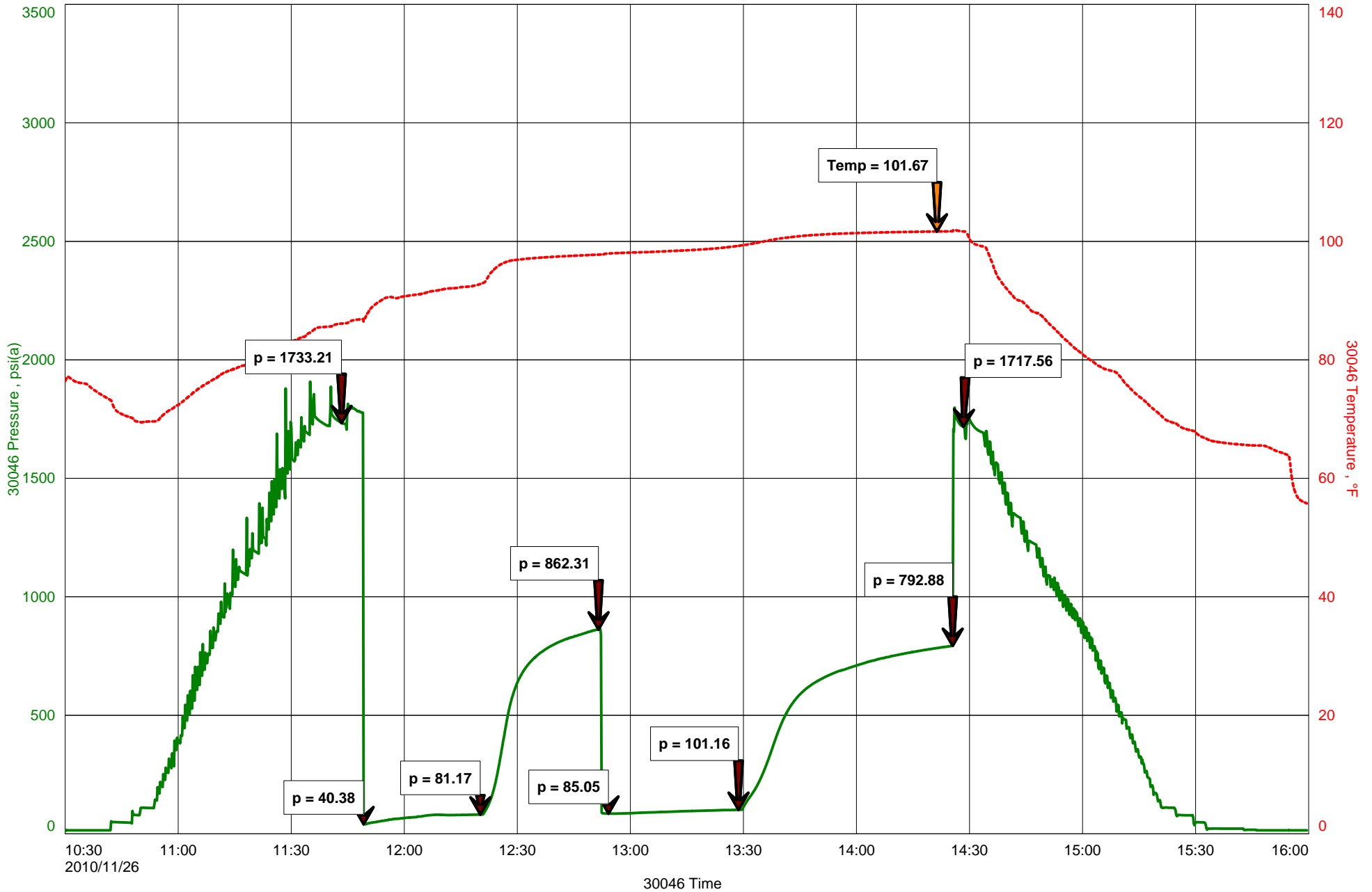
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

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.

# ROBERTS 1-14







**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 02976 A

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

DATE OF JOB 11-21-10		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.D. Drilling INC				LEASE Roberts				WELL NO. 1-14	
ADDRESS				COUNTY Stafford 14-21-12		STATE Kans.			
CITY				STATE		SERVICE CREW A. Werth, Vanch, Mitchell, JR.			
AUTHORIZED BY				JOB TYPE: 8 5/8" Surface					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
28443 P.U.	1 1/2						11-20-10	AM	11:30
22463 P.U.	1 1/2					ARRIVED AT JOB	11-21-10	AM	1:30
12100-19418	1 1/2					START OPERATION	11-21-10	AM	2:00
						FINISH OPERATION	11-21-10	AM	3:30
						RELEASED	11-21-10	AM	4:00
						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 Common	SK	175		\$ 31500.00
CP100	Common	SK	200		\$ 32000.00
CC102	cell FLAKE	lb	94		\$ 347.80
CC109	calcium chloride	lb	1059		\$ 1111.95
CC200	cement Gel	lb	326		\$ 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 Charge	mi	90		\$ 630.00
E113	Bulk Delivery charge	Tm	794		\$ 1270.82
CE200	Depth Charge 0-500	Y-hrs	1		\$ 1000.00
CE240	Blending & mixing service chg.	SK	37.5		\$ 525.00
CE504	Plug container utilization chg. Job		1		\$ 250.00
5003	Service Supervisor first 8hrs or less	EA	1		\$ 175.00
SUB TOTAL					

CHEMICAL / ACID DATA:			

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

TOTAL  
DLS \$ 84741.00

SERVICE REPRESENTATIVE Allen F. Wain THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. \_\_\_\_\_

Customer L.D. Drilling, Inc	Lease No.	Date 11-21-10
Lease Roberts	Well # 1-14	
Field Order # 02476A	Station Pratt	Casing 8 5/8
		Depth 341
Type Job 8 5/8" Sur face	Formation CNW TO 342'	County Stafford
		State KS
		Legal Description 14-21-12

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8 5/8	Tubing Size	Shots/Ft	175 SKS	Acid	A-con Blend	RATE	PRESS	ISIP
Depth 341	Depth	From	To	Pre Pad	Common 20% gel, 3% CC	12.6		5 Min.
Volume 20.48	Volume	From	To	Pad				10 Min.
Max Press 300	Max Press	From	To	Frac				15 Min.
Well Connection P.C.	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth 321	Packer Depth	From	To	Flush	Fresh water.	Gas Volume		Total Load

Customer Representative	Station Manager scotty	Treater Allen F. Werth
Service Units 28443	27463	19960
Driver Names werth	Uench	Bradley
	Mitchel	JR Hunter

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1:30 AM					Petro MARK II
					DNLOC. Discuss Safety, Setup Plan Job
					Running 8 5/8 surface
2:20					Pipe @ 341 CIR w/ Rig.
2:35			68	5	START MIX CNT 175 SKS A-con Blend
					@ 12.6 #/gal
	100 #			5	START MIX 175 SKS COMMON
			48 1/2		w/ 2% gel 3% CC, 1/4" Cell Flake
					@ 15 #/gal
					Finish mix cnt
					Release wooden Plug
3:00					Start Disp.
3:10	300 #				Plug down
					shut in @ well.
					Release PSI.
					washup + Rackup Equip
4:00					Job complete
					Cement in cellar
					THANKS Allen, Chris, Brad
					JR Hunter





**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 03129 A

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

DATE OF JOB: 11/27/10	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: LD DRILLING	LEASE: ROBERTS	WELL NO. 1-14							
ADDRESS:	COUNTY: STAFFORD	STATE: KS							
CITY:	STATE:	SERVICE CREW: KC, CHRIS JR.							
AUTHORIZED BY:	JOB TYPE: CNW - LONGSTRONG								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE: 11-27	AM	TIME
19901						ARRIVED AT JOB		AM	1000
27463	3/4					START OPERATION		AM	1230
19826	3/4					FINISH OPERATION		AM	1315
19860	3/4					RELEASED		AM	1400
						MILES FROM STATION TO WELL	45		

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 P02	SK	150		1800.00
CP103	60/40 P02	SK	30		360.00
CC162	CELL FLAKE	lb.	38		140.60
CC111	SALT	lb.	1334		667.00
CC112	CFR	lb.	65		390.00
CC201	GIBSONITE	lb.	750		502.50
CF704	CS-12 HCL	gal	1		35.00
CC151	MUD FLUSH	gal	500		430.00
CF103	5/2 TOP RUBBER PUC	EA	1		105.00
CF251	5/2 GUIDE SHOE	EA	1		250.00
CF1451	5/2 AFM INJECT PUMP	EA	1		215.80
CF1651	5/2 TURBOLIZER	EA	5		550.00
E100	PICKUP MILE.	mile	45		191.25
E101	TRUCK MILE.	mile	90		630.00
E113	BULK DELIVERY	TM	349		558.00
CE204	PUMP CHANGE	EA	1		2160.00
CE240	BLEND CHANGE	SK	180		252.00
CE564	PUC CONTRACTOR	EA	1		250.00
S003	SERVICE SUPERVISOR	EA	1		175.00
SUB TOTAL					

CHEMICAL / ACID DATA:			

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

TOTAL 6473.10  
DLS

SERVICE REPRESENTATIVE: K. GONSLEY	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)	

FIELD SERVICE ORDER NO.



Customer <i>L.D. PRODUCTION</i>	Lease No.	Date <i>11-27-10</i>	
Lease <i>ROBERTS</i>	Well # <i>1-14</i>		
Field Order # <i>3129</i>	Station <i>PRATT, KS</i>	Casing <i>5 1/2</i>	Depth <i>3699</i>
Type Job <i>ONW - LOWC STRENGTH</i>	Formation <i>TD-3700</i>	County <i>STAFFORD</i>	State <i>KS</i>
		Legal Description <i>14-21-12</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>5 1/2</i>							5 Min.	
Depth <i>3699</i>	Depth	From	To	Pre Pad	Max			
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>3684</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative <i>LD</i>	Station Manager <i>SCOTT</i>	Treater <i>COTRLEY</i>
Service Units <i>19907</i>	<i>27463</i>	<i>19826-19860</i>
Driver Names <i>166</i>	<i>CHAS</i>	<i>JR</i>

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>1000</i>					<i>ON LOCATION</i>
					<i>RUN 3691' 5 1/2 15.5+17 CSC</i>
					<i>GUIDE SHOE INSERT IN 1ST COLLAR</i>
					<i>CEMT. - 1-3-5-7-9</i>
<i>1130</i>					<i>TO BOTTOM - DROP BACK - CONC.</i>
					<i>SET 5 1/2 AT 3699'</i>
<i>1230</i>	<i>250</i>		<i>20</i>	<i>6</i>	<i>PUMP 20 bbl. 2% HCL H<sub>2</sub>O</i>
	<i>280</i>		<i>12</i>	<i>16</i>	<i>PUMP 12 bbl. MUD FLUSH</i>
	<i>250</i>		<i>3</i>	<i>6</i>	<i>PUMP 3 bbl. H<sub>2</sub>O</i>
	<i>200</i>		<i>31</i>	<i>6</i>	<i>PUMP 150 SIC 60/40 POZ</i>
					<i>18% SAG 1/2% CBR 5" GA SONDE 1/4" CF</i>
					<i>STOP - WASH LINE - DROP PRESS</i>
	<i>0</i>		<i>0</i>	<i>6</i>	<i>START DESP.</i>
	<i>200</i>		<i>68</i>	<i>6</i>	<i>LIFT CEMENT</i>
	<i>500</i>		<i>80</i>	<i>3</i>	<i>SLOW RATE</i>
<i>1315</i>	<i>1000</i>		<i>86</i>	<i>3</i>	<i>PLUG DOWN - HOLD</i>
					<i>PLUG RUN HOLES - 30 SIC 60/40 POZ</i>
<i>1400</i>					<i>JOB COMPLETE - KEVIN</i>





James C. Musgrove  
Petroleum Geologist

Home  
(620) 587-3444

Office  
(620) 588-4250 212 Main St. • P.O. Box 215 • Claflin, KS 67525

# GEOLOGIST'S REPORT

## DRILLING TIME AND SAMPLE LOG

COMPANY L.D. Drilling Inc.  
 LEASE Roberts #1-14  
 FIELD Sandra  
 LOCATION SW-NW-SE-SW  
 SEC 14 TWP 21<sup>S</sup> RGE 12<sup>W</sup>  
 COUNTY Stafford STATE Kansas  
 CONTRACTOR PetroMark Drilling Co. (rig#2)  
 SPUD 11-20-2010 COMP 11/27/2010  
 RTD 3700 LTD 3699  
 MUD UP 2800 TYPE MUD Chemical displaced

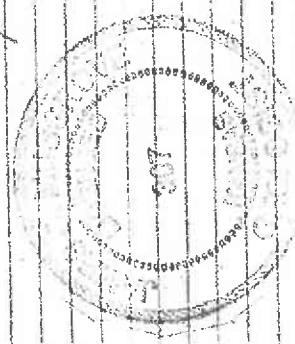
ELEVATIONS  
 KB 1846  
 DF \_\_\_\_\_  
 GL 1841  
 Measurements Are All  
 From -KB-  
 SURFACE CASING 8 5/8" @ 342'  
 PRODUCTION 5 1/2" @ 3699'  
 ELECTRICAL SURVEYS  
 By Wog Tech

SAMPLES SAVED FROM 2750 TO \_\_\_\_\_  
 DRILLING TIME KEPT FROM 2750 TO \_\_\_\_\_  
 SAMPLES EXAMINED FROM 2900 TO \_\_\_\_\_  
 GEOLOGICAL SUPERVISION FROM 2950 TO \_\_\_\_\_  
 GEOLOGIST ON WELL Josh Austin / Jim Musgrove

FORMATION TOPS	LOG	SAMPLES
anhydrite	629 +1217	RTD 3700 -1854
Base anhydrite	654 +1192	LTD 3699 -1853
Heebner	3106 -1260	
Toronto	3123 -1277	
Douglas	3135 -1289	
Brown lime	3241 -1395	

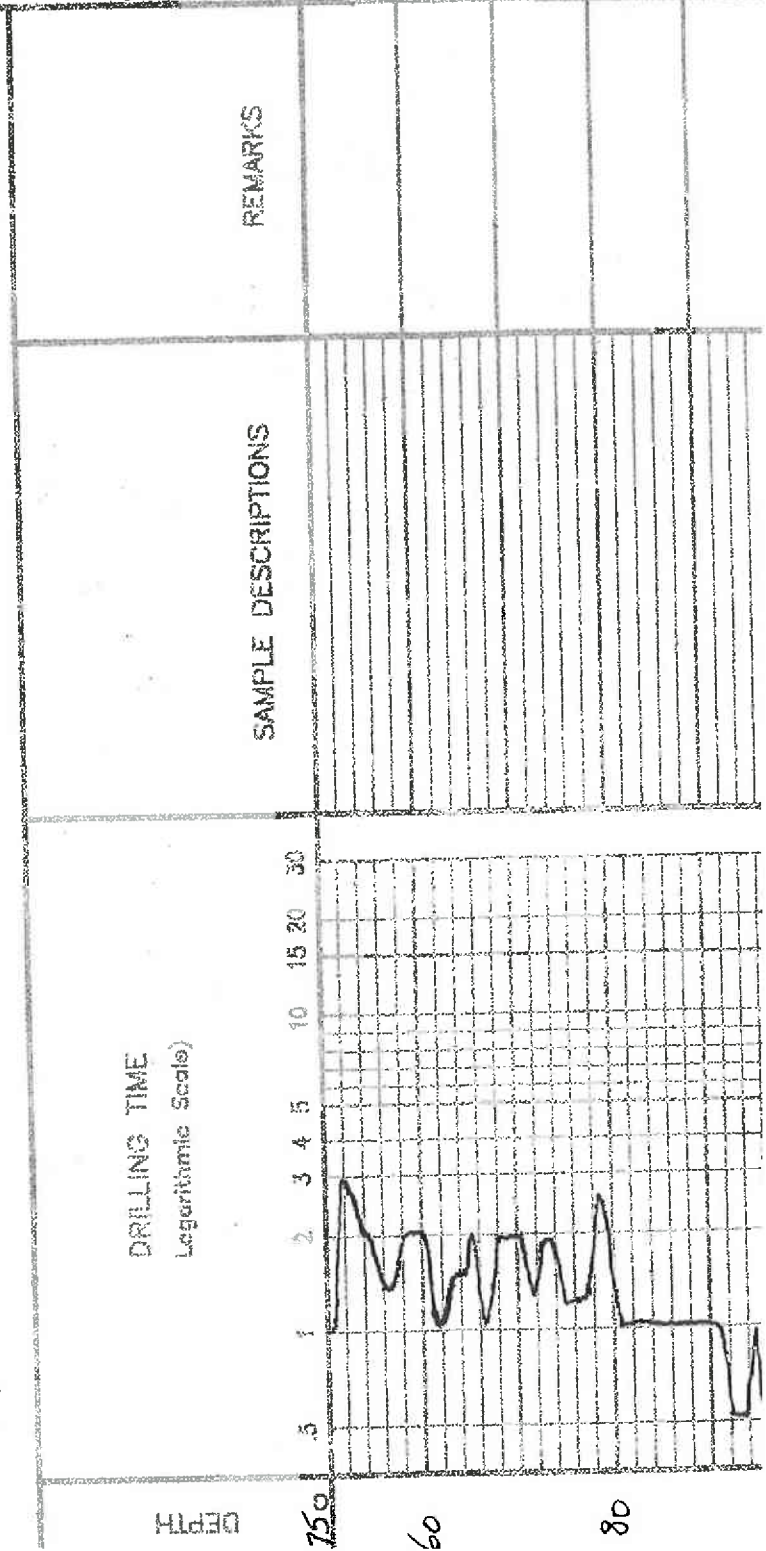
*5 1/2" production casing was set and cemented.  
 Respectfully submitted.*

*Jim Musgrove*  
 Joshua R. Austin & James C. Musgrove  
 Petroleum Geologist

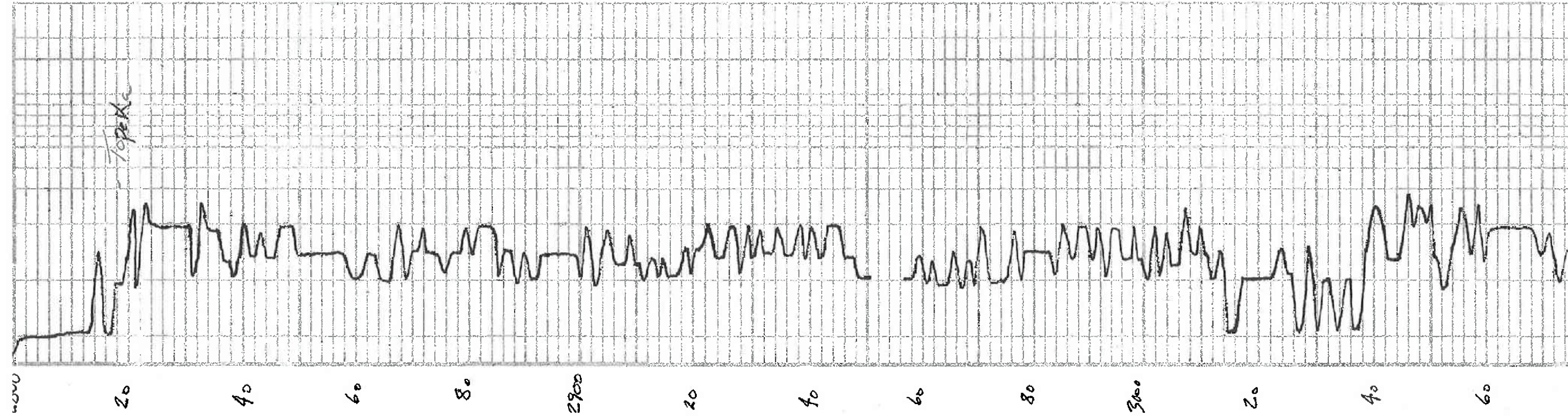


### LEGEND

- Anhydrite
- Soft
- Sandstone
- Shale
- Carb sh
- Limestone
- Oil Lime
- Chert
- Dolomite







blk carb shale

1 grey shale

25 tan sandstone silty clay

submic. green sh/s

grey sand

45. crin. tan med xl. green

5. silty sand - poorly sorted

sh

blk carb sh

65. tan-sy sand sh

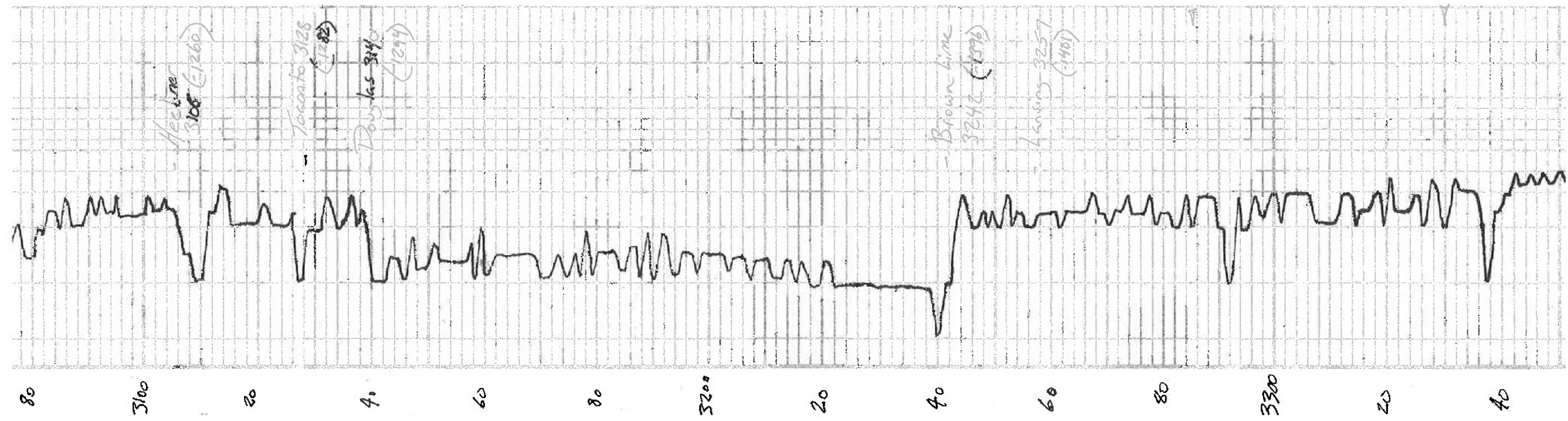
for silty sh. poorly sorted

to dolomite to siltstone sh

65. sy-crin sand xl. chalky

poorly dev. in + thin bedded A





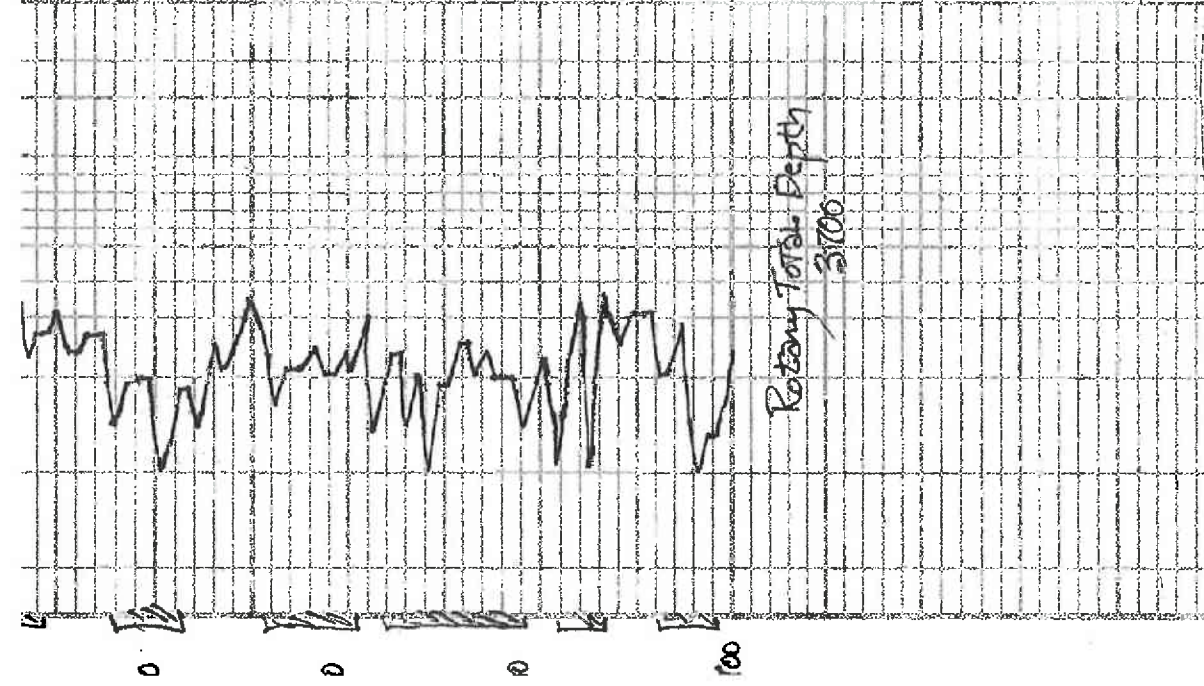
1.5m. #=part XL-g can  
 1st part 1846 KB  
 1st can (dsc)  
 blk carb. sh  
 Gy. green sh.  
 1st. cr-buff. f. and xl. clay  
 detrital in part. poor. mic. P/S  
 Gy. green mic. sh  
 gy silty shale mic. in part  
 fine sand, gy. greyish green  
 V.S. mic. sub. & poor lg. 48  
 Sand of shale ss  
 }  
 gy. greyish green silty sh.  
 Gy. soft shale  
 mica in part  
 1st. cr-tan f. sh. mic. in part  
 part of dense  
 1st. gy. f. and xl. f. and xl.  
 Poorly dec. Ay in part  
 1st. Tan f. sh. dense to thin sp. sh.  
 sh. to f. poor. mic. and calc.  
 1st. gy. f. sh. dense mic. sh.  
 1st. 126 typ. 1st. black sh.  
 mica in part  
 1st. cr. gy. f. sh. dense Ay  
 1st. Tan f. sh. slightly fine  
 to. V.S. mic. big sh. to sp. sh. 80  
 1st. gy. f. and xl. sh. in part  
 part poorly dec. 1st. to part  
 1st. 129 br. sh. mic. and calc.

D.S.L. # 1 3264  
 - 3330  
 30-45-45-60  
 Blow, Strong  
 Co. B. 15 min  
 Recovery: 180' gas in pipe  
 150' slightly oil cut  
 gassy mud  
 (320' oil, 15' to gas)  
 8290 mud  
 370' muddy water  
 pressures: 1st 1233 psi  
 551 1233 "  
 1st 1229 "  
 551 289-489  
 1820  
 -1786 "









Rotary Total Depth  
3700

200 cc - 2000 lbs; 2 hrs; flow right	
3 Polymulsion; med x by blk tany str. sp. - fat. o.d. + green / mar sh	(10/20/85 - 15/20/85) 15% oil pressures: 1200-862-78 550 793 11 140 40-81 550 85-101 164 1733 -1718
3 adv. blk / tany str.	
3 do; any tany G - med x by str. seed fish - veggy types + blk / adv. paper d.	
3 3	