



**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: \_\_\_\_\_



1062338

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  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%; border-bottom: 1px solid black;">Name</td> <td style="width:15%; border-bottom: 1px solid black;">Top</td> <td style="width:15%; border-bottom: 1px solid black;">Datum</td> </tr> </table>	Name	Top	Datum
Name	Top	Datum		

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 <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Terwort 5
Doc ID	1062338

All Electric Logs Run

Dual Induction
Neutron Density w/PE
Micro
Sonic

Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Terwort 5
Doc ID	1062338

Tops

Name	Top	Datum
Heebner	3806	-2388
KC	4330	-2912
BKC	4574	-3156
Cher SH	4710	-3292
Miss	4758	-3340
Viola	5178	-3760
Simp Sh	5225	-3807
Arb	5466	-4048
LTD	5535	-4117
RTD	5534	-4116
PBTD	5317	-3899



PO BOX 31 Russell, KS 67665

**RECEIVED**

MAY 28 2011

**INVOICE**

Invoice Number: 127271

Invoice Date: May 16, 2011

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

**Bill To:**

Lotus Operating Co., LLC  
 Lotus Exploration Co.  
 100 S. Main, STE 420  
 Wichita, KS 67202

Federal Tax I.D.#: 20-5975804

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Terwort #5	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Medicine Lodge	May 16, 2011	6/15/11

Quantity	Item	Description	Unit Price	Amount
135.00	MAT	Class A Common	16.25	2,193.75
90.00	MAT	Pozmix	8.50	765.00
4.00	MAT	Gel	21.25	85.00
8.00	MAT	Chloride	58.20	465.60
237.00	SER	Handling	2.25	533.25
20.00	SER	Mileage 237 sx @.11 per sk per mi	26.07	521.40
1.00	SER	Surface	1,125.00	1,125.00
40.00	SER	Pump Truck Mileage	7.00	280.00
40.00	SER	Light Vehicle Mileage	4.00	160.00
1.00	CEMENTER	David Felio		
1.00	EQUIP OPER	Ron Gilley		
1.00	CEMENTER	David Franklin		

ENTERED  
MAY 31 2011

GL# 9208  
 DESC. concrete surf. csq. + 5

WELL # Terwort

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 1225.80

ONLY IF PAID ON OR BEFORE

**Jun 10, 2011**

Subtotal	6,129.00
Sales Tax	256.18
Total Invoice Amount	6,385.18
Payment/Credit Applied	
<b>TOTAL</b>	<b>6,385.18</b>

1225.80  
 5159.38

# ALLIED CEMENTING CO., LLC. 040086

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
*Medicine Lodge KS*

DATE <i>05-16-11</i>	SEC. <i>34</i>	TWP. <i>34s</i>	RANGE <i>12w</i>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <i>9:45pm</i>
LEASE <i>Terwort</i>		WELL # <i>5</i>		LOCATION <i>201 # Drift wood, w to <del>201</del></i>		COUNTY <i>Barber</i>	STATE <i>KS</i>
OLD OR NEW <input checked="" type="radio"/> (Circle one)				<i>T, 1/8w, 1 1/2 w, n/into</i>			

CONTRACTOR *Duke #7* OWNER *Lotus Oper.*

TYPE OF JOB *Surface*

HOLE SIZE *14 3/4* T.D. *266'*

CASING SIZE *10 3/4* DEPTH *249' + 17' 8 1/2"*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX *250* MINIMUM *-*

MEAS. LINE SHOE JOINT *N/A*

CEMENT LEFT IN CSG. *20'*

PERFS.

DISPLACEMENT *24 1/4 Bbls Fresh H<sub>2</sub>O*

**EQUIPMENT**

PUMP TRUCK CEMENTER *D. Felix*

# *352* HELPER *R. Gilley*

BULK TRUCK

# *421-252* DRIVER *D. Franklin*

BULK TRUCK

# DRIVER

CEMENT AMOUNT ORDERED *225 sx 60:40:2% gel + 3% cc*

COMMON <i>Class A</i>	<i>135sx @ 16.25</i>	<i>2193.75</i>
POZMIX	<i>90sx @ 8.50</i>	<i>765.00</i>
GEL	<i>4sx @ 21.25</i>	<i>85.00</i>
CHLORIDE	<i>8sx @ 58.20</i>	<i>465.60</i>
ASC	@	

HANDLING *237/* @ *2.25* *533.25*

MILEAGE *237/20/11* *521.40*

TOTAL *4564.00*

**REMARKS:**

*Pipe on Btm, Break Circ, Pump Spacers, Mix 225 sx 60:40 cement, Start Disp. w/ Fresh H<sub>2</sub>O, See increase in PSI, Slow Rate, Stop Pump at 24 1/4 Bbls total Disp, Shut in, Cement Did Circulate,*

**SERVICE**

DEPTH OF JOB	<i>266'</i>	
PUMP TRUCK CHARGE		<i>1125.00</i>
EXTRA FOOTAGE	@	
MILEAGE	<i>40 @ 7.00</i>	<i>280.00</i>
MANIFOLD <i>N/A</i>	@ <i>N/A</i>	
<i>Light Vehicle</i>	<i>40 @ 4.00</i>	<i>160.00</i>

TOTAL *1565.00*

CHARGE TO: *Lotus Operating Co. LLC*

STREET *1005 Main St c 420*

CITY *Wichita* STATE *KS* ZIP *67202*

**PLUG & FLOAT EQUIPMENT**

*None* @

@

@

@

@

TOTAL

To Allied Cementing Co., LLC.  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

PRINTED NAME *Arden D Ranch*

SIGNATURE *Arden D Ranch*

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS \_\_\_\_\_



PO BOX 31 Russell, KS 67665

RECEIVED

JUN 04 2011

INVOICE

Invoice Number: 127342

Invoice Date: May 23, 2011

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

**Bill To:**

Lotus Operating Co., LLC  
 Lotus Exploration Co.  
 100 S. Main, STE 420  
 Wichita, KS 67202

Federal Tax I.D.#: 20-5975804

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Terwort #5	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Medicine Lodge	May 23, 2011	6/22/11

Quantity	Item	Description	Unit Price	Amount
30.00	MAT	Class A Common	16.25	487.50
20.00	MAT	Pozmix	8.50	170.00
2.00	MAT	Gel	21.25	42.50
175.00	MAT	ASC Class A	19.00	3,325.00
875.00	MAT	Kol Seal	0.89	778.75
82.00	MAT	FL-160	17.20	1,410.40
44.00	MAT	Flo Seal	2.70	118.80
281.00	SER	Handling	2.25	632.25
20.00	SER	Mileage 281 sx @ .11 per sk per mi	30.91	618.20
1.00	SER	Production Casing	2,695.00	2,695.00
40.00	SER	Pump truck Mileage	7.00	280.00
1.00	SER	Hed Rental	200.00	200.00
40.00	SER	Light Vehicle Mileage	4.00	160.00
1.00	EQP	5.5 Rubber Plug	73.00	73.00
1.00	EQP	5.5 Guide Shoe	240.00	240.00
1.00	EQP	5.5 AFU Insert	286.00	286.00
1.00	EQP	5.5 Basket	337.00	337.00
5.00	EQP	5.5 Centralizer	49.00	245.00
1.00	CEMENTER	Darin Franklin		
1.00	EQUIP OPER	Ron Gilley		
1.00	OPER ASSIST	Dustin Elam		

~~ENTERED  
JUN 03 2011~~

ENTERED  
JUN 03 2011

GL# 9308  
 DESC. Cement prod  
 Csg #5  
 WELL # TerWD

Subtotal	12,099.40
Sales Tax	548.52
Total Invoice Amount	12,647.92
Payment/Credit Applied	
<b>TOTAL</b>	<b>12,647.92</b>

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 2,419.88

ONLY IF PAID ON OR BEFORE

Jun 17, 2011

-2,419.88  
 \$10,228.04

# ALLIED CEMENTING CO., LLC. 040201

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
Medicine lease jr

DATE <u>5-23-2011</u>	SEC. <u>34</u>	TWP. <u>34S</u>	RANGE <u>12W</u>	CALLED OUT <u>7:00 AM</u>	ON LOCATION <u>9:00 AM</u>	JOB START <u>12:15 PM</u>	JOB FINISH <u>1:15 PM</u>
LEASE <u>Terwort</u>	WELL # <u>5</u>	LOCATION <u>281 &amp; Dr. P. Wood rd</u>			COUNTY <u>Barber</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)		<u>3 1/2 wgs, horizon into</u>					

CONTRACTOR Duke #7  
 TYPE OF JOB Production  
 HOLE SIZE 7 7/8 T.D. 5534  
 CASING SIZE 5 1/2 DEPTH 5352'  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT 30'  
 CEMENT LEFT IN CSG. \_\_\_\_\_  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT 131 bbls of Fresh water

OWNER Lotus Operating  
 CEMENT  
 AMOUNT ORDERED 50 sxs 60/40:4% G-1  
175 sxs Class A ASC + 5# Kansas  
.5% FL160 + 1/4# P105cc1  
 COMMON class A 30sxs @ 16.25 487.50  
 POZMIX 20sxs @ 8.50 170.00  
 GEL 29sxs @ 21.25 616.25  
 CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_  
 ASC class A 175sxs @ 19.00 3325.00  
 @ \_\_\_\_\_  
Kolseal 875# @ .89 778.75  
FL-160 82# @ 17.20 1410.40  
Flo Seal 44# @ 2.70 118.80  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 HANDLING 201 @ 2.25 632.25  
 MILEAGE 20/20/11 618.00  
 TOTAL 7583.40

**EQUIPMENT**

PUMP TRUCK CEMENTER Darin E  
 # 352 HELPER Ron G  
 BULK TRUCK  
 # 363-296 DRIVER Dustin E  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

**REMARKS:**

Pipe on bottom & break circulation, mix  
30sxs cement for Rst hole, mix 20sxs cement  
for mouse hole, mix 175sxs of soil cement  
Shot down, wash pump & lines, Release  
plug, set & displacement, lift pressure  
at 75 bbls, slow rate to 3 bpm at 120  
bbls, bump plug at 131 bbls 1000-1500 PS,  
flk & die hold

**SERVICE**

DEPTH OF JOB 5352  
 PUMP TRUCK CHARGE \_\_\_\_\_ 2695.00  
 EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_  
 MILEAGE 40 @ 7.00 280.00  
 MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_  
Has & rental @ \_\_\_\_\_ 200.00  
Light Vehicle 40 @ 4.00 160.00  
 TOTAL 3335.00

CHARGE TO: Lotus operating  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

5 1/2  
 1- Rubber plug @ 73.00  
 1- Guide shoe @ 240.00  
 1- AFU Insert @ 286.00  
 1- Basket @ 337.00  
 5- Cementizers @ 49.00 245.00  
 TOTAL 1181.00

To Allied Cementing Co., LLC.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Robin  
 SIGNATURE [Signature]

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES [Crossed out]  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS [Crossed out]

Thank you!!!



Conservation Division  
Finney State Office Building  
130 S. Market, Rm. 2078  
Wichita, KS 67202-3802



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Mark Sievers, Chairman  
Ward Loyd, Commissioner  
Thomas E. Wright, Commissioner

Sam Brownback, Governor

August 30, 2011

Tim Hellman  
Lotus Operating Company, L.L.C.  
100 S MAIN STE 420  
WICHITA, KS 67202-3737

Re: ACO1  
API 15-007-23689-00-00  
Terwort 5  
SW/4 Sec.34-34S-12W  
Barber County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,  
Tim Hellman



# **Weatherford<sup>®</sup>**

## **Completion Systems**

### **DRILL STEM TEST REPORT**

Prepared For: **Lotus Operating Co.LLC**

100 S.Main,Ste.420  
Wichita Ks.67202

ATTN: Tim Hellman

**34-34S-12w Barber Ks**

**Terwort#5**

Start Date: 2011.05.21 @ 17:39:56

End Date: 2011.05.22 @ 02:26:11

Job Ticket #: 37469                      DST #: 1

ALPINE OIL SERVICES CORPORATION  
2460, 240 - 4 Avenue S.W. Calgary, AB. T2P 4H4  
ph: 263-7800 fax: 264-7260



# Weatherford<sup>®</sup> Completion Systems

## DRILL STEM TEST REPORT

Lotus Operating Co.LLC

100 S.Main,Ste.420  
Wichita Ks.67202

ATTN: Tim Hellman

**Terwort#5**

**34-34S-12w Barber Ks**

Job Ticket: 37469

**DST#: 1**

Test Start: 2011.05.21 @ 17:39:56

### GENERAL INFORMATION:

Formation: **Misener**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 19:37:26

Time Test Ended: 02:26:11

Test Type: Conventional Bottom Hole

Tester: Gary Pevoteaux

Unit No: 56

**Interval: 5120.00 ft (KB) To 5150.00 ft (KB) (TVD)**

Reference Elevations: 1428.00 ft (KB)

Total Depth: 5150.00 ft (KB) (TVD)

1415.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 13.00 ft

**Serial #: 8167**

**Inside**

Press@RunDepth: 41.27 psig @ 5121.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2011.05.21

End Date:

2011.05.22

Last Calib.:

2011.05.22

Start Time: 17:40:01

End Time:

02:26:11

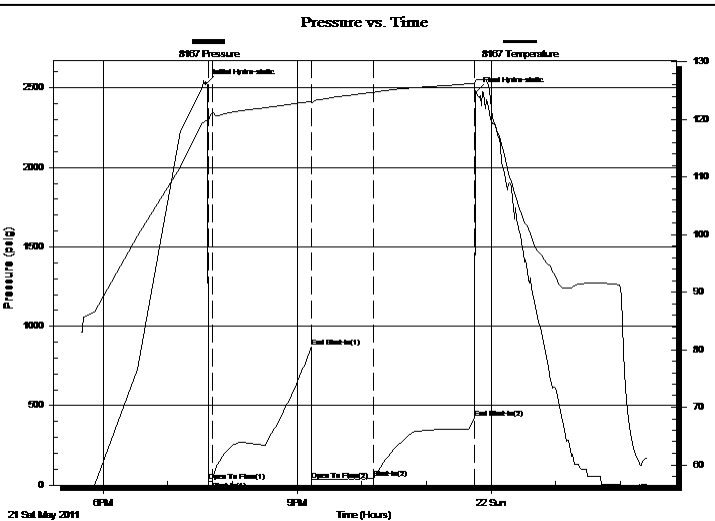
Time On Btm:

2011.05.21 @ 19:35:41

Time Off Btm:

2011.05.21 @ 23:46:11

**TEST COMMENT:** IF:Strong blow . B.O.B. in 3 mins.  
IS:Weak to fair blow . Increase to 8".  
FF:Strong blow . B.O.B. in 5 secs.  
FS:Weak to fair blow . Increase to 10".



### PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2527.65	119.79	Initial Hydro-static
2	23.54	119.54	Open To Flow (1)
6	25.99	121.06	Shut-In(1)
98	869.73	123.12	End Shut-In(1)
98	31.56	122.91	Open To Flow (2)
155	41.27	124.69	Shut-In(2)
249	421.31	126.26	End Shut-In(2)
251	2474.11	126.81	Final Hydro-static

### Recovery

Length (ft)	Description	Volume (bbl)
50.00	SOCM 2%o 98%m/Clean oil @ top of tool	0.25
0.00	2280 ft.of GIP	0.00

### Gas Rates

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



**Weatherford**<sup>®</sup>  
**Completion Systems**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Lotus Operating Co.LLC

**Terwort#5**

100 S.Main,Ste.420  
 Wichita Ks.67202

**34-34S-12w Barber Ks**

Job Ticket: 37469

**DST#: 1**

ATTN: Tim Hellman

Test Start: 2011.05.21 @ 17:39:56

## 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:

4000 ppm

Viscosity: 57.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 9.99 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 bbbl
50.00	SOCM 2%o 98%m/Clean oil @ top of tool	0.246
0.00	2280 ft.of GIP	0.000

Total Length: 50.00 ft      Total Volume: 0.246 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:

