



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1062371  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
August 2013

**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
- Plug Back       Conv. to GSW     Conv. to Producer
- 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

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum:  NAD27  NAD83  WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical 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**

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1062371

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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  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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
---	--

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<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> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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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

June 21, 2012

Ted McHenry  
Raymond Oil Company, Inc.  
PO BOX 48788  
WICHITA, KS 67202-1822

Re: ACO1  
API 15-109-21053-00-00  
Nuss 1  
SW/4 Sec.35-13S-32W  
Logan 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,  
Ted McHenry

## GENERAL INFORMATION

### Client Information:

Company: RAYMOND OIL COMPANY INC.

Contact: TED McHENRY

Phone: Fax: e-mail:

### Site Information:

Contact: KIM SHOEMAKER

Phone: Fax: e-mail:

### Well Information:

Name: NUSS #1

Operator: RAYMOND OIL COMPANY INC.

Location-Downhole:

Location-Surface: S35/13S/32W

### Test Information:

Company: DIAMOND TESTING

Representative: JOHN RIEDL

Supervisor: KIM SHOEMAKER

Test Type: CONVENTIONAL Job Number: D1103

Test Unit:

Start Date: 2012/03/11 Start Time: 12:00:00

End Date: 2012/03/11 End Time: 21:00:00

Report Date: 2012/03/11 Prepared By: JOHN RIEDL

Qualified By: KIM SHOEMAKER

### Remarks:

RECOVERY: 50' GAS+OIL CUT MUD



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

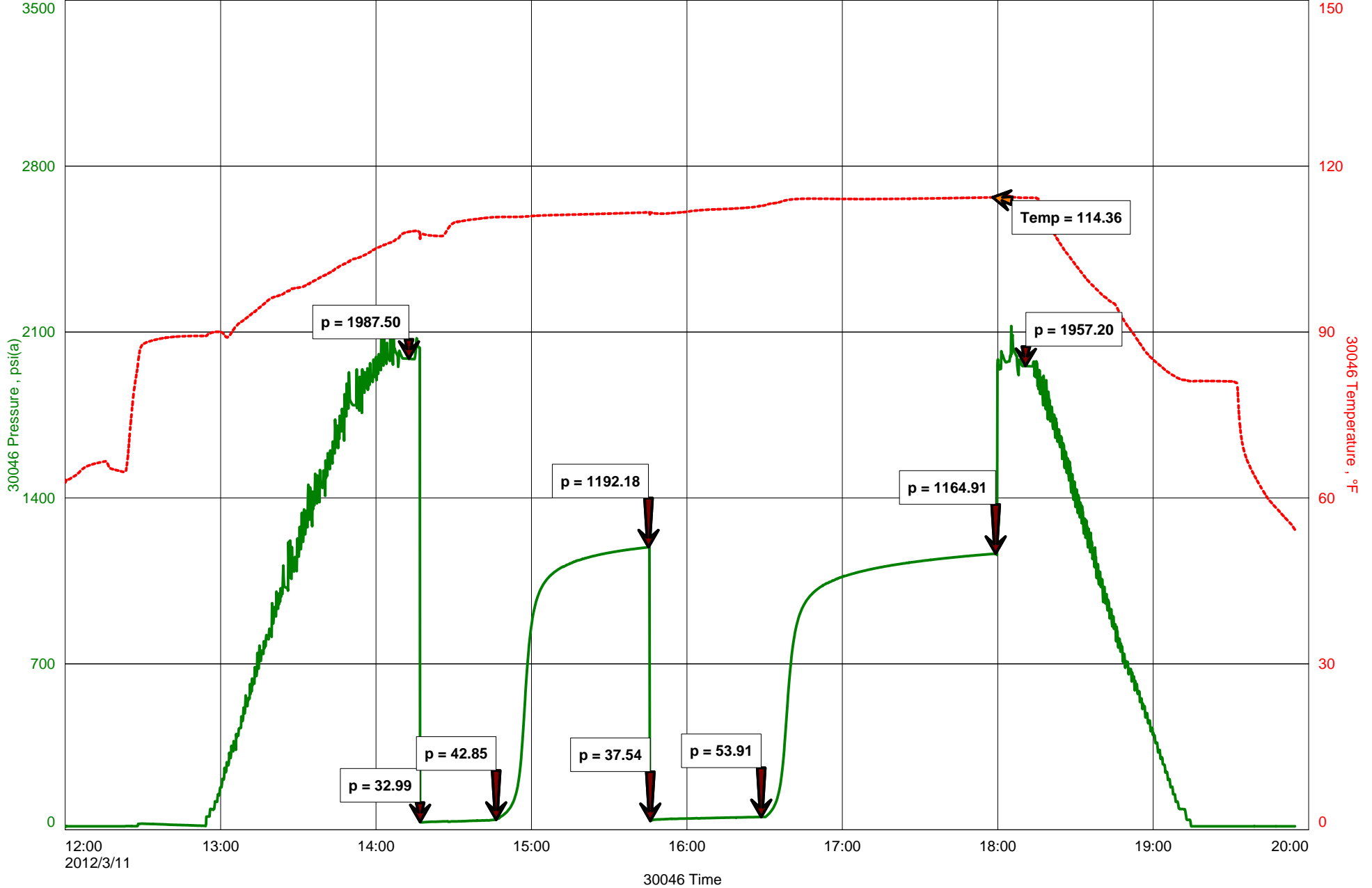
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Remarks: \_\_\_\_\_

	Price Job
	Other Charges
	Insurance
	Total

	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.

# NUSS #1



## GENERAL INFORMATION

### Client Information:

Company: RAYMOND OIL COMPANY INC

Contact: TED McHENRY

Phone: Fax: e-mail:

### Site Information:

Contact: KIM SHOEMAKER

Phone: Fax: e-mail:

### Well Information:

Name: NUSS #1

Operator: RAYMOND OIL COMPANY INC.

Location-Downhole:

Location-Surface: S35/13S/32W

### Test Information:

Company: DIAMOND TESTING

Representative: JOHN RIEDL

Supervisor: KIM SHOEMAKER

Test Type: CONVENTIONAL Job Number: D1104

Test Unit:

Start Date: 2012/03/12 Start Time: 00:00:00

End Date: 2012/03/13 End Time: 06:40:00

Report Date: 2012/03/13 Prepared By: JOHN RIEDL

Remarks: Qualified By: KIM SHOEMAKER

RECOVERY: 10' OIL SPECKED DRILLING MUD



# 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 \_\_\_\_\_

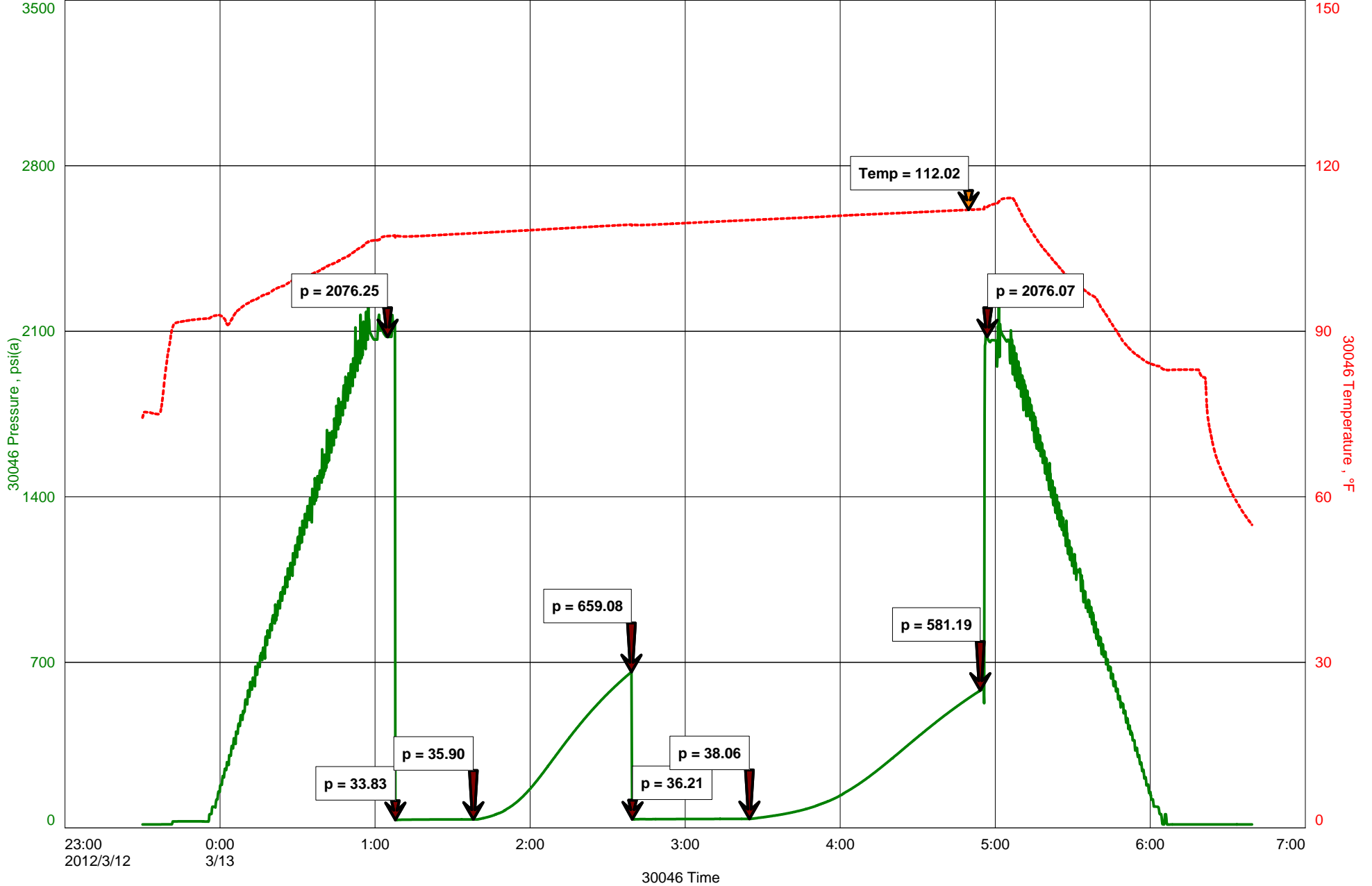
Remarks: _____ _____ _____	Price Job
	Other Charges
	Insurance
	Total

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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# NUSS #1



## GENERAL INFORMATION

### Client Information:

Company: RAYMOND OIL COMPANY INC.

Contact: TED McHENRY

Phone: Fax: e-mail:

### Site Information:

Contact: KIMSHOEMAKER

Phone: Fax: e-mail:

### Well Information:

Name: NUSS #1

Operator: RAYMOND OIL COMPANY INC.

Location-Downhole:

Location-Surface: S35/13S/32W

### Test Information:

Company: DIAMOND TESTING

Representative: JOHN RIEDL

Supervisor: KIM SHOEMAKER

Test Type: CONVENTIONAL Job Number: D1105

Test Unit:

Start Date: 2012/03/13 Start Time: 22:30:00

End Date: 2012/03/14 End Time: 06:00:00

Report Date: 2012/03/14 Prepared By: JOHN RIEDL

Qualified By: KIM SHOEMAKER

### Remarks:

RECOVERY: 300' GAS IN PIPE, 80' MUD+GAS CUT 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: \_\_\_\_\_

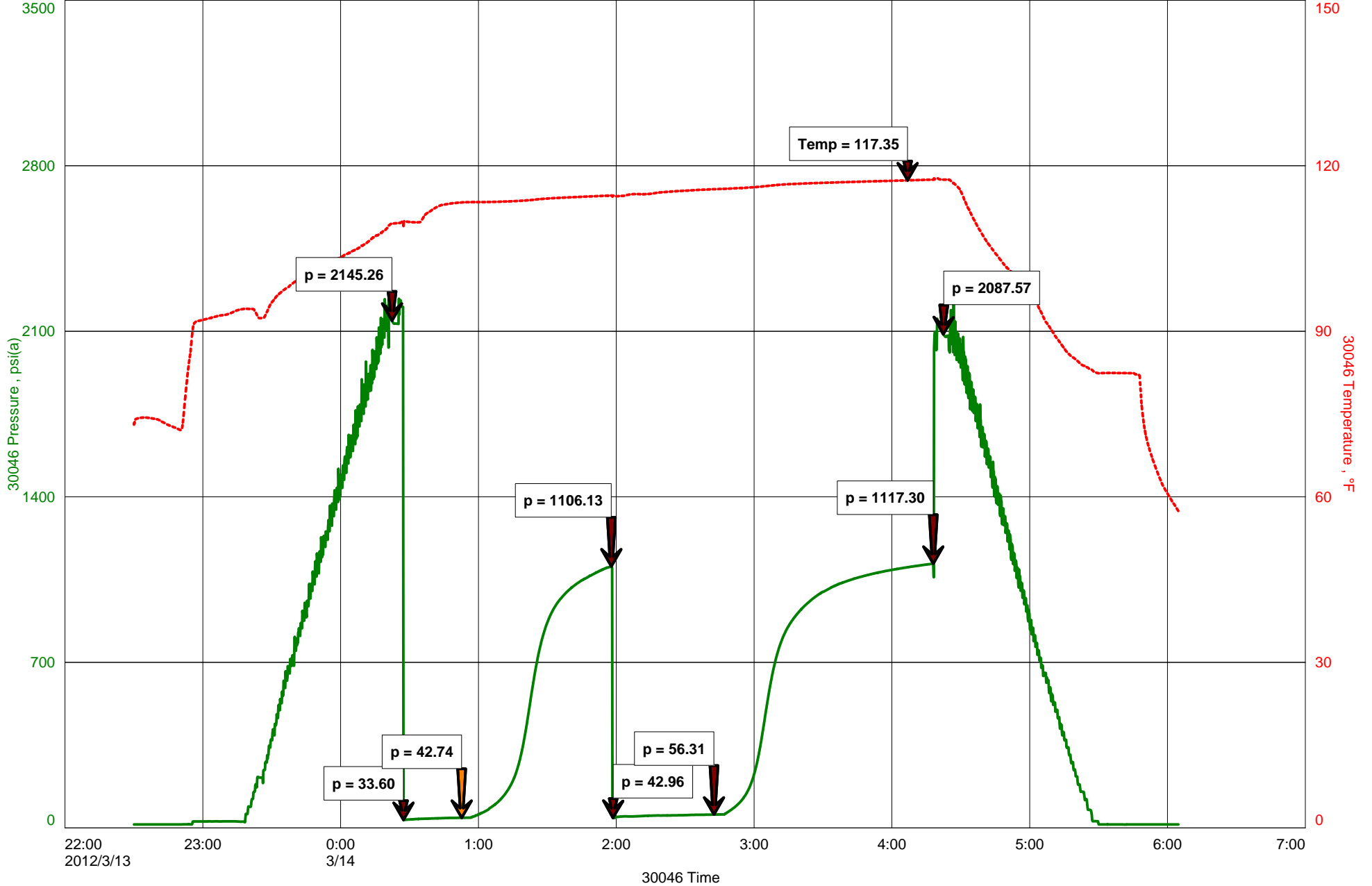
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

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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# NUSS #1



## GENERAL INFORMATION

### Client Information:

Company: RAYMOND OIL COMPANY INC.

Contact: TED McHENRY

Phone: Fax: e-mail:

### Site Information:

Contact: KIM SHOEMAKER

Phone: Fax: e-mail:

### Well Information:

Name: NUSS #1

Operator: RAYMOND OIL COMPANY INC.

Location-Downhole:

Location-Surface: S35/13S/32W

### Test Information:

Company: DIAMOND TESTING

Representative: JOHNRIEDL

Supervisor: KIM SHOEMAKER

Test Type: CONVENTIONAL Job Number: D1106

Test Unit:

Start Date: 2012/03/14 Start Time: 16:30:00

End Date: 2012/03/15 End Time: 00:40:00

Report Date: 2012/03/15 Prepared By: JOHN RIEDL

Remarks: Qualified By: KIM SHOEMAKER

RWCOVERY: 3' CLEAN OIL, 27'SLIGHTLY GAS+MUD CUT 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: \_\_\_\_\_

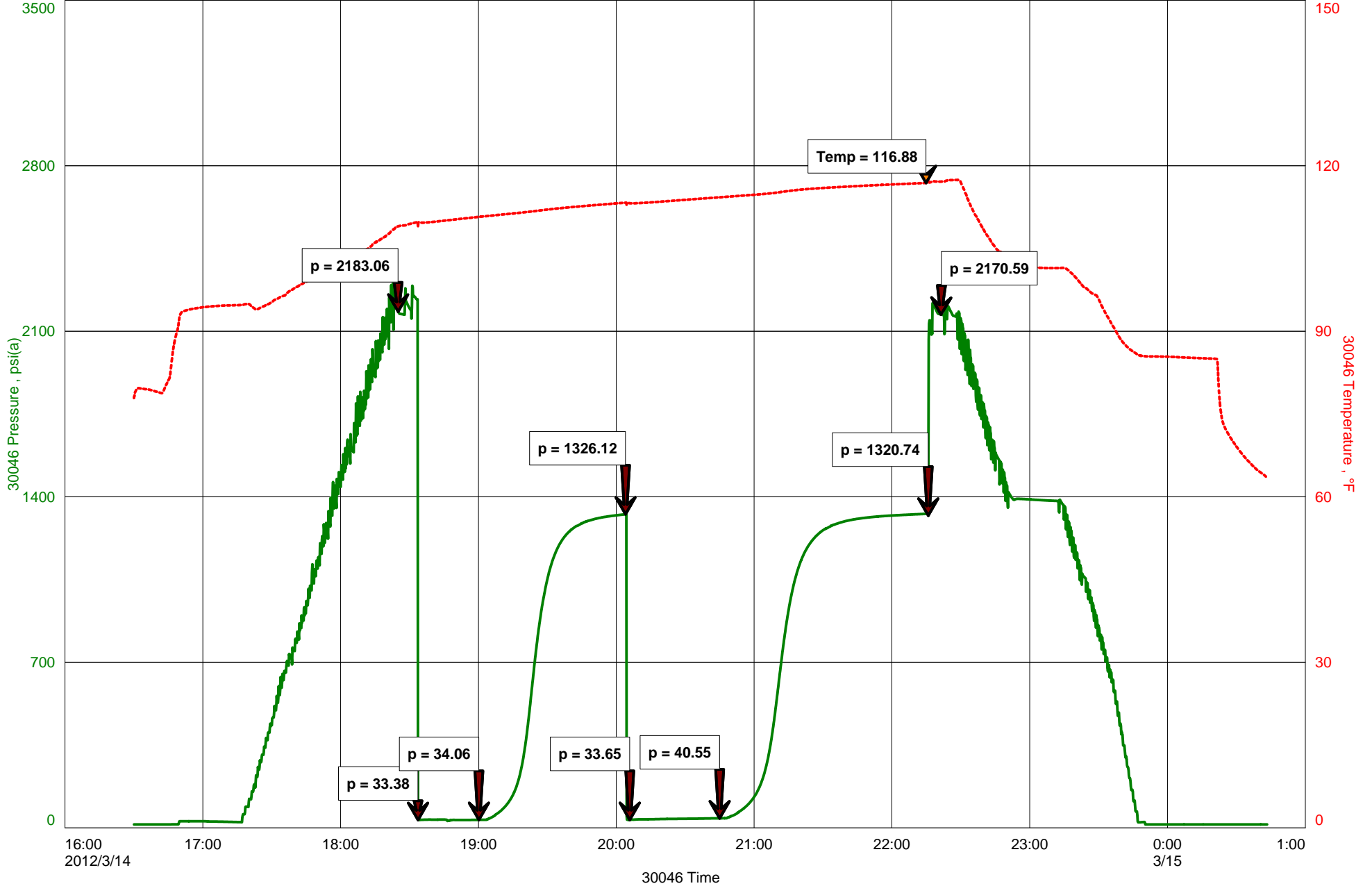
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

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.

# NUSS #1



# KIM B. SHOEMAKER

CONSULTING GEOLOGIST

316-684-8709 WICHITA, KS

## GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

COMPANY <b>RAYMOND OIL COMPANY, INC.</b>	ELEVATIONS
LEAS <b># 1 NUSS</b>	KB <b>2877</b>
WELL <b>WILDCAT</b>	DF
DEPTH <b>1980' FWL &amp; 1420' FSL</b>	OL <b>2872</b>
DIR <b>35</b> <b>13s</b> <b>32w</b>	Measurements of
COUNTY <b>LOGAN</b> <b>KANSAS</b>	From <b>2877 KB</b>
OPERATED BY <b>L. D. DRILLING, INC.</b>	LOGGING
START <b>3-5-12</b> COME <b>3-16-12</b>	Depth <b>8 1/8" @ 257'</b>
RTU <b>4720</b> LTD <b>4721</b>	Penetration <b>4 1/2" @</b>
MUD WT <b>3390</b> TYPE MUD <b>CHEMICAL</b>	ELECTRICAL SUPPLIES
	<b>DUAL IND. DENS.-N. Micro</b>

SAMPLES REVED FROM **3450 TO 4720**

DRILLING TIME PLUG FROM **3450 TO 4720**

SAMPLES EXAMINED FROM **3450 TO 4720**

GEOLOGICAL SUPERVISION FROM **3800 TO 4720**

GEOLOGIST ON WELL **Kim B. SHOEMAKER**

FORMATION TOPS	LOG	SAMPLES
ANHYDRITE	2358 + 519	2361 + 516
B/ANK.	2380 + 497	2384 + 493
STOTLER	3506 - 629	3510 - 633
HEEBNER	3859 - 982	3861 - 984
LANSING	3902 - 1025	3904 - 1027
STARK	4146 - 1269	4148 - 1271
MARMATON	4245 - 1368	4248 - 1371
FORT SCOTT	4396 - 1519	4396 - 1519
CHEROKEE	4423 - 1546	4424 - 1547
MISSISSIPPI	4529 - 1652	4528 - 1651



API: 15-109-21053

3-5-12 SPUD  
 3-6 @ 260'  
 3-7 @ 1420'  
 3-8 @ 2567'  
 3-9 @ 3280'  
 3-10 @ 3810'  
 3-11 @ 4133'  
 3-12 @ 4220'  
 3-13 @ 4360'  
 3-14 @ 4450'  
 3-15 @ 4540'  
 3-16 @ 4720'

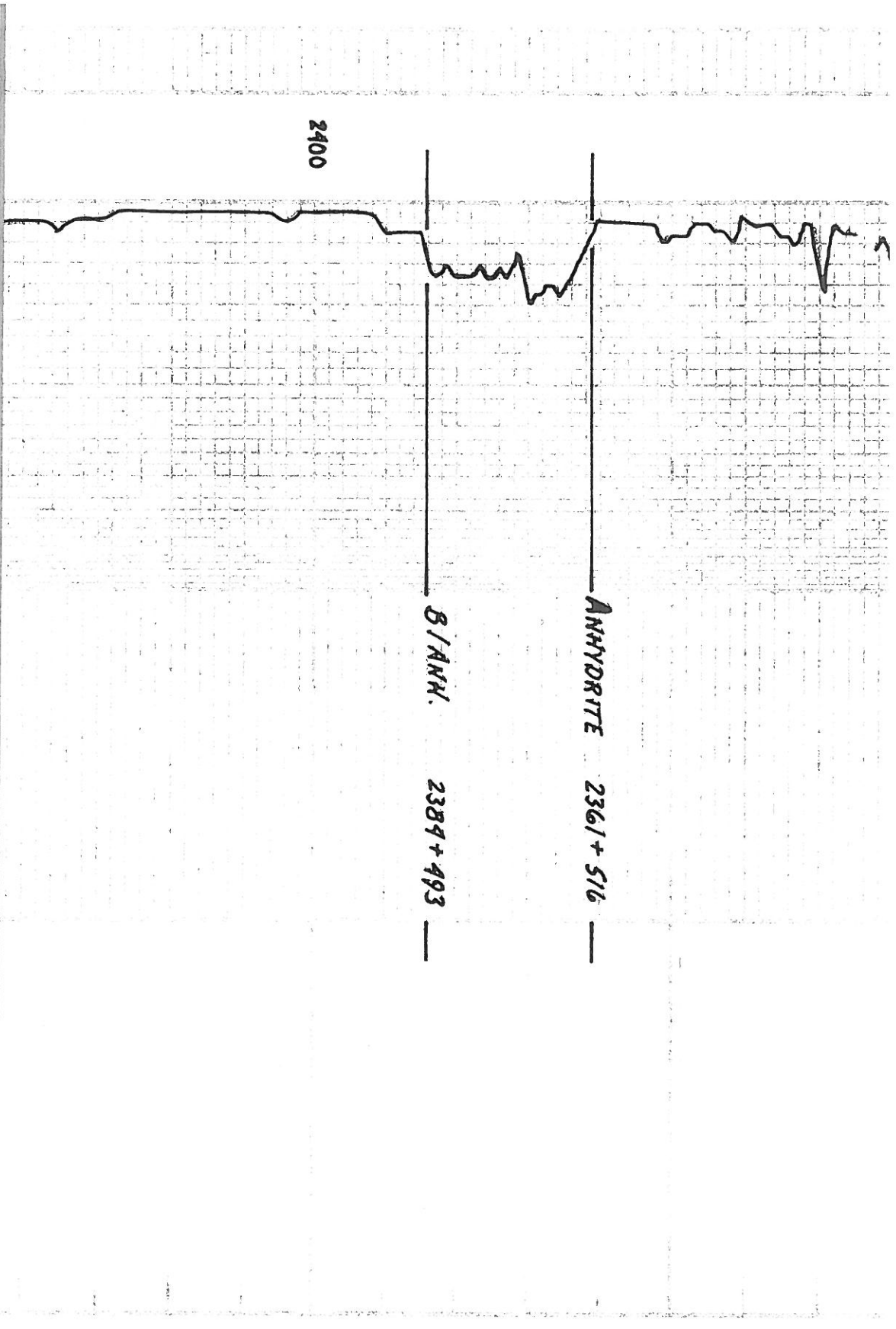
LEGEND



Original Depth of Drifts  
 Plus Foot

2500





2400

ANHYDRITE 2361 + 516

B/ANH. 2389 + 493

2450

3450

3500

Samples are logged

LS. wt. 5% Foss. Glatte.

LS. 7% vss. Foss. vss. clay.

Sh. 60% sh. 40% G. Fr. Md. Cal. sand.

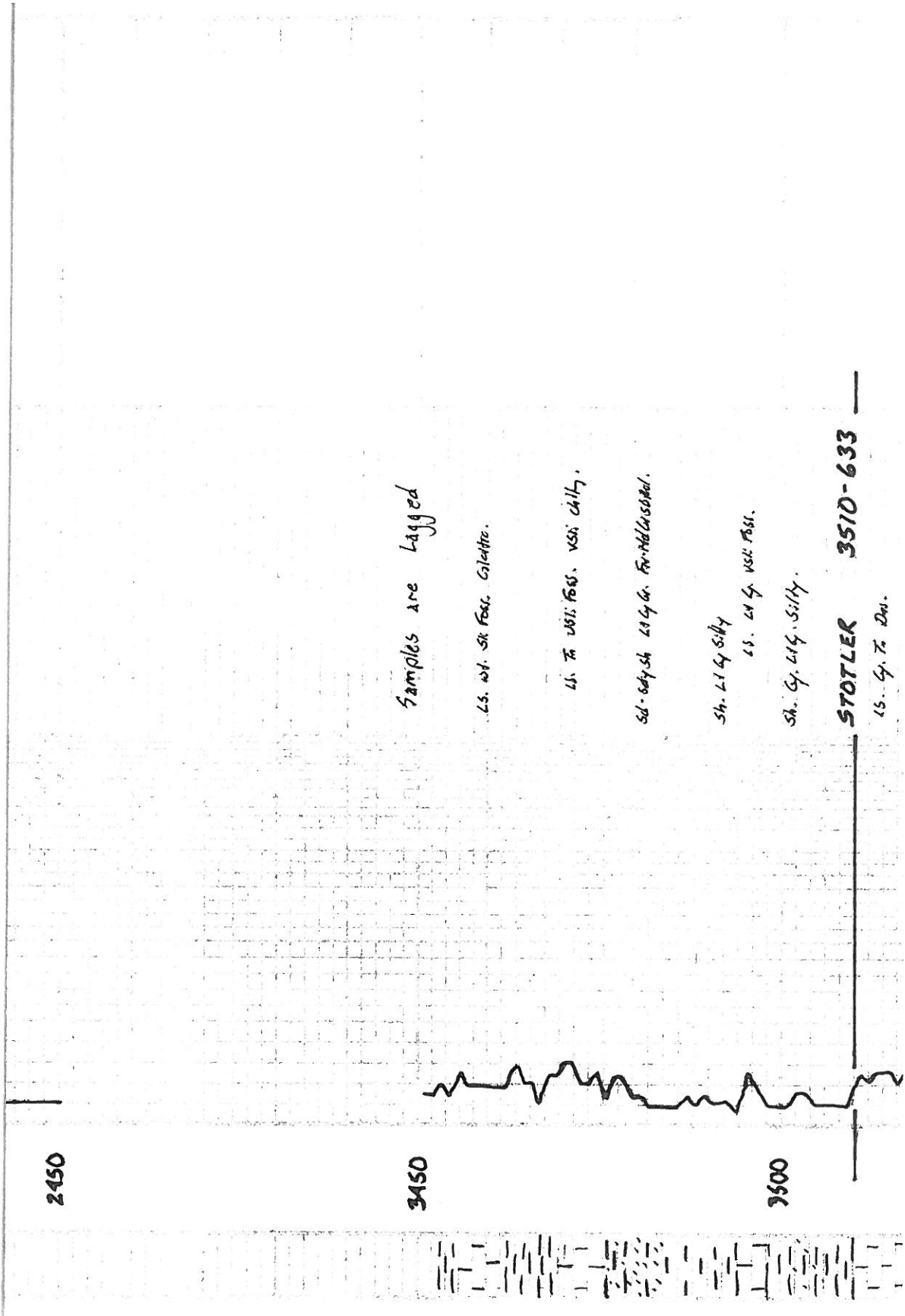
Sh. 41% silty

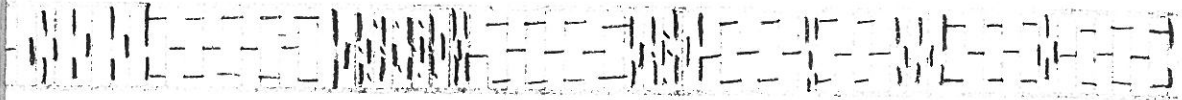
LS. 4% vss. Foss.

Sh. 4% 41% silty.

STOTLER 3510-633

LS. 4% Fr. Dm.





3600



15. Gy. Foss. Colotho.

15. wt ss clay.

Sh. shaly.

15. clay. sh.

15. T. v. sh. ss. Foss.

Sh. clay. sh.

15. wt. clay. Foss. shaly.

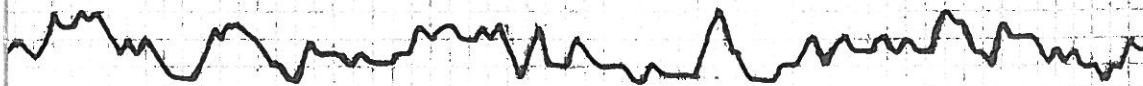
Sh. clay. sh. shaly. sh.

15. Gy. sh. Foss.

Sh. Gy.



3700



15. Br Du.

15. wt. Si. cal. Foss. 1 wt.

15. wt. Ltg. cal. Si. A

15. wt. Si. Foss. SA A

Sh. G.

15. wt. Ltg. Sh. Foss.

Δ wt. Si. Foss.

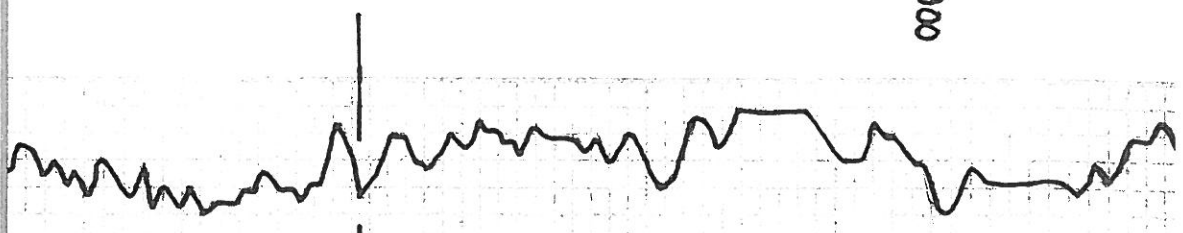
15. wt. Foss. Si. Foss. Sh. cal. G.

15. G. Ltg. Si. Foss.

Sh. Dng. Blk.

Sh. Ca. Ltg. Sdy. Silty.

3800



40. 1st Wg. 501. 1st. 1st. 1st.

54. Gr. Lt. Col.

45. 1st Wg. 501. 1st. 1st.

16. 1st Wg. 501. 1st. 1st.

45. 1st Wg. 501. 1st. 1st.

45. 1st Wg. 501. 1st. 1st.

**HEBNER 3861-984**  
54. Blk Corp. (3880)

45. 1st Wg. 501. 1st. 1st.

54. Pl. Lt. Col.

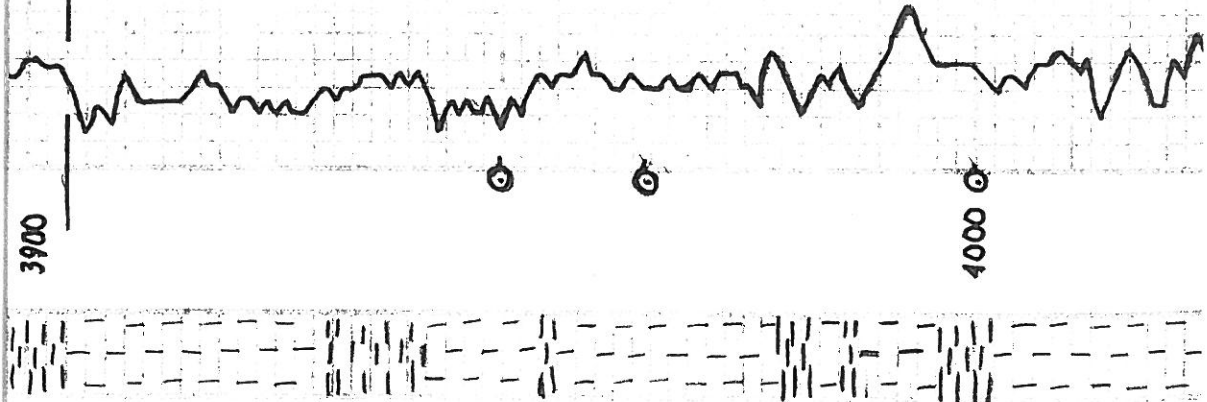
45. 1st Wg. 501. 1st. 1st.

45. 1st Wg. 501. 1st. 1st.

45. 1st Wg. 501. 1st. 1st.

VIS: 48 WT: 88 WL: 76

3900  
CHL: 2300  
Sh. Rd.  
LANSING 3909-1027



LS. Tr. wt. 000. SLS 000. Calotte.

LS. Tr. wt. 100. SLS 100. Calotte.

Sh. Rd. 4.

Sh. Rd. 5.

A. wt. 4. SLS 000.

LS. wt. 100. SLS 100. Calotte.

LS. wt. 100. SLS 100. Calotte.

Sh. Rd. 6.

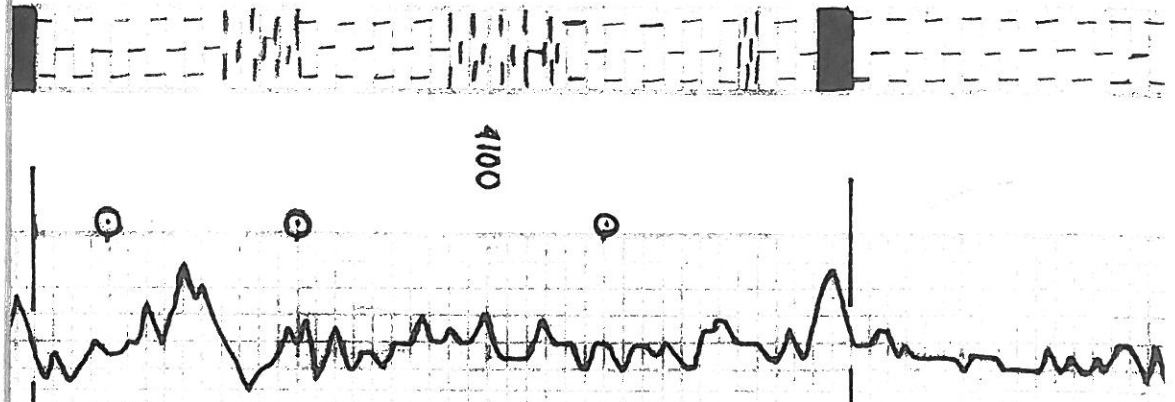
LS. wt. 100. SLS 100. Calotte. P. Vis. 0  
BLE Tomy SLS on Temp. 000.

Sh. Rd. 7.

LS. wt. 100. SLS 100. Calotte.

LS. Tr. wt. 100. SLS 100. Calotte.

A. wt. SLS 000. LS. Tr. wt. 100. Calotte.



DST (1)

VI: 49 WT: 9.0  
 WIL: 6.4 CAL: 2000

MUNCIE CREEK 4062-1185  
 5th. Blk Cove (4080)  
 15 4th Bl. VSI: 7500 Colantha

- 16. Wt Chly.
- 15. Wt Chly. VSI: Chly.
- 15. Lt Gy. Dm. VSI: Colantha.

56. Lt. Δ Wt Chly. 5th Fou.  
 15. 75 Wt VSI: 7500. VSI: Chly.

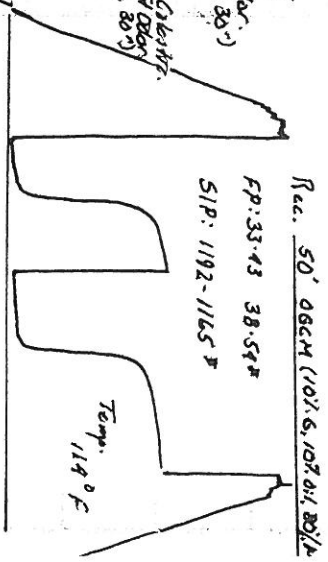
15. TAIL. Dm.  
 54. 25. 25. 15 R. Lt Bl. VSI: 7500.  
 54. Lt Blue Lt.  
 15.

15. TAIL. SI: 7500. 5th. 5th. P. 1/2  
 80 Spid 5th. VSI: 7500. 2000 2000 2000  
 Wt 7500. (4120 80)  
 54. Lt Blue Lt.  
 15. TAIL. Lt Gy. 2000 5th. 2000. 2000. 2000  
 80 Spid 5th. 1/3 7500. 2000 Floor. VSI: 7500  
 (4110, 80)

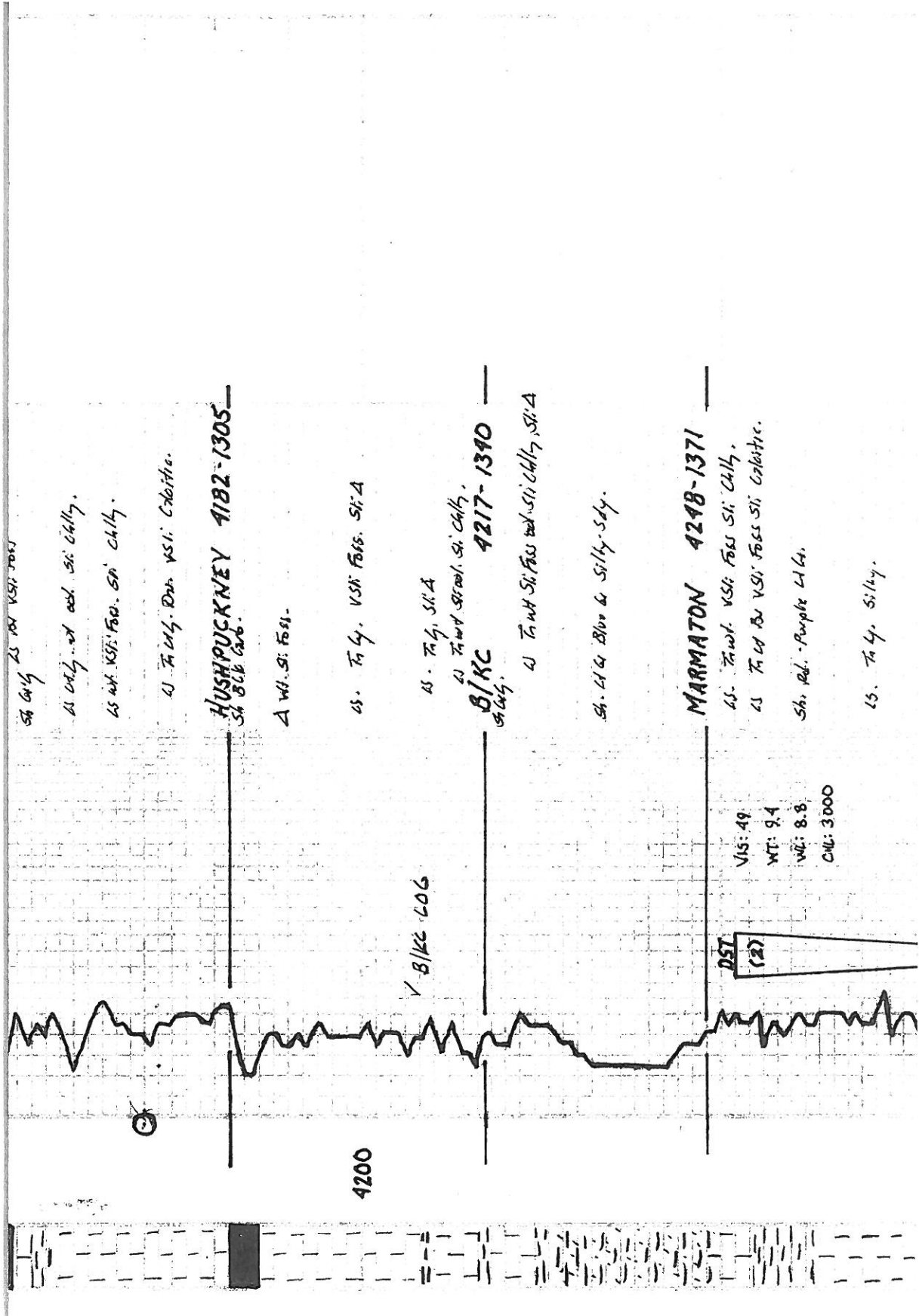
STAR K  
 38. 2000. 2000.

4148-1271

Pipe Strip. S 4151.32  
 R1 4152.28  
 .96 Shank of Bd.  
 DST (1) 4086-4140  
 157024: Blow bolt to 3/4"  
 20024: " " 4"  
 30. 60. 45. 90







Sh. Galy. AS. 100 VS. Foss.

AS. Galy. w. red. sil. chaly.

AS. w. VS. Foss. Sil. chaly.

AS. F. Galy. Red. VS. Calcite.

**HUSHPUCKNEY 4182-1305**

Sh. Galy. 200.

A. w. Sil. Foss.

AS. F. Galy. VS. Foss. Sil. A

AS. F. Galy. Sil. A

AS. F. w. Sil. Foss. Sil. chaly.

**B/KC 4217-1340**

Sh. Galy.

AS. F. w. Sil. Foss. w. Sil. chaly. Sil. A

Sh. Sil. Blue & Silly. Silly.

**MARMATON 4248-1371**

AS. F. w. VS. Foss. Sil. chaly.

AS. F. w. VS. Foss. VS. Calcite.

Sh. Red. Purple L. G.

AS. F. Galy. Silly.

4200

B/KC LOG

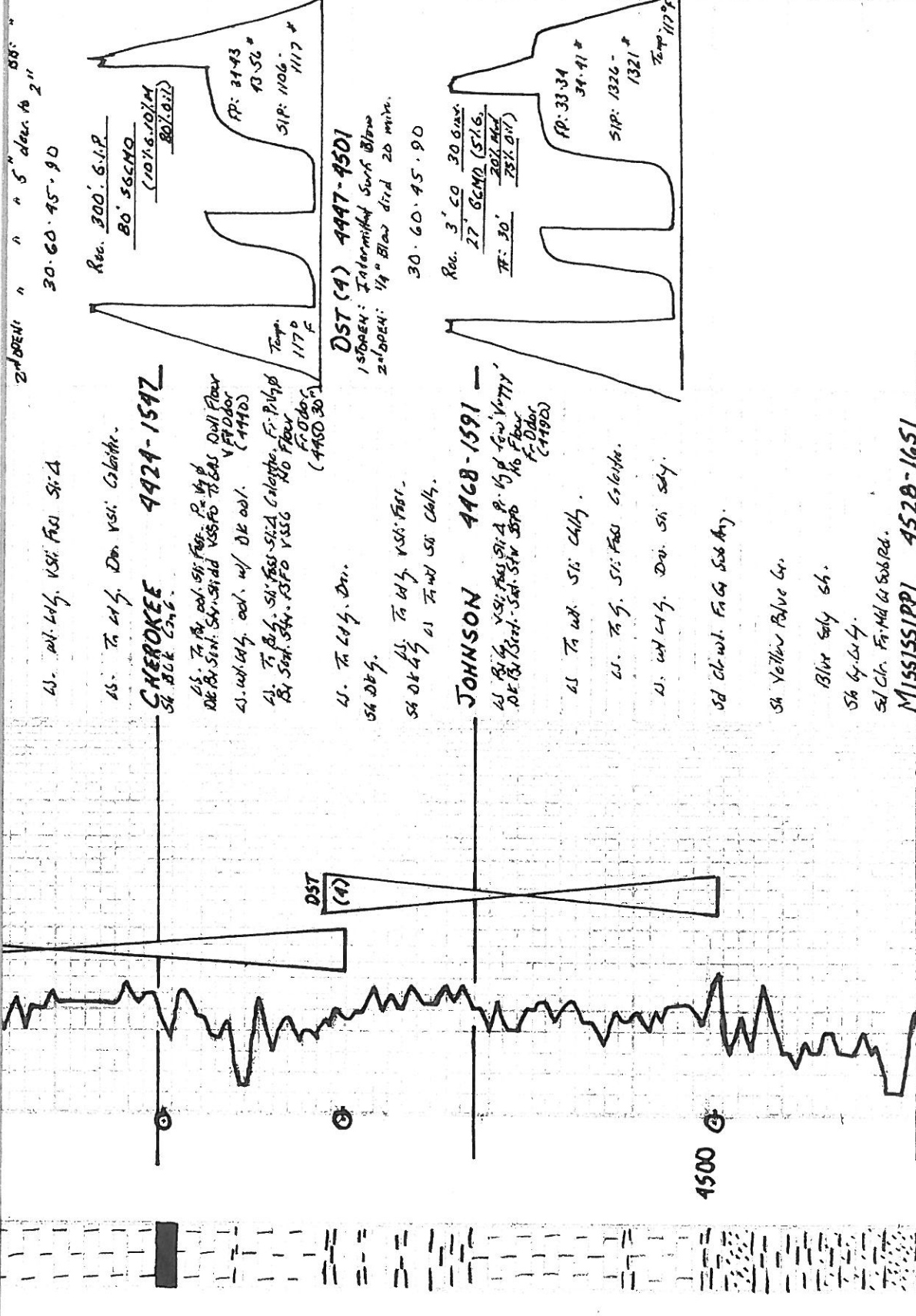
DST (2)

Vis: 49

WT: 9.4

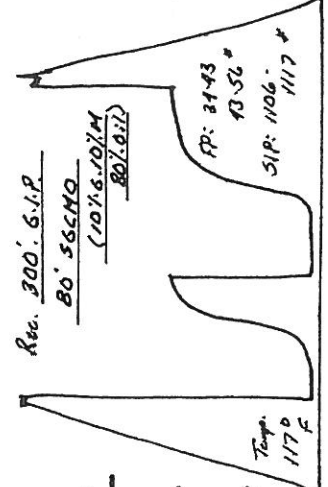
Wt: 8.8

CHL: 3000



2' above n n n 5" down to 2" 88"

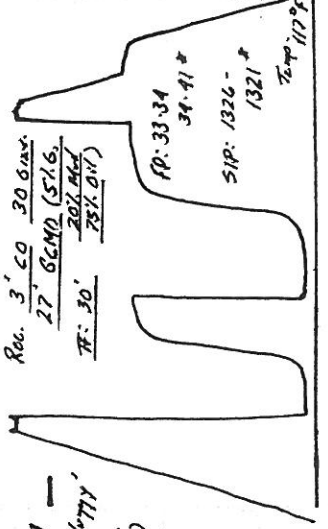
30.60.45.90



DST (A) 4447-4501

1 STOP: Intermittent Surf Blow  
2. 2024: 1/4" Blow dir'd 20 min.

30.60.45.90



30.60.45.90

45. wt. 44g. vsi. Fd. Si: 4

45. Ta. 44g. Dm. vsi. Colinite.

**CHEROKEE** 4424-1547  
SI. Bk. C. 246.

45. Ta. 44g. wt. vsi. Fd. P. 44g. Dm. vsi. Colinite. Full Flow vsi. Fd. (4440)

45. wt. 44g. wt. vsi. Fd. P. 44g. Dm. vsi. Colinite. Full Flow vsi. Fd. (4440)

45. Ta. 44g. vsi. Fd. Si: 4. Colinite. Full Flow vsi. Fd. (4440)

45. Ta. 44g. Dm.

SI. Bk. C.

SI. Bk. C. as Ta. wt. vsi. Col.

**JOHNSON** 4468-1591

45. wt. 44g. vsi. Fd. Si: 4. P. 44g. Dm. vsi. Colinite. Full Flow vsi. Fd. (4440)

45. Ta. wt. vsi. Col.

45. Ta. 44g. vsi. Fd. Si: 4. Colinite.

45. wt. 44g. Dm. vsi. Col.

SI. Bk. C. as Ta. wt. vsi. Col.

SI. Yellow Olive Cr.

Bliv. early sh.

SI. Bk. C.

SI. Cr. F. M. L. G. B. S. P. D.

MISSISSIPPI 4528-1651

MISSISSIPPI 4520-1651

LS. wt. Sdy. 51. Callg.

VIS: 51 WTR: 9.3

WTL: 9.5 CR: 4200

LS. wt. Ltg. Sdy.

LS. wt. S: F&S: 51. Callg.

LS. Tn Gy. ool. Dns.

LS. wt. Callg.

LS. Tn wt. S: ool. Callg.

Δ Dngs

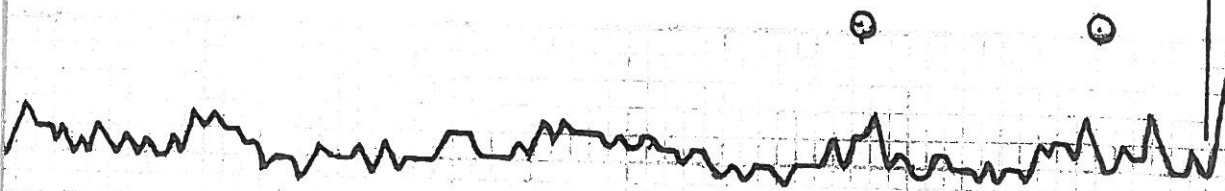
LS. Gy. R. Dns.

LS. Gy. ool. Callg.

LS. wt. Gy. Sdy. Callg.

LS. Tn Gy. Dns.

4600



15 7 2 3

20-14-10-100

MISS. SPERGEN 4664-1787

Del. To 4 Bx Fresh

Del. By Y Fresh S/S F&S Sur.

Del. By Bx Fresh S/S F&S w/ 100g Fed.

Del. 4-06-5: By Fresh S/S F&S



4700

RTD 4720-1893





**CONSOLIDATED**  
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676



**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

TICKET NUMBER 34420

LOCATION Oakley, KS

FOREMAN Kelly Gabel  
Walt Dinkel

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
3-16-12	7158	Nuss #1	35 <del>0</del>	13	32	Logan	
CUSTOMER		Mailing Address		TRUCK #	DRIVER	TRUCK #	DRIVER
Raymond Oil		Oakley 15 S 1/2 E Sinto		399	Damon M		
CITY		STATE	ZIP CODE	466	James Meade		
				460	Cory D		

JOB TYPE 2-stage HOLE SIZE 7 7/8 HOLE DEPTH 3230 CASING SIZE & WEIGHT 4 1/2 10.5 #  
 CASING DEPTH 1730 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER DV @ 1904  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 74 1/2 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting, Rigged up on LD drilling, hooked up to circulate for 30 min, mixed 225 sks 60/40 2 % gel 7 1/2 % salt, Washout pumps & lines, released plug displaced with 40 bbl water + 33 bbl mud, lift pressure 200 # Plug landed @ 1200 # float hold dropped DV Bomb, waited 15 min opened tool @ 200 # & circulated, Mix 30 sks RH Mixed 420 sks 60/40 8 % gel 1/4 # Flo-seal, washed out pumps & lines, released plug, displaced with 28 1/4 bbl water, lift pressure 200 # Plug landed @ 1500 # cement did circulate float equip, centralizers on Jt # 1, 3, 5, 9, 11, 13 Basket on 20 DV tool top of # 9

*Thank You*  
*Walt, Kelly & crew*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	3020.00	3020.00
5406	20	MILEAGE	5.00	100.00
1131	225 sks	60/40 P02	15.10	3397.50
1131	450 sks	60/40 P02	15.10	6795.00
5407A	29.03	Ten mileage delivery	1.67	969.00
1111	786	Salt	.45	353.70
118B	3483 #	Bentonite	.25	870.75
1107	113 #	Flo-seal	2.83	318.66
4161	1	4 1/2 AFU float shoe	342.00	342.00
41129	6	4 1/2 Centralizer	46.00	276.00
4103	1	4 1/2 basket	261.00	261.00
4283	1	DV Tool/Matchdown	3850.00	3850.00
				20,554.21
		Less 1000 disc		2055.42
				18,498.79
		248459	SALES TAX	1155.54
			ESTIMATED TOTAL	19654.43

Revin 3737

3:30 PM AUTHORIZATION [Signature]

TITLE Foreman

DATE 3-16-12

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



**CONSOLIDATED**  
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**INTEREST**  
**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

TICKET NUMBER 33800  
LOCATION Oakley KS  
FOREMAN Miles Shaw  
Fuzzy McCullick

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY				
3-14-12	7158	Nuss #1	35	13S	32W	Logan 4S				
CUSTOMER <u>Raymond Oil</u>		<u>Oakley</u> <u>15 South</u> <u>E 1/4</u> <u>South 1/2</u>					TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS							463	Josh G		
CITY		STATE	ZIP CODE							

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 261 CASING SIZE & WEIGHT 8 5/8 24#  
 CASING DEPTH 260.79 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.8 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 20'  
 DISPLACEMENT 15.4 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting. Rig up on LD Drilling Circulate casing mix 180 sks  
com 38 Calcium + 28 gel displaced 15 1/4 bbls Water Cement did circulate  
to cellar only

Thanks Miles & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401S	1	PUMP CHARGE	1085. <sup>00</sup>	1085. <sup>00</sup>
5406	20	MILEAGE	5. <sup>00</sup>	100. <sup>00</sup>
5407	8.5	Ton Midvase Delivery min	1.67	410. <sup>00</sup>
1104S	180 sks	Class A Cement common	17.65	3177. <sup>00</sup>
1102	508 #	Calcium Chloride	.89	452.12
1118B	339 #	Bentonite	.25	84.75
		Subtotal		5308.87
		less 108 discount		530.89
		Subtotal		4777.98
		248429		
		SALES TAX		260. <sup>72</sup>
		ESTIMATED TOTAL		5038. <sup>70</sup>

Ravin 3737

AUTHORIZATION Daniel & Boer

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.