



KANSAS CORPORATION COMMISSION 1069717
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1069717

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
---	---

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

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

00402981516

FIELD SERVICE TICKET
1718 03656 A

DATE TICKET NO.

DATE OF JOB: 3-19-2011	DISTRICT: PRATT, KS.	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:
CUSTOMER: HERMAN LOEB LLC.		LEASE: LOHMANN		COUNTY: BARBER		STATE: Ks.	
ADDRESS:		SERVICE CREW: LESLEY, WISER, HUNTER		JOB TYPE: CALW - 13 3/8" C.P.		WELL NO.: B-9	
CITY:		STATE:		AUTHORIZED BY:		MILES FROM STATION TO WELL: 50	
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE
19870	1						3-19-11
27463	1					ARRIVED AT JOB	9:30 AM
19832-19862	1					START OPERATION	12:00 PM
						FINISH OPERATION	1:20 AM
						RELEASED	2:30 AM

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: **Rick Smith**
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 100	COMMON	SK	250		4,000.00
CC 102	CELL-FLAKE	lb	63		233.10
CC 109	CALCIUM CHLORIDE	lb	705		740.25
CC 200	CEMENT GEL	lb	470		117.50
E 100	PICKUP MILEAGE	mi	50		212.50
E 101	HEAVY EQUIPMENT MILEAGE	mi	100		700.00
E 113	BULK DELIVERY CHARGE	TM	588		940.00
CE 200	DEPTH CHARGE, 0-500	HR	1-4		1,000.00
CE 240	BLENDED SERVICE CHARGE	SK	250		350.00
B 003	SERVICE SUPERVISOR	EA	1		175.00

CHEMICAL / ACID DATA:	

SUB TOTAL	6,351.24
SERVICE & EQUIPMENT	%TAX ON \$
MATERIALS	%TAX ON \$
TOTAL	

SERVICE REPRESENTATIVE: Dawn Lesley	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Rick Smith
FIELD SERVICE ORDER NO.	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

BASIC

energy services, L.P.

TREATMENT REPORT

Customer HERMAN LOEB LLC	Lease No.	Date 3-30-2011
Lease LOHMANN	Well # B-9	ID#
Field Order # 3656	Station Pratt, Ks.	County BARBER
Type Job CNW - 13 3/8" C.P.	Formation 263'	Legal Description 4-35-12

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 13 3/8	Tubing Size	Shots/Ft	CMT	Pre Pad 250SK Common	RATE	PRESS	ISIP	
Depth 259'	Depth	From	To	Pad @ 1.34 wft³	Max		5 Min.	
Volume 10.1de	Volume	From	To	Frac 13' 8 5/8" LxJ.	Min		10 Min.	
Max Press 500	Max Press	From	To		Avg		15 Min.	
Well Connection 5" V	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth 231'	Packer Depth	From	To	Flush 36.5 H₂O	Gas Volume		Total Load	

Customer Representative RIEK SMITH	Station Manager D. SCOTT	Treater K. LESLEY
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Service Units 19870	27463	19839	19862						
Driver Names LESLEY WISER HUNTER									

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
11:00 PM					ON LOCATION - SAFETY MEETING
11:50 PM					RUN LOGS. 13 3/8" X 48" CSG.
12:40 AM					CSG. ON BOTTOM
1:20 AM					HOOK UP TO CSG. / BREAK CIRC. W/ RIG
1:30 AM					SWITCH OVER TO PUMP TRUCK
1:35 AM	150		5	5	H ₂ O AHEAD
1:40 AM	200		60	6	MIX 250SKS COMMON @ 15.0 #/GAL
1:50 AM	0		0	4	START DISPLACEMENT
2:00 AM	200		30.5	3	SHOT DOWN - CLOSE IN
					CIRCULATION THRU JOB
					CIRCULATED BBL TO PIT
					JOB COMPLETE,
					THANKS -
					KEEVEN LESLEY



PAGE 1 of 1	CUST NO 1001845	INVOICE DATE 03/22/2011
INVOICE NUMBER 1718 - 90551952		

Pratt (620) 672-1201
 B HERMAN L. LOEB
 I PO Box: 524
 L LAWRENCEVILLE
 L IL US 62439
 T
 O ATTN:

J LEASE NAME Lohmann B-9
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE		
40298634	27463		Net - 30 days	04/21/2011		
			QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 03/21/2011 to 03/21/2011						
0040298634						
171803658A Cement-New Well Casing/Pi 03/21/2011 8 5/8" Surface Pipe						
A-Con Blend Common 200.00 EA 13.50 2,700.00 T						
Common 200.00 EA 12.00 2,400.00 T						
Cello-flake 100.00 EA 2.78 277.50 T						
Calcium Chloride 1,128.00 EA 0.79 888.30 T						
Cement Gel 376.00 EA 0.19 70.50 T						
Top Rubber Cement Plug 8 5/8" 1.00 EA 168.75 168.75						
Flapper Type Insert Float Valves 8 5/8" 1.00 EA 210.00 210.00						
8 5/8" Basket (Blue) 1.00 EA 236.25 236.25						
Unit Mileage Charge-Pickups, Vans & Cars 50.00 HR 3.19 159.38						
Heavy Equipment Mileage 100.00 MI 5.25 525.00						
Proppant and Bulk Delivery Charges 940.00 MI 1.20 1,128.00						
Depth Charge; 501-1000' 1.00 HR 900.00 900.00						
Blending & Mixing Service Charge 400.00 MI 1.05 420.00						
Plug Container Utilization Charge 1.00 EA 187.50 187.50						
Supervisor 1.00 HR 131.25 131.25						
PLEASE REMIT TO:		SEND OTHER CORRESPONDENCE TO:		SUB TOTAL	DL S	10,402.43
BASIC ENERGY SERVICES, LP		BASIC ENERGY SERVICES, LP		TAX		462.55
PO BOX 841903		PO BOX 10460		INVOICE TOTAL		10,864.98
DALLAS, TX 75284-1903		MIDLAND, TX 79702				



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

00-102-98634
FIELD SERVICE TICKET
1718 03658 A

DATE OF JOB: 3-21-2011	DISTRICT: Pratt, Ks.	NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:							
CUSTOMER: HERMAN LOEB, LLC	LEASE: LOHMANN	WELL NO.: B-5							
ADDRESS:	COUNTY: BARBER	STATE: Ks.							
CITY:	STATE:	SERVICE CREW: LESLEY, WISER, E J MCGRAW							
AUTHORIZED BY:	JOB TYPE: CNW - 8 5/8 S.P.								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
19870	1						3-21-11		10:30
27463	1					ARRIVED AT JOB		PM	2:30
19832-19862	1					START OPERATION		PM	4:50
						FINISH OPERATION		PM	5:40
						RELEASED		PM	6:15
						MILES FROM STATION TO WELL			50

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: *[Signature]*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 101	A-CON BLEND	SK	200		3,600.00
CP 100	COMMON	SK	200		3,200.00
CC 102	CELL-FLAKE	lb	100		370.00
CC 104	CALCIUM CHLORIDE	lb	1128		1,184.40
CC 200	CEMENT GEL	lb	376		94.00
CE 105	TOP RUBBER CMT PLUG, 8 5/8"	EA	1		225.00
CE 1453	FLAPPER TYPE INSERT FLOAT VALVE, 8 5/8"	EA	1		230.00
CE 1903	BASKET, 8 5/8"	EA	1		315.00
E 100	PICKUP MILEAGE	MI	50		212.50
E 101	HEAVY EQUIPMENT MILEAGE	MI	100		700.00
E 113	BULK DELIVERY	TM	940		1,504.00
FE 201	DEPTH CHARGE: 501'-1000'	HR	1-4		1,200.00
FE 240	BLENDED SERVICE CHRG.	SK	400		560.00
FE 504	PLUG CONTAINER CHRG.	JOB	1		250.00
S 003	SERVICE SUPERVISOR	EA	1		175.00

CHEMICAL / ACID DATA:		

SUB TOTAL	\$	10,402.40
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)



PAGE 1 of 1	CUST NO 1001845	INVOICE DATE 04/01/2011
INVOICE NUMBER 1718 - 90562522		

Pratt (620) 672-1201
 B HERMAN L. LOEB
 I PO Box: 524
 L LAWRENCEVILLE
 IL US 62439
 T
 O ATTN:

J LEASE NAME Lohmann B-9
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40303066	27463		Net - 30 days	05/01/2011
			QTY	U of M
			UNIT PRICE	INVOICE AMOUNT
For Service Dates: 03/31/2011 to 03/31/2011				
0040303066				
171803978A Cement-New Well Casing/Pi 03/31/2011				
5 1/2" Longstring				
50/50 POZ 200.00 EA 8.25 1,649.91 T				
60/40 POZ 50.00 EA 9.00 449.98 T				
KCL Potassium Chloride 453.00 EA 1.12 509.60 T				
Cello-flake 50.00 EA 2.77 138.74 T				
Cal-Set 840.00 EA 0.56 472.47 T				
FLA-322 84.00 EA 5.82 472.47 T				
Gileonite 1,200.00 EA 0.50 602.97 T				
Latch Down Plug & Baffle 5 1/2" (Blue) 1.00 EA 299.98 299.98				
Auto Fill Float Shoe 5 1/2" (Blue) 1.00 EA 269.99 269.99				
Turbolizer 5 1/2" (Blue) 12.00 EA 82.50 989.95				
5 1/2" Basket (Blue) 2.00 EA 217.49 434.98				
Mud Flush 1,000.00 EA 0.64 644.97 T				
CS-1L KCL Substitute 5.00 EA 26.25 131.24 T				
Unit Mileage Charge-Pickups, Vans & Cars 50.00 HR 3.19 159.37				
Heavy Equipment Mileage 100.00 MI 5.25 524.97				
Proppant and Bulk Delivery Charges 528.00 MI 1.20 633.67				
Depth Charge; 5001-6000' 1.00 HR 2,159.87 2,159.87				
Blending & Mixing Service Charge 250.00 MI 1.05 262.49				
Plug Container Utilization Charge 1.00 EA 187.49 187.49				
Supervisor 1.00 HR 131.24 131.24				
PLEASE REMIT TO:		SEND OTHER CORRESPONDENCE TO:		
BASIC ENERGY SERVICES, LP		BASIC ENERGY SERVICES, LP		SUB TOTAL 11,126.25
PO BOX 811903		PO BOX 10460		TAX 370.28
DALLAS, TX 75284-1903		MIDLAND, TX 79702		INVOICE TOTAL 11,496.53

Customer: <u>Herman Lueb</u>		Lease No.:		Date: <u>3-31-11</u>	
Lease: <u>Lohmann</u>		Well #: <u>B-9</u>			
Field Order #: <u>2218</u>	Station: <u>Pratt</u>	Casing: <u>570155</u>	Depth: <u>5215</u>	County: <u>Barber</u>	State: <u>KS</u>
Type Job: <u>CNW-5/2 L.S.</u>			Formation:	Legal Description: <u>3-35-12</u>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size: <u>5 7/8"</u>	Tubing Size:	Shots/Ft:	<u>200</u>	Rate:	PRESS:	ISIP:		
Depth: <u>5215</u>	Depth:	From:	To: <u>50</u>	Max:		5 Min.		
Volume: <u>124.1</u>	Volume:	From:	To:	Min:		10 Min.		
Max Press: <u>1500</u>	Max Press:	From:	To:	Avg:		15 Min.		
Well Connection: <u>R.C.</u>	Annulus Vol.:	From:	To:	HHP Used:		Annulus Pressure:		
Plug Depth: <u>5773</u>	Packer Depth:	From:	To:	Gas Volume:		Total Load:		

Customer Representative: <u>George</u>	Station Manager: <u>Dave Scott</u>	Treater: <u>Steve Orlando</u>
Service Units: <u>27283</u> <u>27463</u> <u>19832</u> <u>19862</u>		
Driver Names: <u>D. Ladd</u> <u>W. Ser</u> <u>J. Carr</u> <u>S. R.</u>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
10:45					On location Safety Meeting Run 124 Jts 5 1/2 15.5" casing Centralizers 1-2-5-8-9-11-12-15-18-21-24-2 Baskets 14, 19 Break circulation 1/2 way in 30 min Casing on Bottom Break circulation w/ Rig Pump 24 bbl mud flush
4:05	300		54	6	H2O spacer
4:09	300		5	6	Mix 200 sacks 50/50 po2 @ 14" / gal
4:10	300		48	6	Shut Down - Clear pump + line
4:25	0			6	Release plug
4:40	400		99	5	Start H2O displacement w 2% KCL
4:42	700		110	4	Slow Rate
4:45pm	1500		123	4	Plug Down - Held
			6/4		Plug R/H/MH w/ 50 sacks 60/40 po2 Circulation Test Job Job Complete, Thanks, Steve

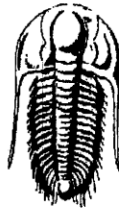


PAGE 1 of 1	CUST NO 1001845	INVOICE DATE 03/21/2011
INVOICE NUMBER 1718 - 90550929		

Pratt (620) 672-1201
 B HERMAN L. LOEB
 I PO Box: 524
 L LAWRENCEVILLE
 IL US 62439
 T
 O ATTN:

J LEASE NAME Lohmann B-9
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40298156	27463		Net - 30 days	04/20/2011
For Service Dates: 03/19/2011 to 03/19/2011				
0040298156				
171803656A Cement-New Well Casing/Pi 03/19/2011 CNW-13 3/8" Conductor Pipe				
		QTY	U of M	INVOICE AMOUNT
				UNIT PRICE
Common		250.00	EA	12.00
Cello-flake		63.00	EA	2.77
Calcium Chloride		705.00	EA	0.79
Cement Gel		470.00	EA	0.19
Heavy Equipment Mileage		100.00	MI	5.25
Proppant & Bulk Delivery Charges		588.00	MI	1.20
Blending & Mixing Service Charge		250.00	MI	1.05
Unit Mileage Charge-Pickups, Vans & Cars		50.00	HR	3.19
Depth Charge: 0-500'		1.00	HR	749.93
Service Supervisor		1.00	HR	131.24
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				
				SUB TOTAL
				TAX
				INVOICE TOTAL
				6,351.26
				278.70
				6,629.96



TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Prepared For: **Herman Loeb LLC**

PO Box 838
Lawrenceville IL 62439

ATTN: George Payne

3 35S 12W Barber KS

Lohman B-9

Start Date: 2011.03.28 @ 01:38:19

End Date: 2011.03.28 @ 12:00:04

Job Ticket #: 41636 DST #: 1

Trilobite Testing, Inc

PO Box 1733 Hays, KS 67601

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

Herman Loeb LLC

Lohman B-9

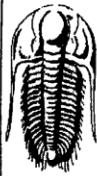
3 35S 12W Barber KS

DST # 1

Mississippi

2011.03.28

ORIGINAL



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Herman Loeb LLC
 PO Box 838
 Lawrenceville IL 62439
 ATTN: George Payne

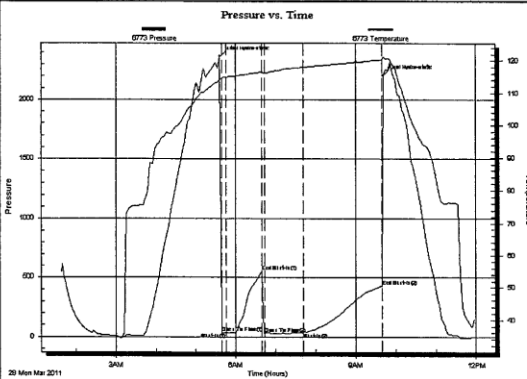
Lohman B-9
3 35S 12W Barber KS
 Job Ticket: 41636 DST#: 1
 Test Start: 2011.03.28 @ 01:38:19

GENERAL INFORMATION:

Formation: **Mississippi**
 Deviated: **No** Whipstock: **ft (KB)**
 Time Tool Opened: 05:39:19
 Time Test Ended: 12:00:04
 Interval: **4775.00 ft (KB) To 4820.00 ft (KB) (TVD)**
 Total Depth: **4820.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: **Poor**
 Test Type: **Conventional Bottom Hole**
 Tester: **Chris staats**
 Unit No: **34**
 Reference Elevations: **1419.00 ft (KB)**
1409.00 ft (CF)
KB to GR/CF: 10.00 ft

Serial #: 6773 **Inside**
 Press@RunDepth: **34.28 psig @ 4775.00 ft (KB)**
 Start Date: **2011.03.28** End Date: **2011.03.28** Capacity: **8000.00 psig**
 Start Time: **01:38:24** End Time: **12:00:04** Last Calib.: **2011.03.28**
 Time On Btm: **2011.03.28 @ 05:36:19**
 Time Off Btm: **2011.03.28 @ 09:41:04**

TEST COMMENT: IF: Weak blow 1 1/2 in 15 min
 IS: No blow back
 FF: Weak blow 1"
 FS: No blow back



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2363.52	113.96	Initial Hydro-static
3	33.93	114.63	Open To Flow (1)
10	32.93	115.02	Shut-In(1)
63	550.80	116.52	End Shut-In(1)
67	31.37	116.30	Open To Flow (2)
126	34.28	118.08	Shut-In(2)
243	430.04	120.25	End Shut-In(2)
245	2208.29	121.27	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
15.00	DRLG mud	0.21

Gas Rates

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

41636



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Herman Loeb LLC
PO Box 838
Lawrenceville IL 62439
ATTN: George Payne

Lohman B-9
3 35S 12W Barber KS
Job Ticket: 41636 **DST#: 1**
Test Start: 2011.03.28 @ 01:38:19

Tool Information

Drill Pipe:	Length: 4763.00 ft	Diameter: 3.80 inches	Volume: 66.81 bbl	Tool Weight: 2400.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 28000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 2.25 inches	Volume: 0.00 bbl	Weight to Pull Loose: 90000.00 lb
			<u>Total Volume: 66.81 bbl</u>	Tool Chased 8.00 ft
Drill Pipe Above KB:	16.00 ft			String Weight: Initial 72000.00 lb
Depth to Top Packer:	4775.00 ft			Final 72000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	45.00 ft			
Tool Length:	73.00 ft			
Number of Packers:	2	Diameter: 6.25 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4748.00	
Shut In Tool	5.00			4753.00	
Hydraulic tool	5.00			4758.00	
Jars	5.00			4763.00	
Safety Joint	3.00			4766.00	
Packer	4.00			4770.00	28.00 Bottom Of Top Packer
Packer	5.00			4775.00	
Recorder	0.00	8166	Outside	4775.00	
Recorder	0.00	6773	Inside	4775.00	
Perforations	6.00			4781.00	
Drill Pipe	31.00			4812.00	
Perforations	5.00			4817.00	
Bullnose	3.00			4820.00	45.00 Bottom Packers & Anchor

Total Tool Length: 73.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Herman Loeb LLC
PO Box 838
Lawrenceville IL 62439
ATTN: George Payne

Lohman B-9
3 35S 12W Barber KS
Job Ticket: 41636 DST#: 1
Test Start: 2011.03.28 @ 01:38:19

Mud and Cushion Information

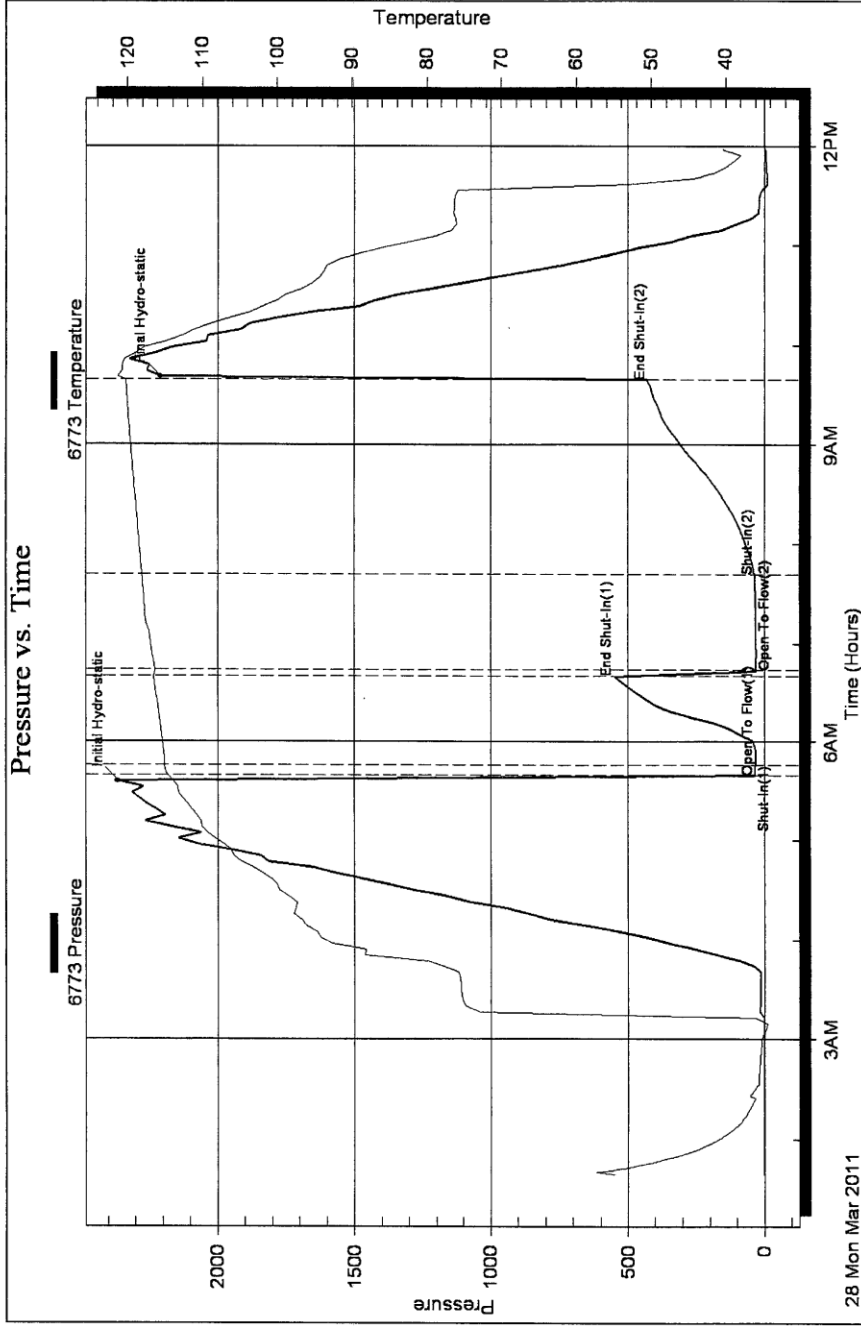
Mud Type:	Gel Chem	Cushion Type:		Oil API:	deg API
Mud Weight:	9.00 lb/gal	Cushion Length:	ft	Water Salinity:	ppm
Viscosity:	45.00 sec/qt	Cushion Volume:	bbl		
Water Loss:	8.38 in ³	Gas Cushion Type:			
Resistivity:	0.00 ohm.m	Gas Cushion Pressure:	psig		
Salinity:	5500.00 ppm				
Filter Cake:	0.20 inches				

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
15.00	DRLG mud	0.210

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:





DRILL STEM TEST REPORT

Prepared For: **Herman Loeb LLC**

PO Box 838
Lawrenceville IL 62439

ATTN: George Payne

3 35S 12W Barber KS

Lohman B-9

Start Date: 2011.03.29 @ 22:44:44

End Date: 2011.03.30 @ 09:09:59

Job Ticket #: 41637 DST #: 2

Trilobite Testing, Inc

PO Box 1733 Hays, KS 67601

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



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Herman Loeb LLC
 PO Box 838
 Lawrenceville IL 62439
 ATTN: George Payne

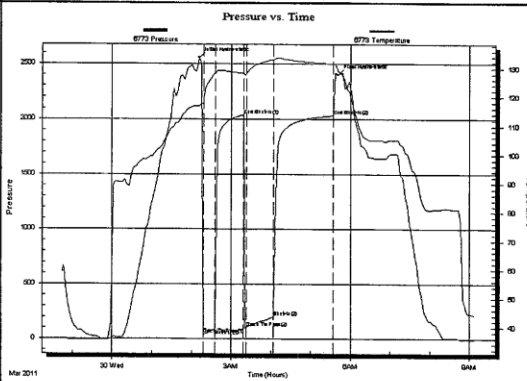
Lohman B-9
3 35S 12W Barber KS
 Job Ticket: 41637 DST#: 2
 Test Start: 2011.03.29 @ 22:44:44

GENERAL INFORMATION:

Formation: **Misner**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 02:18:29
 Time Test Ended: 09:09:59
 Interval: **5140.00 ft (KB) To 5162.00 ft (KB) (TVD)**
 Total Depth: **5162.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: Fair
 Test Type: Conventional Bottom Hole
 Tester: Chris Staats
 Unit No: 34
 Reference Elevations: 1419.00 ft (KB)
 1409.00 ft (CF)
 KB to GR/CF: 10.00 ft

Serial #: 6773 Inside
 Press@RunDepth: 200.79 psig @ 5140.00 ft (KB)
 Start Date: 2011.03.29 End Date: 2011.03.30
 Start Time: 22:44:49 End Time: 09:09:59
 Capacity: 8000.00 psig
 Last Calib.: 2011.03.30
 Time On Btm: 2011.03.30 @ 02:10:59
 Time Off Btm: 2011.03.30 @ 05:40:59

TEST COMMENT: IF: Strong blow BOB 3 min
 IS: No blow back
 FS: Strong blow BOB 20 min
 IS: No blow back



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2556.74	117.00	Initial Hydro-static
8	40.84	119.59	Open To Flow (1)
25	87.32	128.39	Shut-In(1)
68	2033.00	128.39	End Shut-In(1)
72	101.97	128.14	Open To Flow (2)
113	200.79	133.14	Shut-In(2)
203	2029.38	131.75	End Shut-In(2)
210	2401.51	129.03	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
0.00	620' GIP	0.00
122.00	m oil spots 80% w 20% m	1.71
240.00	w 100%	3.37

Gas Rates

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



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Herman Loeb LLC

Lohman B-9

PO Box 838
Lawrenceville IL 62439

3 35S 12W Barber KS

Job Ticket: 41637 **DST#: 2**

ATTN: George Payne

Test Start: 2011.03.29 @ 22:44:44

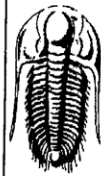
Tool Information

Drill Pipe:	Length: 5136.00 ft	Diameter: 3.80 inches	Volume: 72.04 bbl	Tool Weight: 2400.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 28000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 2.25 inches	Volume: 0.00 bbl	Weight to Pull Loose: 90000.00 lb
		Total Volume: 72.04 bbl		Tool Chased 2.00 ft
Drill Pipe Above KB:	24.00 ft			String Weight: Initial 76000.00 lb
Depth to Top Packer:	5140.00 ft			Final 80000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	22.00 ft			
Tool Length:	50.00 ft			
Number of Packers:	2	Diameter: 6.25 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			5113.00	
Shut In Tool	5.00			5118.00	
Hydraulic tool	5.00			5123.00	
Jars	5.00			5128.00	
Safety Joint	3.00			5131.00	
Packer	4.00			5135.00	28.00 Bottom Of Top Packer
Packer	5.00			5140.00	
Recorder	0.00	8166	Outside	5140.00	
Recorder	0.00	6773	Inside	5140.00	
Perforations	19.00			5159.00	
Bullnose	3.00			5162.00	22.00 Bottom Packers & Anchor

Total Tool Length: 50.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMAR

Herman Loeb LLC
PO Box 838
Lawrenceville IL 62439
ATTN: George Payne

Lohman B-9
3 35S 12W Barber KS
Job Ticket: 41637 DST#: 2
Test Start: 2011.03.29 @ 22:44:44

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:	11000 ppm
Viscosity: 49.00 sec/qt	Cushion Volume: bbl		
Water Loss: 8.97 in ³	Gas Cushion Type:		
Resistivity: 0.00 ohm.m	Gas Cushion Pressure: psig		
Salinity: 3500.00 ppm			
Filter Cake: 0.20 inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
0.00	620' GIP	0.000
122.00	m oil spots 80% w 20% m	1.711
240.00	w 100%	3.367

Total Length: 362.00 ft Total Volume: 5.078 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments: RW 1.12 @ 46F = 11000 chlorides

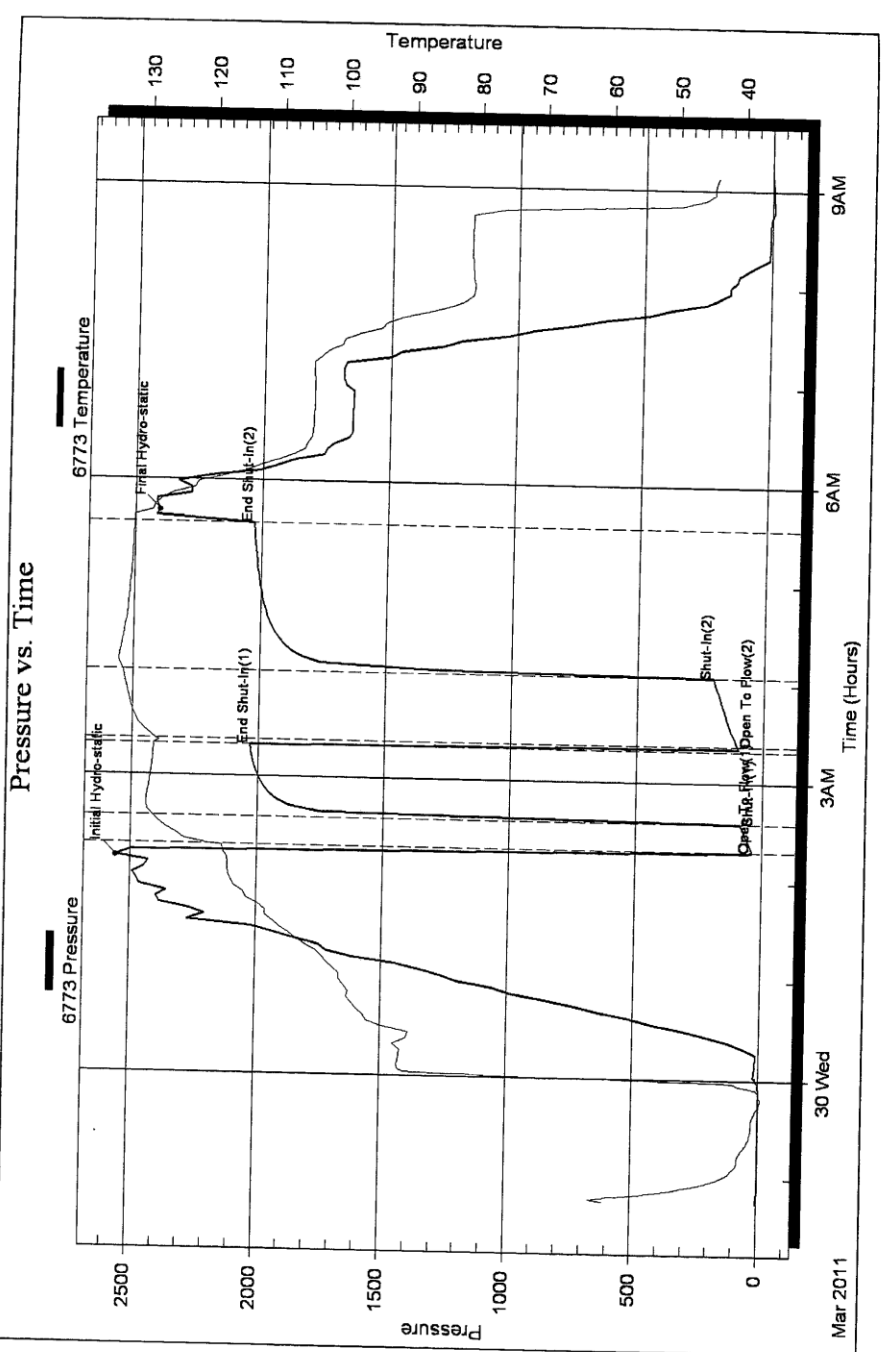
Serial #: 6773

Inside

Herman Loeb LLC

3 35S 12W Barber KS

DST Test Number: 2



Trilobite Testing, Inc

Ref. No: 41637

Printed: 2011.04.13 @ 21:23:28

Page 5



TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

RECEIVED
MAR 31 2011

Test Ticket

NO. 041636

Well Name & No. LOHmann #B-9 BY: _____ Test No. 1 Date 3-28-11
 Company Herman Loeb LLC Elevation 1419 KB 1409 GL _____
 Address PO Box 838 Lawrenceville IL 62439
 Co. Rep / Geo. Mike Maune Rig Val #2
 Location: Sec. 3 Twp. 35s Rge. 12w Co. Barber State KS

Interval Tested 4775 - 4820 Zone Tested MISS
 Anchor Length 45' Drill Pipe Run ~~4770~~ 4763 Mud Wt. 9.1
 Top Packer Depth 4770 Drill Collars Run 0 Vis 45
 Bottom Packer Depth 4775 Wt. Pipe Run 0 WL 8.4
 Total Depth 4820 Chlorides 5500 ppm System LCM 5#

Blow Description IF: Weak blow 1 1/2 15min
ISI: NO blow back
FF: weak blow 1"
FST: NO blow back

Sec	Feet of	%gas	%oil	%water	%mud
<u>15</u>	<u>DRUG mud</u>			<u>100</u>	
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Sec Total 15' BHT 120 Gravity NA API RW NC @ _____ °F Chlorides 5500 ppm

A) Initial Hydrostatic <u>2363</u>	<input checked="" type="checkbox"/> Test <u>1225</u>	T-On Location <u>1:30</u>
B) First Initial Flow <u>33</u>	<input checked="" type="checkbox"/> Jars <u>250'</u>	T-Started <u>1:38</u>
C) First Final Flow <u>33</u>	<input checked="" type="checkbox"/> Safety Joint <u>75'</u>	T-Open <u>5:34</u>
D) Initial Shut-In <u>550</u>	<input type="checkbox"/> Circ Sub _____	T-Pulled <u>10:45</u>
E) Second Initial Flow <u>31</u>	<input type="checkbox"/> Hourly Standby <u>1hr 100'</u>	T-Out <u>00:30</u>
F) Second Final Flow <u>34</u>	<input checked="" type="checkbox"/> Mileage <u>110 miles 13750</u>	Comments _____
G) Final Shut-In <u>430</u>	<input type="checkbox"/> Sampler _____	
H) Final Hydrostatic <u>2208</u>	<input type="checkbox"/> Straddle _____	<input type="checkbox"/> Ruined Shale Packer _____

Initial Open 15
 Initial Shut-In 45
 Initial Flow 60
 Initial Shut-In 120

Shale Packer _____
 Extra Packer _____
 Extra Recorder _____
 Day Standby _____
 Accessibility _____

Sub Total 1781.50

Approved By Michael K Maune Our Representative Chris [Signature]

Trilobite Testing Inc. shall not be liable for damaged of any kind of 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 statements or opinion concerning the results 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.



TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

Test Ticket

NO. 041637

RECEIVED
APR 01 2011

Well Name & No. Lohman B-9 BY: _____ Test No. 2 Date 3-29-11
 Company Herman LOEB LLC Elevation 1419 KB 1409 GL _____
 Address PO Box 838 Lawrenceville IL 62439
 Co. Rep / Geo. Mike Maue / George Payne Rig Val Energy #2
 Location: Sec. 3 Twp. 35S Rge. 12W Co. Barber State KS

Interval Tested S140 - S162 Zone Tested Misner
 Anchor Length 22' Drill Pipe Run ~~5136~~ 5136 Mud Wt. 9.2
 Top Packer Depth S135 Drill Collars Run 0 Vis 49
 Bottom Packer Depth S140 Wt. Pipe Run 0 WL 9.0
 Total Depth S162 Chlorides 3500 ppm System LCM 4#

Flow Description IF: STRong blow BOB 3min
ISI: NO blow back
FF: STRong blow BOB 20min
FSL: NO blow back

Sec	Feet of	%gas	%oil	%water	%mud
<u>0</u>	<u>GTP 620'</u>				
<u>122'</u>	<u>MWOSPOTS</u>		<u>80</u>	<u>20</u>	
<u>240</u>	<u>W</u>		<u>100</u>		
_____	Feet of _____	%gas	%oil	%water	%mud
_____	Feet of _____	%gas	%oil	%water	%mud

Sec Total 342 BHT 113 Gravity _____ API RW 1.12 @ 46 °F Chlorides 11,000 ppm

- A) Initial Hydrostatic 2556 Test 1325 T-On Location 21:30
- B) First Initial Flow 41 Jars 250 T-Started ~~22:49~~ 22:49
- C) First Final Flow 87 Safety Joint 75 T-Open 2:18
- D) Initial Shut-In 2033 Circ Sub _____ T-Pulled 6:40
- E) Second Initial Flow 102 Hourly Standby 1.5 hrs 150 T-Out 10:00
- F) Second Final Flow 201 Mileage 110 miles 137.50 Comments _____
- G) Final Shut-In 2029 Sampler _____
- H) Final Hydrostatic 2401 Straddle _____ Ruined Shale Packer _____

- Shale Packer _____ Ruined Packer _____
- Extra Packer _____ Extra Copies _____
- Extra Recorder _____ Sub Total 8
- Day Standby _____ Total 1937.50
- Accessibility _____ MP/DST Disc't _____
- Sub Total 1937.50

Approved By Michael K. Maue Our Representative Cheri Stant

Trilobite Testing Inc. shall not be liable for damaged of any kind of 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 statements or opinion concerning the results 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.