



For KCC Use:
 Effective Date: _____
 District # _____
 SGA? Yes No

KANSAS CORPORATION COMMISSION 1054718
 OIL & GAS CONSERVATION DIVISION

Form C-1
 March 2010

Form must be Typed
 Form must be Signed
 All blanks must be Filled

NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.

Expected Spud Date: _____
 month day year

OPERATOR: License# _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: _____

CONTRACTOR: License# _____
 Name: _____

Well Drilled For:	Well Class:	Type Equipment:
<input type="checkbox"/> Oil	<input type="checkbox"/> Enh Rec	<input type="checkbox"/> Infield
<input type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input type="checkbox"/> Mud Rotary
	<input type="checkbox"/> Disposal	<input type="checkbox"/> Pool Ext.
<input type="checkbox"/> Seismic ; _____ # of Holes	<input type="checkbox"/> Other	<input type="checkbox"/> Wildcat
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Cable
<input type="checkbox"/> If OWWO: old well information as follows:		

Operator: _____
 Well Name: _____
 Original Completion Date: _____ Original Total Depth: _____

Directional, Deviated or Horizontal wellbore? Yes No
 If Yes, true vertical depth: _____
 Bottom Hole Location: _____
 KCC DKT #: _____

Spot Description: _____
 _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ E W
 (Q/Q/Q/Q) _____ feet from N / S Line of Section
 _____ feet from E / W Line of Section
 Is SECTION: Regular Irregular?
 (Note: Locate well on the Section Plat on reverse side)

County: _____
 Lease Name: _____ Well #: _____
 Field Name: _____
 Is this a Prorated / Spaced Field? Yes No
 Target Formation(s): _____
 Nearest Lease or unit boundary line (in footage): _____
 Ground Surface Elevation: _____ feet MSL
 Water well within one-quarter mile: Yes No
 Public water supply well within one mile: Yes No
 Depth to bottom of fresh water: _____
 Depth to bottom of usable water: _____
 Surface Pipe by Alternate: I II
 Length of Surface Pipe Planned to be set: _____
 Length of Conductor Pipe (if any): _____
 Projected Total Depth: _____
 Formation at Total Depth: _____
 Water Source for Drilling Operations:
 Well Farm Pond Other: _____
 DWR Permit #: _____
 (Note: Apply for Permit with DWR)
 Will Cores be taken? Yes No
 If Yes, proposed zone: _____

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 DAYS** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

Submitted Electronically

<p>For KCC Use ONLY</p> <p>API # 15 - _____</p> <p>Conductor pipe required _____ feet</p> <p>Minimum surface pipe required _____ feet per ALT. <input type="checkbox"/> I <input type="checkbox"/> II</p> <p>Approved by: _____</p> <p>This authorization expires: _____ (This authorization void if drilling not started within 12 months of approval date.)</p> <p>Spud date: _____ Agent: _____</p>

Remember to:

- File Certification of Compliance with the Kansas Surface Owner Notification Act (KSONA-1) with Intent to Drill;
- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed (within 60 days);
- Obtain written approval before disposing or injecting salt water.
- If well will not be drilled or permit has expired (See: authorized expiration date) please check the box below and return to the address below.

Well will not be drilled or Permit Expired Date: _____
 Signature of Operator or Agent: _____

E
 W



1054718

For KCC Use ONLY

API # 15 - _____

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Operator: _____

Lease: _____

Well Number: _____

Field: _____

Number of Acres attributable to well: _____

QTR/QTR/QTR/QTR of acreage: _____ - _____ - _____ - _____

Location of Well: County: _____

_____ feet from N / S Line of Section

_____ feet from E / W Line of Section

Sec. _____ Twp. _____ S. R. _____ E W

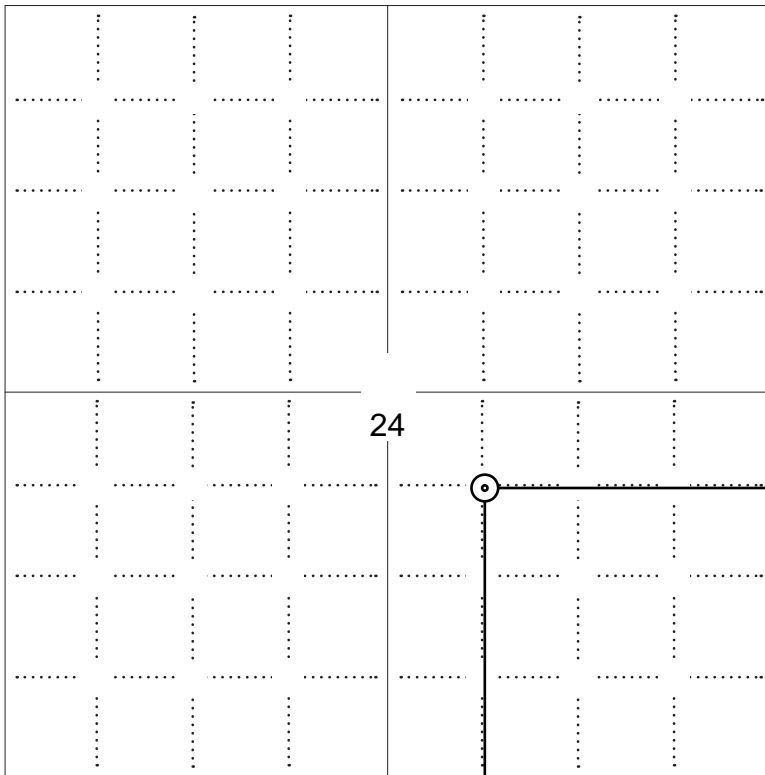
Is Section: Regular or Irregular

If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

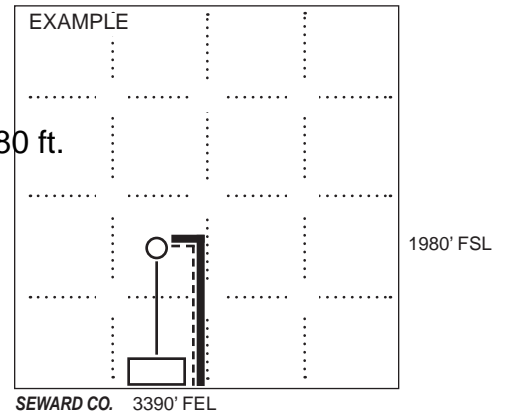
PLAT

Show location of the well. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032). You may attach a separate plat if desired.



LEGEND

- Well Location
- Tank Battery Location
- Pipeline Location
- Electric Line Location
- Lease Road Location



NOTE: In all cases locate the spot of the proposed drilling locaton.

1980 ft.

In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the south / north and east / west outside section lines.
3. The distance to the nearest lease or unit boundary line (in footage).
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; CG-8 for gas wells).
5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.



KANSAS CORPORATION COMMISSION 1054718
OIL & GAS CONSERVATION DIVISION

Form CDP-1
May 2010
Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

Operator Name: _____		License Number: _____	
Operator Address: _____			
Contact Person: _____		Phone Number: _____	
Lease Name & Well No.: _____		Pit Location (QQQQ): _____ - _____ - _____ - _____	
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <i>(If WP Supply API No. or Year Drilled)</i>		Pit is: <input type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>	
Is the bottom below ground level? <input type="checkbox"/> Yes <input type="checkbox"/> No		Artificial Liner? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How is the pit lined if a plastic liner is not used? _____			
Pit dimensions (all but working pits): _____ Length (feet) _____ Width (feet) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: _____ (feet) <input type="checkbox"/> No Pit			
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.	
Distance to nearest water well within one-mile of pit: _____ feet Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input type="checkbox"/> KDWR	
Emergency, Settling and Burn Pits ONLY: Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: _____ Number of working pits to be utilized: _____ Abandonment procedure: _____ Drill pits must be closed within 365 days of spud date.	
<p>Submitted Electronically</p>			

KCC OFFICE USE ONLY			
		<input type="checkbox"/> Liner <input type="checkbox"/> Steel Pit <input type="checkbox"/> RFAC <input type="checkbox"/> RFAS	
Date Received: _____		Permit Number: _____	
Permit Date: _____		Lease Inspection: <input type="checkbox"/> Yes <input type="checkbox"/> No	



CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone: (_____) _____ Fax: (_____) _____
Email Address: _____

Well Location:
____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ East West
County: _____
Lease Name: _____ Well #: _____

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I Submitted Electronically

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
December 2003
Type or Print on this Form
Form must be Signed
All blanks must be Filled

Lease Operator: T-N-T Engineering, Inc.

Address: 3711 Maplewood Ave, Suite 201 - Wichita Falls, TX 76308

Phone: (940) 691-9157 Operator License #: 33699

Type of Well: D&A Docket #: _____
(Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR)

The plugging proposal was approved on: 8/5/08 (Date)

by: Mike Maier (KCC District Agent's Name)

Is ACO-1 filed? Yes No If not, is well log attached? Yes No

Producing Formation(s): List All (If needed attach another sheet)

_____	Depth to Top: _____	Bottom: _____	T.D. _____
_____	Depth to Top: _____	Bottom: _____	T.D. _____
_____	Depth to Top: _____	Bottom: _____	T.D. _____

API Number: 15 - 119-21215 - 00-00

Lease Name: Ballard

Well Number: 24-1

Spot Location (QQQQ): _____ - _____ - NW - SE
1,980 Feet from North / South Section Line

1,980 Feet from East / West Section Line

Sec. 24 Twp. 33 S. R. 30 East West

County: Meade

Date Well Completed: 8/7/08

Plugging Commenced: 8/7/08

Plugging Completed: 8/7/08

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface Conductor & Production)				
Formation	Content	From	To	Size	Put In	Pulled Out
		0	1508'	8 5/8"	1508'	0

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Pump 1st plug @ 1540' with 50 sacks 60/40 poz cement, 4% gel, 2nd plug @ 640' with 40 sacks 60/40 poz cement, 4% gel, 3rd plug @ 60' with 20 sacks 60/40 poz cement, 4% gel, plug mouse hole with 10 sacks and rat hole with 15 sacks 60/40 poz cement, 4% gel

Name of Plugging Contractor: Titan Drilling LLC License #: 33630
KCC OKT per CPA/3

Address: P O Box 129, Liberal, KS 67905, 0129

Name of Party Responsible for Plugging Fees: T-N-T Engineering, Inc.

State of Texas County, Wichita, ss.

John Berryhill (Employee of Operator) or (Operator) on above-described well, being first duly

sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

(Signature) John Berryhill
(Address) 3711 Maplewood Ave, Suite 201 - Wichita Falls, TX 76308

SUBSCRIBED and SWORN TO before me this 7th day of October, 20 08
Susan L VanHusen My Commission Expires: May 26 2010
Notary Public



Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

PT



Liberal

PAGE 1 of 1	CUST NO 1975-TNT002	INVOICE DATE 08/07/2008
INVOICE NUMBER 1975001214		

B I L L
 T-N-T ENGINEERING
 3711 MAPLEWOOD
 SUITE 201
 WICHITA FALLS TX 76308
 ATTN: LEE BATES

J O B
 LEASE NAME Ballard
 WELL NO. 24-1
 COUNTY Meade
 STATE Ks
 JOB DESCRIPTION Cement-New Well Casing/Pipe
 JOB CONTACT LEE BATES

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
1975-01220	301		Net 30 DAYS	09/06/2008	
For Service Dates: 08/07/2008 to 08/07/2008					
1975-01220					
1975-20328 Cement-New Well Casing 8/7/08					
Pump Charge-Hourly		1.00	Hour	1500.000	1,500.00
Depth Charge; 1001'-2000'					
Mileage		135.00	DH	1.400	189.00
Blending & Mixing Service Charge					
Mileage		40.00	DH	7.000	280.00
Heavy Equipment Mileage					
Mileage		117.00	DH	1.600	187.20
Proppant and Bulk Delivery Charge					
Miscellaneous		1.00	EA	250.000	250.00
Plug Container Charge (drill pin x-hole)					
Pickup		20.00	Hour	4.250	85.00
Car, Pickup or Van Mileage					
Additives		234.00	EA	0.250	58.50 T
Cement Gel					
Cement		135.00	EA	12.000	1,620.00 T
60/40 POZ					
Supervisor		1.00	Hour	175.000	175.00
Service Supervisor Charge					
<p>Number <u>18403^a</u> Inv <u>1975001214</u> Meter <u>1040</u> Date <u>8/7</u> <u>4450.45</u> Disc. _____ <u>8/30</u> Mon'n _____ 5011 Sub <u>30</u> Loc <u>BALLARD 24-1</u> <u>5011</u> <u>30</u> <u>AFE</u></p>					
RECEIVED KANSAS CORPORATION COMMISSION OCT 09 2008 CONSERVATION DIVISION WICHITA, KS					

PLEASE REMIT TO:
BASIC ENERGY SERVICES, LP
 PO BOX 841903
 DALLAS, TX 75284-1903

SEND OTHER CORRESPONDENCE TO:
 BASIC ENERGY SERVICES, LP
 PO BOX 10460
 MIDLAND, TX 79702

SUBTOTAL 4,344.70
TAX 105.75
INVOICE TOTAL 4,450.45

BASIC

energy services, L.P.

FIELD ORDER 20328

Subject to Correction

Date 8-7-08	Customer ID	Lease Ballard	Well # 24-1	Legal 24-33-30
CHARGE TNT Engineering		County Monroe	State KS	Station Liberal, KS
		Depth	Formation	Shoe Joint
		Casing 1 1/2 in	Casing Depth 540' 440' 60'	TD
		Customer Representative D. Rice	Treater A. Olvera	Job Type 4 1/2 DTA-CNU
AFE Number		PO Number		Materials Received by X David E Rice

Station Code	Product Code	QUANTITY	MATERIALS, EQUIPMENT, and SERVICES USED	UNIT PRICE	AMOUNT
Liberal	CL103	135 sk	60/40 Poz		1620.00
	CC200	234 lb	Cement Gel		58.50
	E101	40 mi	Heavy Equipment Mileage		280.00
	CE240	135 sk	Blending + Mixing Service Charge		189.00
	E113	17 + m	Proppant + Bulk Delivery Charges, per ton/mile		187.20
	CE202	1-4 hrs.	Depth Charge (1001-2000')		1500.00
	E100	20 mi	Unit Mileage Charge - Pickup		85.00
	S003	1 ea	Service Supervisor		175.00
Liberal	CE504	1 ea	Drill Pin - X-hole		250.00
			Discounted Price		
			Plus Tax		4344.70

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KANSAS CORPORATION COMMISSION
OCT 09 2008
CONSERVATION DIVISION
WICHITA, KS

Customer: TNT Engineering	Lease No.	Date: 8-7-08
Lease: Ballard	Well #: 24-1	
Field Order #: 20328	Station: Liberal, KS	County: Mande
Type Job: 4 1/2 PTA - CNW	Formation:	State: KS
	Casing: 4 1/2" DR.	Depth: 1570', 610', 60'
		Legal Description: 24-33-30

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	

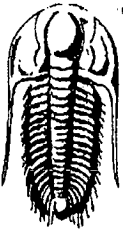
Customer Representative: D. Rice	Station Manager: J. Bennett	Treater: A. Olvera
Service Units: 19868, 19820, 19888, 19919, 19805, 19883		
Driver Names: A. Olvera, D. Arrington, M. Petre, C. Rodriguez		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
18:30					On Loc, Spot, trucks, Rigup
23:00					Safety meeting
23:15					circ hole (1540')
23:20					switch to cont line
23:21	100		3.6	4	pumped 15.6 bbls slurry (50 sts)
23:25	100		15	4	Displaced w/ mud 15 bbls, pull stands
00:10	100			4	circ hole w/ mud (610')
00:15	100		11	3	pumped 11 bbls slurry (10 sts)
00:25	100		3	3	Displaced w/ mud 30 bbls, pull stand
1:45					circ hole w/ mud (60')
1:50	0		5	3	pumped 5 bbls slurry (20 sts)
2:00					circ cont surface
2:30	0		5	3	plug rat & mouse hole
					Thank you

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KANSAS CORPORATION COMMISSION

OCT 09 2008

CONSERVATION DIVISION
WICHITA, KS



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

TNT Engineering Inc.

Ballard 24-1

3711 Maplewood Ste.201 Wichita Falls TX. 76308-2101

24/33/30

Job Ticket: 30987

DST#: 1

ATTN: Ed Greaves

Test Start: 2008.08.02 @ 14:00:00

GENERAL INFORMATION:

Formation: **Upper Morrow**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 17:32:00

Time Test Ended: 00:46:30

Test Type: Conventional Bottom Hole

Tester: Harley Davidson

Unit No: 33

Interval: **5772.00 ft (KB) To 5790.00 ft (KB) (TVD)**

Reference Elevations: 2709.00 ft (KB)

Total Depth: 5790.00 ft (KB) (TVD)

2697.00 ft (CF)

Hole Diameter: 7.78 inches Hole Condition: Fair

KB to GR/CF: 12.00 ft

Serial #: 6751 Inside

Press@RunDepth: 23.22 psig @ 5778.00 ft (KB)

Capacity: 7000.00 psig

Start Date: 2008.08.02

End Date:

2008.08.03

Last Calib.: 2008.08.03

Start Time: 14:00:01

End Time:

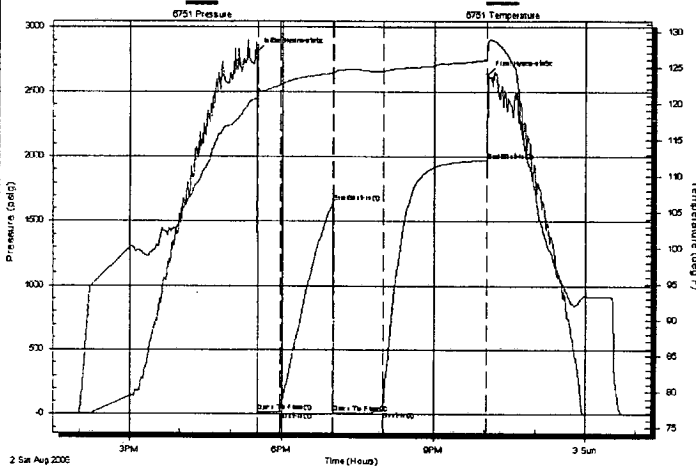
00:46:30

Time On Btm: 2008.08.02 @ 17:30:45

Time Off Btm: 2008.08.02 @ 22:03:15

TEST COMMENT: IF- Strong blow , BOB ASAO, No GTS.
 IS- No blow back.
 FF- Strong blow BOB, ASAO, No GTS.
 FS- Weak surface blow .

Pressure vs. Time



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2808.91	120.72	Initial Hydro-static
2	16.61	121.26	Open To Flow (1)
28	20.43	122.53	Shut-In(1)
90	1646.67	124.13	End Shut-In(1)
91	13.84	124.08	Open To Flow (2)
149	23.22	124.41	Shut-In(2)
272	1972.98	125.99	End Shut-In(2)
273	2635.63	128.44	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	100% mud.	0.05
0.00	GIP 5720 top to bottom	0.00

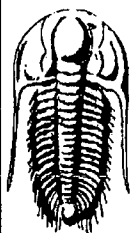
Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

RECEIVED
 KANSAS CORPORATION COMMISSION

OCT 09 2008

CONSERVATION DIVISION
 WICHITA, KS



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

TNT Engineering Inc.

Ballard 24-1

3711 Maplewood Ste.201 Wichita Falls TX. 76308-2101

24/33/30

Job Ticket: 30987

DST#: 1

ATTN: Ed Greaves

Test Start: 2008.08.02 @ 14:00:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 54.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.96 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 3100.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
10.00	100% mud.	0.049
0.00	GIP 5720 top to bottom	0.000

Total Length: 10.00 ft Total Volume: 0.049 bbl

Num Fluid Samples: 0

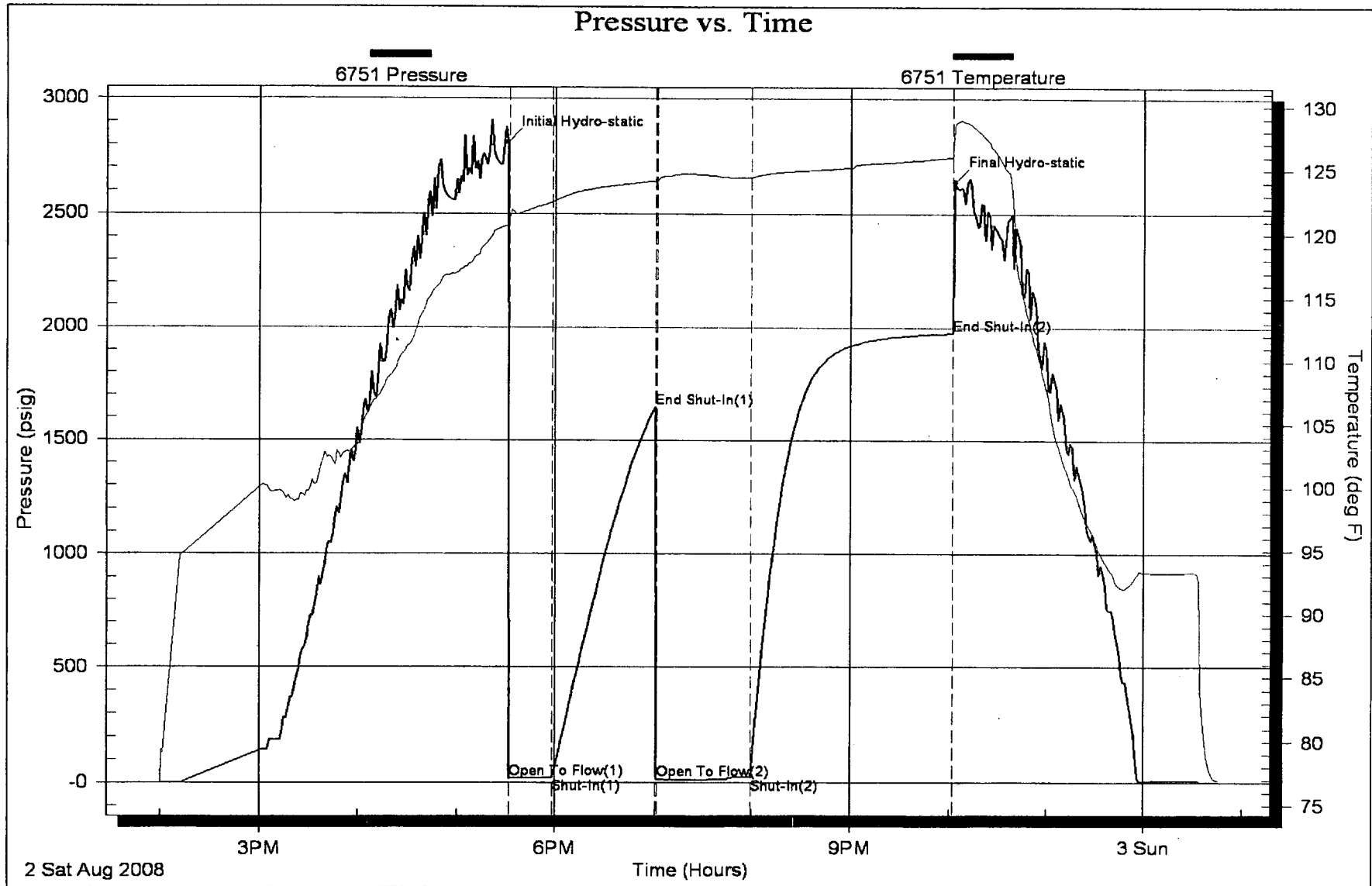
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



For KCC Use ONLY

API # 15 - _____

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Operator: Oolite Energy

Lease: Clarence

Well Number: 1

Field: Novinger

Number of Acres attributable to well: _____

QTR/QTR/QTR/QTR of acreage: _____ - _____ - NW - SE

Location of Well: County: Meade

1,980 feet from N / S Line of Section
1,980 feet from E / W Line of Section
 Sec. 24 Twp. 33 S. R. 30 E W

Is Section: Regular or Irregular

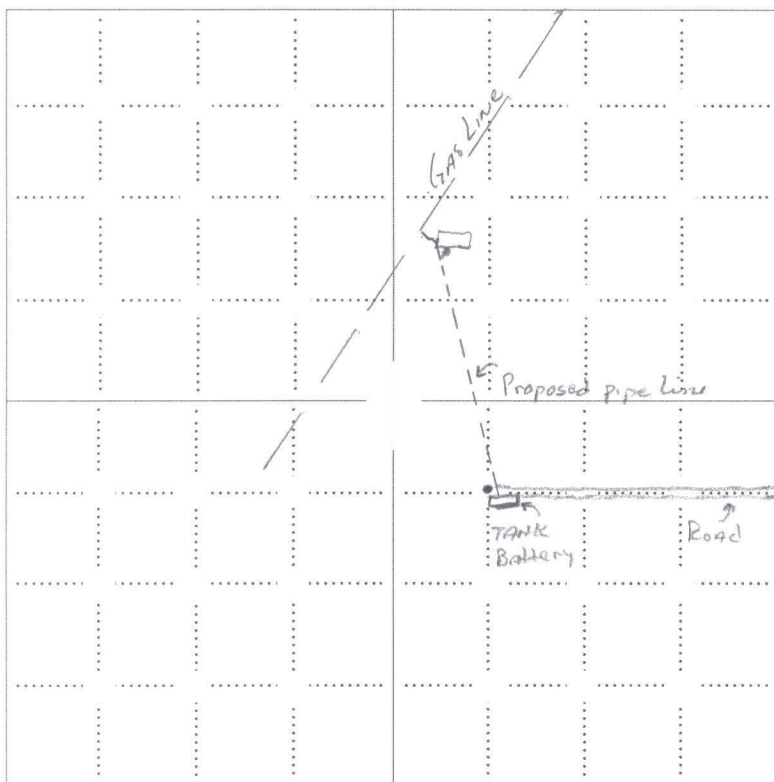
If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

PLAT

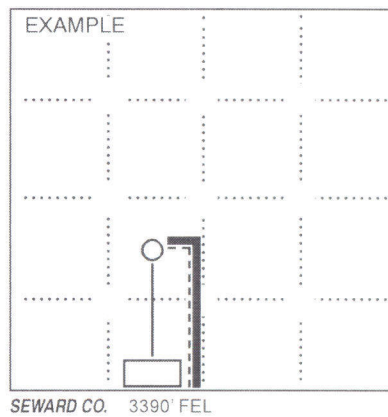
Show location of the well. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032).

You may attach a separate plat if desired.



LEGEND

- Well Location
- Tank Battery Location
- Pipeline Location
- Electric Line Location
- Lease Road Location



NOTE: In all cases locate the spot of the proposed drilling locaton.

In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the south / north and east / west outside section lines.
3. The distance to the nearest lease or unit boundary line (in footage).
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).
5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.