



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
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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: \_\_\_\_\_



1055127

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**BASIC**  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.  
P.O. Box 129  
Liberal, Kansas 67905  
Phone 620-624-2277

FIELD SERVICE TICKET  
1717 01344 A

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

DATE OF JOB: 12-10-10 DISTRICT: 1717		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: Griffin Management		LEASE: Gates #1 WELL NO.:							
ADDRESS:		COUNTY: Harper STATE: KS							
CITY: STATE:		SERVICE CREW: M. Stegman							
AUTHORIZED BY: J Bennett		JOB TYPE: 242 85% Surface							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
31726	9						12-10-10	PM	7:03
30464-	7							PM	7:00
19919-	2							PM	10:00
19959	2							PM	11:00
21010	2							PM	11:30
						MILES FROM STATION TO WELL	70 mi		

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	
CP100	Common	SK	200		3200 00	
CC102	Cellulose	lb	50		185 00	
CC109	Calcium Chloride	lb	376		391 50	
CF153	85% Wooden Plug	ea	1		100 00	
E100	Unit Mileage	mi	70		277 50	
E101	Heavy Equipment Mileage	mi	140		950 00	
E113	Pumpout + Bulk Delivery	hour	16.58		1052 50	
CE200	Pump Depth: 0-500'	ea	1		1000 00	
CE240	Blending + Mixing Service	SK	200		280 00	
CE504	Plug Container	ea	1		250 00	
3003	Service Supervisor	ea	1		175 00	
					SUB TOTAL	\$5742.07

CHEMICAL / ACID DATA:			

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

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



**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 03137 A

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

DATE OF JOB <u>12/17/10</u> DISTRICT <u>PRATT, Ks.</u>		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 <u>GRIFFIN MANAGEMENT</u>		LEASE <u>GATES</u> WELL NO. <u>10</u>								
ADDRESS		COUNTY <u>HARPER</u> STATE <u>Ks.</u>								
CITY STATE		SERVICE CREW <u>KC, CHAS, BRAD</u>								
AUTHORIZED BY		JOB TYPE: <u>CNW - LOW STRONG</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>19901</u>							<u>12-17</u>			<u>0600</u>
						ARRIVED AT JOB				<u>0200</u>
<u>27463</u>	<u>3/4</u>					START OPERATION				<u>200</u>
						FINISH OPERATION				<u>245</u>
<u>19959</u>	<u>2/6</u>					RELEASED				<u>330</u>
<u>21010</u>	<u>7/6</u>					MILES FROM STATION TO WELL				<u>75</u>

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
CP105	1/2" CEMENT	SK	150		2550.00
CP103	60/40 PZ	SK	50		600.00
PC102	CELLULASE	lb.	38		140.60
CC111	SACI	lb.	685		342.50
CC112	CFR	lb.	71		426.00
CC115	CNS BLOK	lb.	141		226.15
CC201	C. ESOWITE	lb.	750		502.50
CE607	5/8 LATCH DOWN PLUG	EA	1		400.00
CE1251	5/8 AFM BLOW SHOE	EA	1		360.00
CF1651	5/8 TURBOLEZER	EA	4		440.00
CF1901	5/8 BITSILET	EA	1		290.00
CF204	ES-16 KCL	gal	5		175.00
CC151	MUDFLUSH	gal	560		430.60
E100	PICKUP MILE	mile	75		318.75
E101	TRUCK MILE	mile	150		1050.00
E113	BULL WELDING	TM	690		1104.00
CE205	PUMP CHARGE	EA	1		2520.00
CE240	BLENDED CHARGE	SK	200		280.00
CE504	PLUG CONTAINER	EA	1		250.00
5003	SERVICE SUPERVISOR	EA	1		175.00
SUB TOTAL					175.00

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		DLS 9417.96

SERVICE REPRESENTATIVE K. COLWELLY THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: \_\_\_\_\_  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

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

Customer <i>GROFFEN MANAGER MENT</i>	Lease No. <i>GATES</i>	Well # <i>19</i>	Date <i>12-17-10</i>
Field Order # <i>3137</i>	Station <i>PRATT, KS</i>	Casing <i>5 1/2</i>	Depth <i>4757</i>
Type Job <i>ANN - LONGSTROKE</i>	Formation <i>TD-4760</i>	County <i>HARPER</i>	State <i>KS</i>
Legal Description <i>2-34-8</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>4757</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>4744</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative <i>GEORGE</i>	Station Manager <i>SCOTTY</i>	Treater <i>HORSLEY</i>
Service Units <i>19907</i>	<i>27463</i>	<i>19959-21010</i>
Driver Names <i>169</i>	<i>CITRUS</i>	<i>BRAD</i>

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>0500</i>					<i>ON LOCATION</i>
					<i>RUN 4751' 5 1/2" OSC - 116 ITS</i>
					<i>FLOW SHOBE - LATCH BATTLE 12" COLLAR</i>
					<i>CEMT-1-3-5-7 BASKET - 8</i>
<i>1100</i>					<i>TRAIL BOTTOM, DROP BALL - CONC.</i>
					<i>5 1/2" SET AT 4757' - COLLAR GROUND LEVEL</i>
<i>1200</i>	<i>300</i>		<i>5</i>	<i>6</i>	<i>PUMP 5 bbl H<sub>2</sub>O</i>
	<i>300</i>		<i>12</i>	<i>6</i>	<i>PUMP 12 bbl MUDFLUSH</i>
	<i>300</i>		<i>5</i>	<i>6</i>	<i>PUMP 5 bbl H<sub>2</sub>O</i>
	<i>200</i>		<i>36</i>	<i>6</i>	<i>MIX 150 SK AA2 CEMENT</i>
					<i>10% SARA, 5% SIK CONSUMATE, 1/4" SIK</i>
					<i>CELLULOSE, .5% CFR, 1% GAS BLOC</i>
					<i>AT 15.3 PPG, 1.36 CF/SL</i>
					<i>STOP - WASH LINE - DROP PLUG</i>
	<i>0</i>		<i>0</i>	<i>6 1/2</i>	<i>START DISP. W/ 2% KCL H<sub>2</sub>O</i>
	<i>200</i>		<i>85</i>	<i>6 1/2</i>	<i>LIFT CEMENT</i>
	<i>800</i>		<i>108</i>	<i>4</i>	<i>SLOW RATE</i>
<i>1245</i>	<i>200</i>		<i>113</i>	<i>3</i>	<i>PLUG DOWN - HOLD</i>
					<i>PLUG RAT HOLE - 30 SK 60/40 P02</i>
					<i>PLUG MOUNT HOLE - 20 SK 60/40 P02</i>
<i>1330</i>					<i>JOB COMPLETE - HEVEN</i>



**TRILOBITE  
TESTING, INC.**

## DRILL STEM TEST REPORT

Prepared For: **Charles N Griffin**

PO Box 347  
Pratt KS 67124

ATTN: Bruce Reed

**2-34s-8w Harper,KS**

**Gates #1**

Start Date: 2010.12.15 @ 04:20:53

End Date: 2010.12.15 @ 12:33:53

Job Ticket #: 37403                      DST #: 1

Trilobite Testing, Inc

PO Box 1733 Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

Charles N Griffin

Gates #1

2-34s-8w Harper,KS

DST # 1

Miss

2010.12.15



**TRILOBITE TESTING, INC**

**DRILL STEM TEST REPORT**

Charles N Griffin  
 PO Box 347  
 Pratt KS 67124  
 ATTN: Bruce Reed

**Gates #1**  
**2-34s-8w Harper,KS**  
 Job Ticket: 37403      DST#: 1  
 Test Start: 2010.12.15 @ 04:20:53

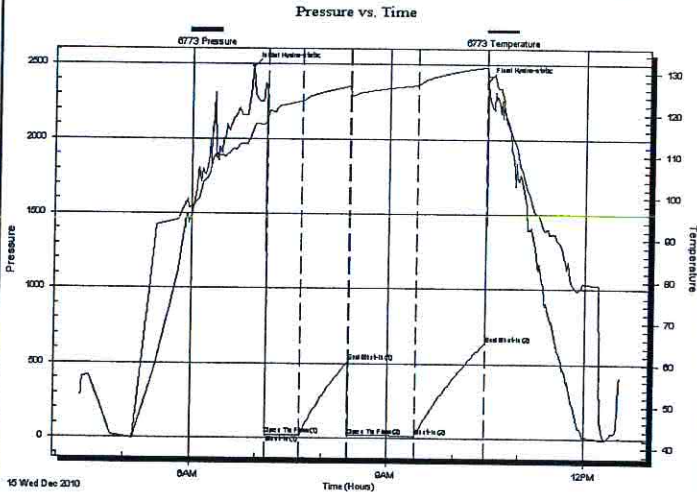
**GENERAL INFORMATION:**

Formation: **Miss**  
 Deviated: **No** Whipstock: **ft (KB)**  
 Time Tool Opened: 07:09:08  
 Time Test Ended: 12:33:53  
 Interval: **4635.00 ft (KB) To 4654.00 ft (KB) (TVD)**  
 Total Depth: **4654.00 ft (KB) (TVD)**  
 Hole Diameter: **7.88 inches** Hole Condition: **Fair**  
 Test Type: **Conventional Bottom Hole**  
 Tester: **Esak Hadley**  
 Unit No: **34**  
 Reference Elevations: **1395.00 ft (KB)**  
    **1384.00 ft (CF)**  
    KB to GR/CF: **11.00 ft**

**Serial #: 6773**      **Inside**  
 Press@RunDepth: **16.77 psig @ 4636.00 ft (KB)**  
 Start Date: **2010.12.15**      End Date: **2010.12.15**  
 Start Time: **04:20:58**      End Time: **12:33:52**  
 Capacity: **8000.00 psig**  
 Last Calib.: **2010.12.15**  
 Time On Btm: **2010.12.15 @ 06:55:38**  
 Time Off Btm: **2010.12.15 @ 10:29:53**

**TEST COMMENT:** IF Strong blow . BOB in 30 sec.  
 ISI No blow .  
 FF Strong blow . BOB in 2 sec.  
 FSI No blow .

**PRESSURE SUMMARY**



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2482.87	115.91	Initial Hydro-static
14	20.10	119.11	Open To Flow (1)
45	18.99	123.03	Shut-In(1)
88	510.05	126.67	End Shut-In(1)
89	14.89	124.63	Open To Flow (2)
150	16.77	126.88	Shut-In(2)
214	635.64	131.33	End Shut-In(2)
215	2389.94	129.27	Final Hydro-static

**Recovery**

Length (ft)	Description	Volume (bbl)
15.00	SGCM 2%g 98%m	0.21
0.00	GIP 868 ft	0.00

**Gas Rates**

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



**TRILOBITE**  
TESTING, INC

## DRILL STEM TEST REPORT

TOOL DIAGRAM

Charles N Griffin

Gates #1

PO Box 347  
Pratt KS 67124

2-34s-8w Harper, KS

Job Ticket: 37403

DST#: 1

ATTN: Bruce Reed

Test Start: 2010.12.15 @ 04:20:53

### Tool Information

Drill Pipe:	Length: 4644.00 ft	Diameter: 3.80 inches	Volume: 65.14 bbl	Tool Weight: 2100.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 24000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 80000.00 lb
			Total Volume: 65.14 bbl	Tool Chased 0.00 ft
Drill Pipe Above KB:	30.00 ft			String Weight: Initial 64000.00 lb
Depth to Top Packer:	4635.00 ft			Final 66000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	19.00 ft			
Tool Length:	40.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

### Tool Description

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4615.00	
Shut In Tool	5.00			4620.00	
Hydraulic tool	5.00			4625.00	
Packer	5.00			4630.00	21.00 Bottom Of Top Packer
Packer	5.00			4635.00	
Stubb	1.00			4636.00	
Recorder	0.00	8166	Outside	4636.00	
Recorder	0.00	6773	Inside	4636.00	
Perforations	15.00			4651.00	
Bullnose	3.00			4654.00	19.00 Bottom Packers & Anchor
<b>Total Tool Length:</b>	<b>40.00</b>				





**TRILOBITE  
TESTING, INC**

## DRILL STEM TEST REPORT

FLUID SUMMARY

Charles N Griffin

Gates #1

PO Box 347  
Pratt KS 67124

2-34s-8w Harper, KS

Job Ticket: 37403

DST#: 1

ATTN: Bruce Reed

Test Start: 2010.12.15 @ 04:20:53

### 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: 48.00 sec/qt	Cushion Volume: bbl		
Water Loss: 8.78 in <sup>3</sup>	Gas Cushion Type:		
Resistivity: 0.00 ohm.m	Gas Cushion Pressure: psig		
Salinity: 4000.00 ppm			
Filter Cake: 0.20 inches			

### Recovery Information

Recovery Table

Length ft	Description	Volume bbl
15.00	SGCM 2%g 98%m	0.210
0.00	GIP 868 ft	0.000

Total Length: 15.00 ft      Total Volume: 0.210 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

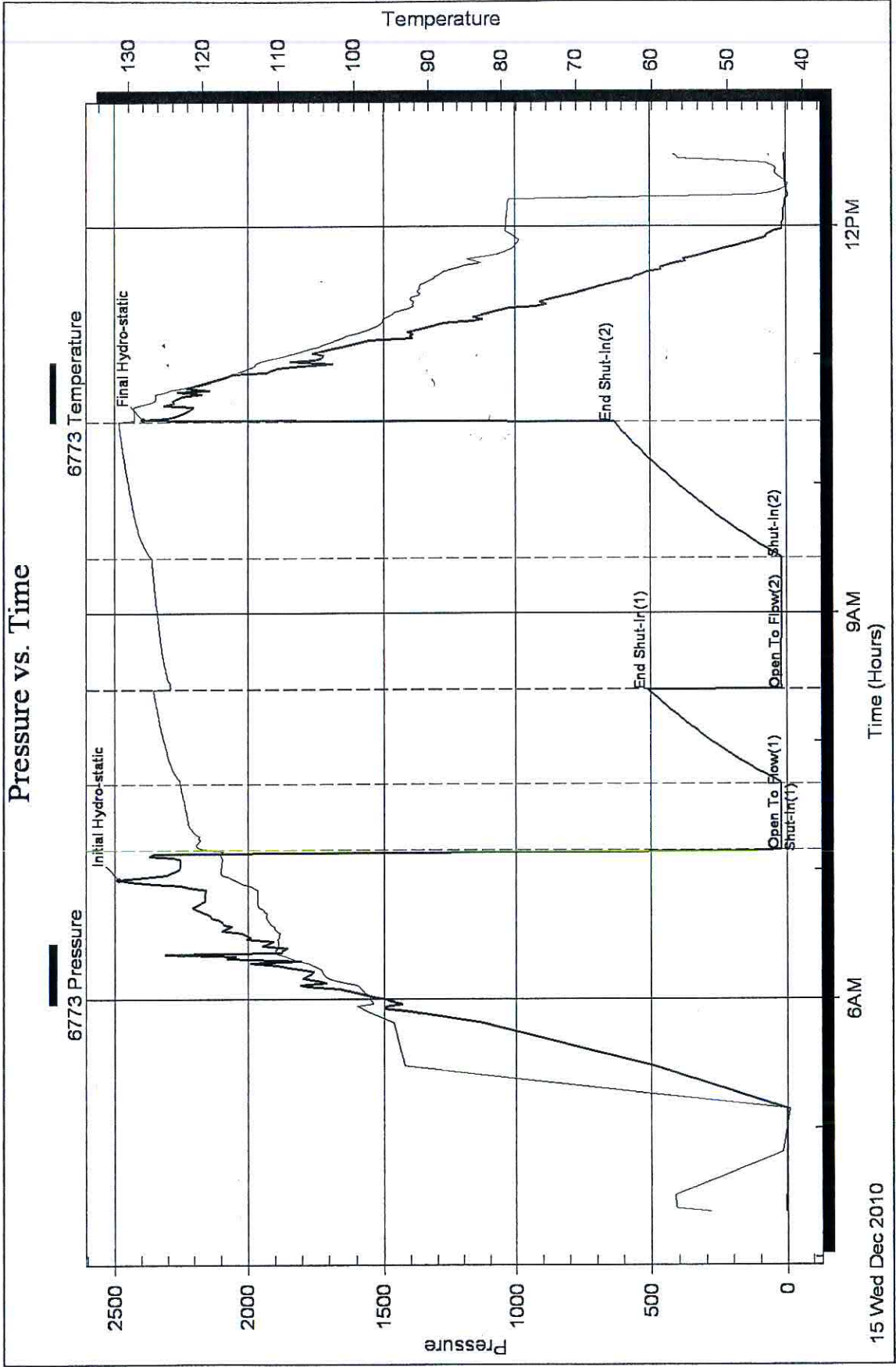
Serial #:

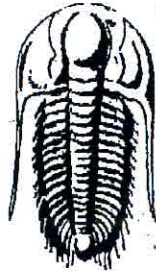
Laboratory Name:

Laboratory Location:

Recovery Comments:

### Pressure vs. Time





**TRILOBITE  
TESTING, INC.**

## DRILL STEM TEST REPORT

Prepared For: **Charles N Griffin**

PO Box 347  
Pratt KS 67124

ATTN: Bruce Reed

**2-34s-8w Harper,KS**

**Gates #1**

Start Date: 2010.12.16 @ 01:51:47

End Date: 2010.12.16 @ 10:10:17

Job Ticket #: 37404                      DST #: 2

Trilobite Testing, Inc

PO Box 1733 Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

Charles N Griffin

Gates #1

2-34s-8w Harper,KS

DST # 2

Miss

2010.12.16



**TRILOBITE TESTING, INC**

# DRILL STEM TEST REPORT

Charles N Griffin

**Gates #1**

PO Box 347  
Pratt KS 67124

**2-34s-8w Harper, KS**

Job Ticket: 37404

**DST#: 2**

ATTN: Bruce Reed

Test Start: 2010.12.16 @ 01:51:47

## GENERAL INFORMATION:

Formation: **Miss**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 04:52:17

Time Test Ended: 10:10:17

Test Type: Conventional Bottom Hole

Tester: Esak Hadley

Unit No: 34

Interval: 4688.00 ft (KB) To 4698.00 ft (KB) (TVD)

Total Depth: 4698.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 1395.00 ft (KB)

1384.00 ft (CF)

KB to GR/CF: 11.00 ft

**Serial #: 6773** Inside

Press@RunDepth: 56.27 psig @ 4689.00 ft (KB)

Start Date: 2010.12.16

End Date: 2010.12.16

Start Time: 01:51:52

End Time: 10:10:16

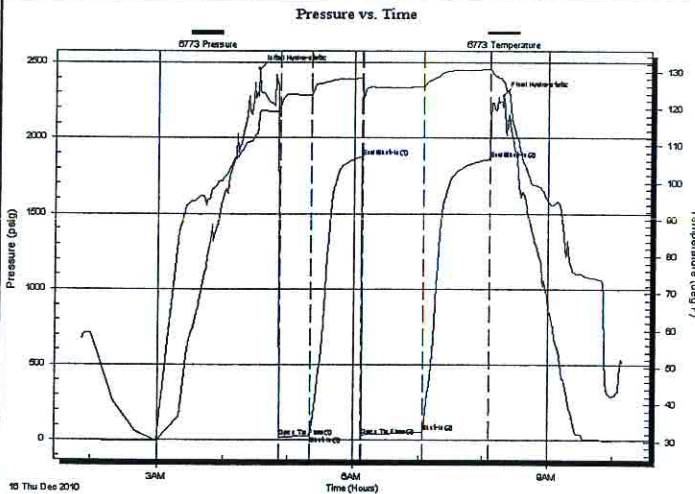
Capacity: 8000.00 psig

Last Calib.: 2010.12.16

Time On Btm: 2010.12.16 @ 04:32:32

Time Off Btm: 2010.12.16 @ 08:17:47

**TEST COMMENT:** IF Weak blow . BOB in 5 min.  
ISI No blow .  
FF Strong blow . BOB in 2 sec. GTS in 60 min.  
FSI No blow .



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2457.15	118.68	Initial Hydro-static
20	20.59	120.44	Open To Flow (1)
48	30.54	123.56	Shut-In(1)
95	1877.12	128.24	End Shut-In(1)
96	29.80	123.89	Open To Flow (2)
152	56.27	126.07	Shut-In(2)
213	1861.50	130.65	End Shut-In(2)
226	2282.23	127.71	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
40.00	O&GCWM 5%o 10%g 10%w 75%m	0.56
60.00	W&OCMG 10%w 15%o 35%m 40%g	0.84

## Gas Rates

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



**TRILOBITE  
TESTING, INC**

**DRILL STEM TEST REPORT**

**TOOL DIAGRAM**

Charles N Griffin

**Gates #1**

PO Box 347  
Pratt KS 67124

**2-34s-8w Harper,KS**

Job Ticket: 37404

**DST#: 2**

ATTN: Bruce Reed

Test Start: 2010.12.16 @ 01:51:47

**Tool Information**

Drill Pipe:	Length: 4675.00 ft	Diameter: 3.80 inches	Volume: 65.58 bbl	Tool Weight: 2100.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 24000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 72000.00 lb
			<b>Total Volume: 65.58 bbl</b>	Tool Chased 0.00 ft
Drill Pipe Above KB:	8.00 ft			String Weight: Initial 64000.00 lb
Depth to Top Packer:	4688.00 ft			Final 64000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	10.00 ft			
Tool Length:	31.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4668.00	
Shut In Tool	5.00			4673.00	
Hydraulic tool	5.00			4678.00	
Packer	5.00			4683.00	21.00 Bottom Of Top Packer
Packer	5.00			4688.00	
Stubb	1.00			4689.00	
Recorder	0.00	8166	Outside	4689.00	
Recorder	0.00	6773	Inside	4689.00	
Perforations	6.00			4695.00	
Bullnose	3.00			4698.00	10.00 Bottom Packers & Anchor
<b>Total Tool Length:</b>	<b>31.00</b>				



**TRILOBITE**  
TESTING, INC

# DRILL STEM TEST REPORT

FLUID SUMMARY

Charles N Griffin

Gates #1

PO Box 347  
Pratt KS 67124

2-34s-8w Harper,KS

Job Ticket: 37404

DST#: 2

ATTN: Bruce Reed

Test Start: 2010.12.16 @ 01:51:47

## 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: 48.00 sec/qt	Cushion Volume: bbl		
Water Loss: 8.99 in <sup>3</sup>	Gas Cushion Type:		
Resistivity: 0.00 ohm.m	Gas Cushion Pressure: psig		
Salinity: 3000.00 ppm			
Filter Cake: 0.20 inches			

## Recovery Information

Recovery Table

Length ft	Description	Volume bbl
40.00	O&GCWM 5%o 10%g 10%w 75%m	0.561
60.00	W&OCMG 10%w 15%o 35%m 40%g	0.842

Total Length: 100.00 ft      Total Volume: 1.403 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Serial #: 6773

Inside

Charles N Griffin

2-34s-8w Harper,KS

DST Test Number: 2

### Pressure vs. Time

