



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: _____



1073160

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	WIDENER 7-26
Doc ID	1073160

Tops

Name	Top	Datum
ANHYDRITE	600	+1230
TOPEKA	2809	-979
HEEBNER	3096	-1266
BROWN LIME	3224	-1394
LANSING	3243	-1413
BASE KANSAS CITY	3478	-1648
VIOLA	3516	-1686
SIMPSON	3547	-1717
ARBUCKLE	3637	-1807



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 04957 A

26-215-12W

DATE _____ TICKET NO. _____

DATE OF JOB: 11-22-11	DISTRICT: Pratt, Kansas	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: L.D. Drilling, Incorporated		LEASE: Widener		WELL NO.: 7-26						
ADDRESS:		COUNTY: Stafford		STATE: Kansas						
CITY:		STATE:		SERVICE CREW: C. Messick; M. Mattal; J. McCaskey						
AUTHORIZED BY:		JOB TYPE: C.N.W. Surface								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
37,216	5						11-22-11			12:30
						ARRIVED AT JOB				2:30
						START OPERATION				3:45
19903-19905	5					FINISH OPERATION				8:45
						RELEASED	11-22-11			9:30
19832-21010	5					MILES FROM STATION TO WELL				45

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
P CP 101	A-Con Blend Cement	sh	175		\$ 3,150 00
P CP 100	Common Cement	sh	175		\$ 2,800 00
P CP 100	Common Cement	sh	25		\$ 400 00
P CC 102	Cellflatre	Lb	88		\$ 325 60
P CC 109	Calcium Chloride	Lb	825		\$ 866 25
P CC 109	Calcium Chloride	Lb	160	168.-	\$ 168 00
P CF 153	Wooden Plug, 8 5/8"	ea	1		\$ 160 00
P E 100	Pickup Mileage	mi	45		\$ 191 25
P E 101	Heavy Equipment Mileage	mi	135		\$ 945 00
P E 113	Bulk Delivery	tm	797		\$ 1,274 40
P CE 200	Cement Pump: 0 Feet To 500 Feet	hrs	4		\$ 1,000 00
P CE 240	Blending and Mixing Service	sh	375		\$ 525 00
P CE 504	Plug Container	Job	1		\$ 250 00
P S003	Service Supervisor	hrs	8		\$ 175 00
				SUB TOTAL	\$ 9,662 10

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: *R. Messick*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Jim Michle*

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer L.D. Drilling, Incorporated	Lease No.	Date 11-22-11
Lease Widener	Well # T-26	
Field Order # 4957	Station Pratt, Kansas	Casing 23Lb
Type Job C.N.W. - Surface	Depth 332 Feet	County Stafford
		State Kansas
	Formation	Legal Description 26-215-12W

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size 8 7/8" 23Lb/ft.	Tubing Size 1 1/2" 5.7Lb/ft.	Shots/Ft	175 sacks	ADD 175 sacks A-Con with 38 Calcium Chloride	RATE 5 ft. 2.12 CU.F.T./s	PRESS 10 Min.	ISIP 10 Min./sh cell plate
Depth 332 Feet	Depth	From	To 12.6Lb	11.89 Gal.	Max		
Volume 2.12 Bbl	Volume	From	To 175 sacks	Common with	Min		
Max Press 300 PSI	Max Press	From	To 15.6Lb	5.23 Gal.	Avg		
Well Connection 1 1/2" C/Liner	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth 332 Feet	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative Jim Michols	Station Manager David Scott	Treater Clarence R. Messick
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Service Units	37,216	19,903	19,905	19,832	21,010				
Driver Names	Messick	Mattal	McCastry						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
2:30					Trucks on location and hold safety meeting.
2:40					Petromark Drilling start to run 8 Joints new 23Lb/ft. 8 7/8" casing.
3:30					Casing in well. Circulate for 5 minutes
3:45	200			5	Start Fresh water Pre-Flush.
			10	5	Start mixing 175 sacks A-con cement.
			76	5	Start mixing 175 sacks common cement.
	-0-		113		Stop pumping. Shut in well Release Wooden Plug. Open well.
	100			5	Start Fresh water Displacement.
4:15	300		20.3		Plugdown. Shut in well.
8:25					Top of cement at 63 Feet with 1" tubing.
8:30	200			3	Start mixing cement
8:33			5		Cement circulated to surface Stop mixing
					Pull 1" tubing out of well.
					Wash up pump truck.
9:30					Job Complete.
					Thank You
					Clarence, Mike, Jeffery



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 04961 A

26-215-12W

DATE _____ TICKET NO. _____

DATE OF JOB 11-29-11	DISTRICT Pratt, Kansas	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 L. D. Drilling, Incorporated	LEASE Widener	WELL NO. 7-26							
ADDRESS	COUNTY Stafford	STATE Kansas							
CITY	STATE	SERVICE CREW C. Messick, M. Mattal, S. Young							
AUTHORIZED BY	JOB TYPE C.N.W. - Plug To Abandon								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
37,216	2.5						11-29-11	AM	5:00
						ARRIVED AT JOB	11-29-11	AM	7:00
19,903-19,905	2.5					START OPERATION		AM	8:30
						FINISH OPERATION		AM	11:00
19,832-21,010	2.5					RELEASED	11-29-11	AM	11:30
						MILES FROM STATION TO WELL			45

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
P CP103	60/40 Poz Cement	sk	200		\$ 2,400 00
P CC200	Cement Gel	Lb	344		\$ 86 00
P E100	Pickup Mileage	mi	45		\$ 191 25
P E101	Heavy Equipment Mileage	mi	90		\$ 630 00
P E113	Bulk Delivery	tm	387		\$ 619 20
P CE204	Cement Pump: 3,000 Feet To 4,000 Feet	hrs	4		\$ 2,160 00
P CE240	Blending and Mixing Service	sk	200		\$ 280 00
P S003	Service Supervisor	hrs	8		\$ 175 00
SUB TOTAL					265 \$ 5,167 75
CHEMICAL / ACID DATA:					
SERVICE & EQUIPMENT					%TAX ON \$
MATERIALS					%TAX ON \$
TOTAL					

SERVICE REPRESENTATIVE: *Aune R. Messick*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Jim Michle*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer L.V. Drilling, Incorporated	Lease No.	Date 11-29-11
Lease Widener	Well # 7-26	
Field Order # 4981	Station Pratt, Kansas	Casing 1 1/2" Drill Pipe
Type Job C.N.W. - Plug To Abandon	Formation	County Stafford
		State Kansas
		Legal Description 26-215-12W

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft	Pipe	200 sacks	60/40 Poz with	RATE	PRESS	ISIP
Depth	Depth	From	To	13.8L	Pre Pad Gal., 6.906 gal/stk.	1.42 CU.FT		5 Min.
Volume	Volume	From	To					10 Min.
Max Press	Max Press	From	To					15 Min.
Well Connection	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Drilling mud and	Gas Volume	Water	Total Load

Customer Representative Jim Nichols	Station Manager David Scott	Treater Clarence R. Messick
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Service Units	37,216	19,903	19,905	19,832	21,010				
Driver Names	Messick	Mihal	Young						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
6:00					Cementer on location.
7:30					Trucks on location and hold safety meeting.
					1 1/2" Plug 3,597 Feet 50 sacks cement
8:45		500		5	start Fresh Water Pre-Flush.
			20	5	start mixing 50 sacks cement.
			32.5	5	start Fresh Water Displacement
			42.5	5	start Drilling Mud Displacement.
9:00		-0-	74.5		stop pumping.
					2nd Plug 630 Feet - 50 sacks cement.
10:15		300		5	start Fresh Water, Pre-Flush.
			5	5	start mixing cement.
			17.5	5	start Fresh Water Displacement.
10:20		-0-	20		stop pumping.
					3rd Plug 360 Feet - 50 sacks cement.
10:30		250		5	start mixing cement
			12.5	5	start Fresh Water Displacement
10:34		-0-	13.5		stop pumping.
					4" Plug 60 Feet - 20 sacks
10:42		100		3	start mixing cement.
10:45		-0-	5		Cement circulated to surface. Stop pumping.
		-0-	7	3	Plug Rat Hole.
					Wash up pump truck.

KIM B. SHOEMAKER

CONSULTING GEOLOGIST

316-684-9709 * WICHITA, KS

GEOLOGIST'S REPORT

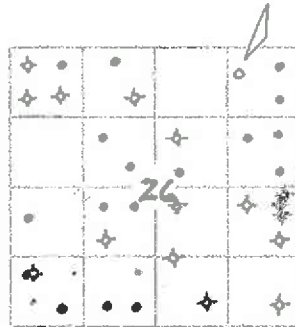
DRILLING TIME AND SAMPLE LOG

COMPANY L. D. DRILLING, INC.
 LEASE # 7-26 WIDENER
 FIELD WIDENER
 LOCATION 391' ENL 3/4 1167' FEL
 SEC 26 TWP 21s RGE 12W
 COUNTY STAFFORD STATE KANSAS
 CONTRACTOR PETROMARK RIG 2
 SPUD 11-21-11 COMP 11-29-11
 RTD 3637 LTD _____
 MUD UP 2600 TYPE MUD CHEMICAL

ELEVATIONS
 KB 1830
 DF _____
 GL 1825
 Measurements Are All From 1830 KB
 CASING SURFACE 8 5/8" @ 327'
 PRODUCTION _____
 ELECTRICAL SURVEYS None

SAMPLES SAVED FROM 3000 TO 3637
 DRILLING TIME KEPT FROM 2750 TO 3637
 SAMPLES EXAMINED FROM 3000 TO 3637
 GEOLOGICAL SUPERVISION FROM 3200 TO 3637
 GEOLOGIST ON WELL KIM B. SHOEMAKER

FORMATION TOPS	LOG	SAMPLES
ANHYDRITE		600+1230
TOPEKA		2809 - 979
HEBNER		3096 - 1266
BROWN LIME		3224 - 1394
LANSING		3243 - 1413
B/KC		3478 - 1648
VIOLA		3516 - 1686
SIMPSON		3597 - 1717
ARBUCKLE		3597 - 1767
RTD		3637 - 1807



REMARKS

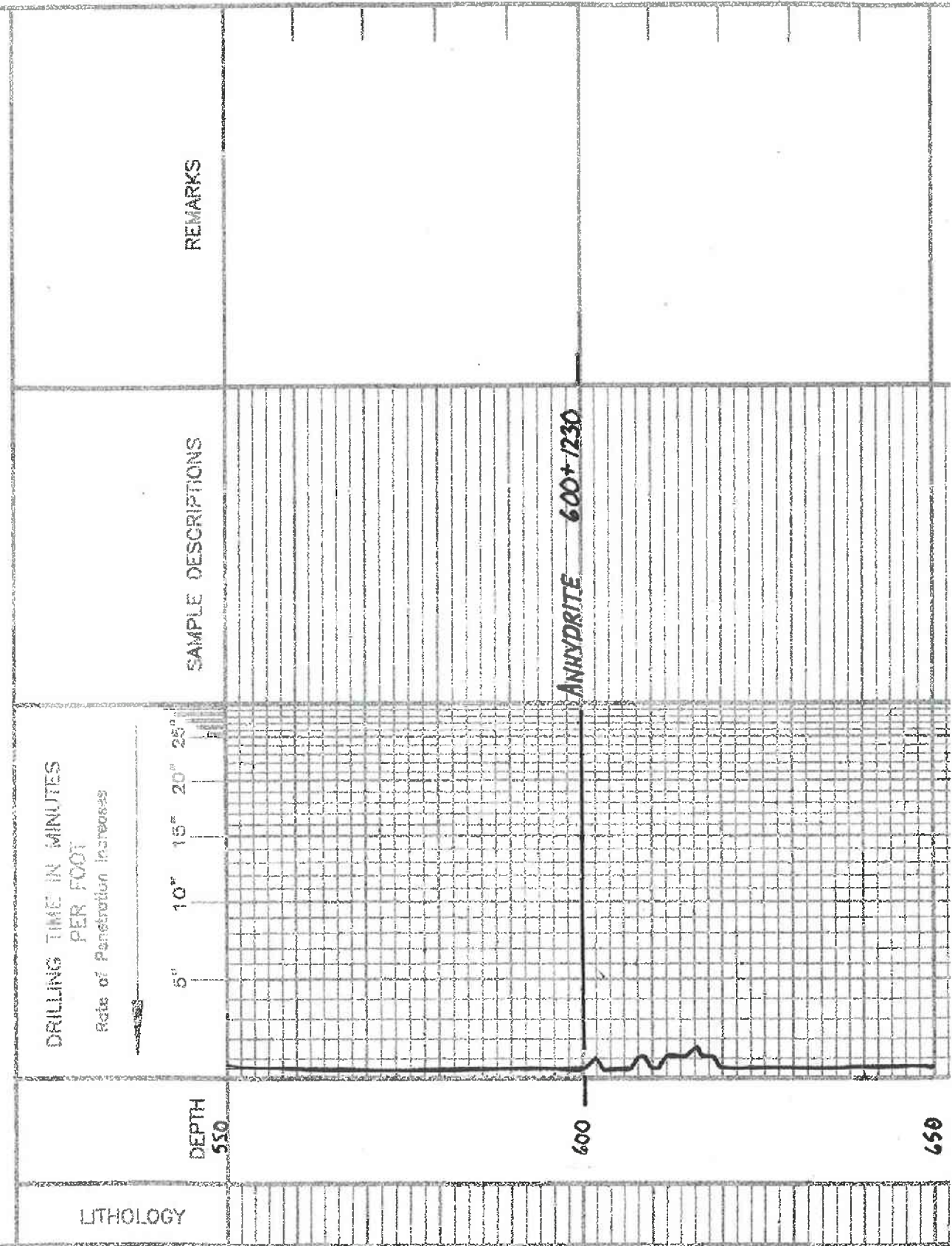
11-21-11 SPUD
 11-22 @ 332'
 11-23 @ 1730'
 11-24 @ 2600'
 11-25 @ 2756'
 11-26 @ 3225'
 11-27 @ 3440'
 11-28 @ 3565'
 11-29 @ 3628'

API: IS: 185-23714

LEGEND

- Anhydrite
- Salt
- Sandstone
- Shale
- Coal bit
- Limestone
- Col. Lime
- Chert
- Dolomite

SHOED1-06



650

2750

2800

2900

3000

Samples are tagged

15. To Foss

50. 004. 81k.

15. To wit. Foss. col. Si. Clastic.

15. wt. 120ly

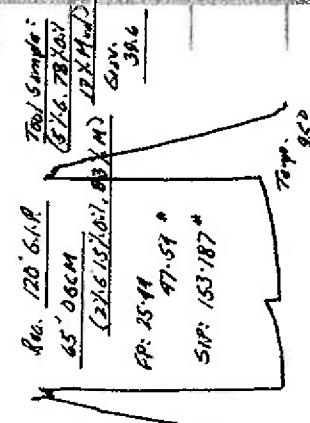


A. B. Bl. Trip w/ G.P. Bl. Bul. Bl. SW.
F. 0536 356
No. F. 100. No. 000

SIMPSON 3597-1717

DST (4) 3595-3615
STOPPEN: 8'w built to 73 1/2"
2nd OPEN: " " 6 1/2"
30' 45" 45' 60"

St. 27' G. Red. - 0.12
Sib. Sh. To. Green - 0.12
W. 0.12
Sh. Yellow Blue - 60

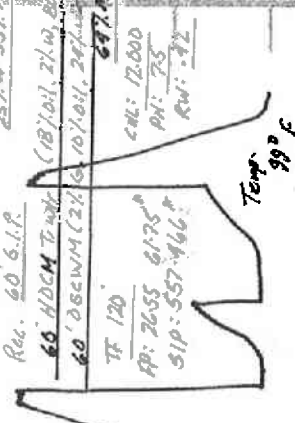


ARBUCKIE 3597-1767

Dol. To. 1/4 M.M. St. A. E. 1/2
R. Sh. 5/8 S.M. 5/8 ESTO. Dull. 1/2
E. 0.00

DST (5) 3613-3628
STOPPEN: 8'w built to 7 1/2"
2nd OPEN: " " 5 1/2"
30' 45" 45' 60" (22.6 18/101)
257W 597.71

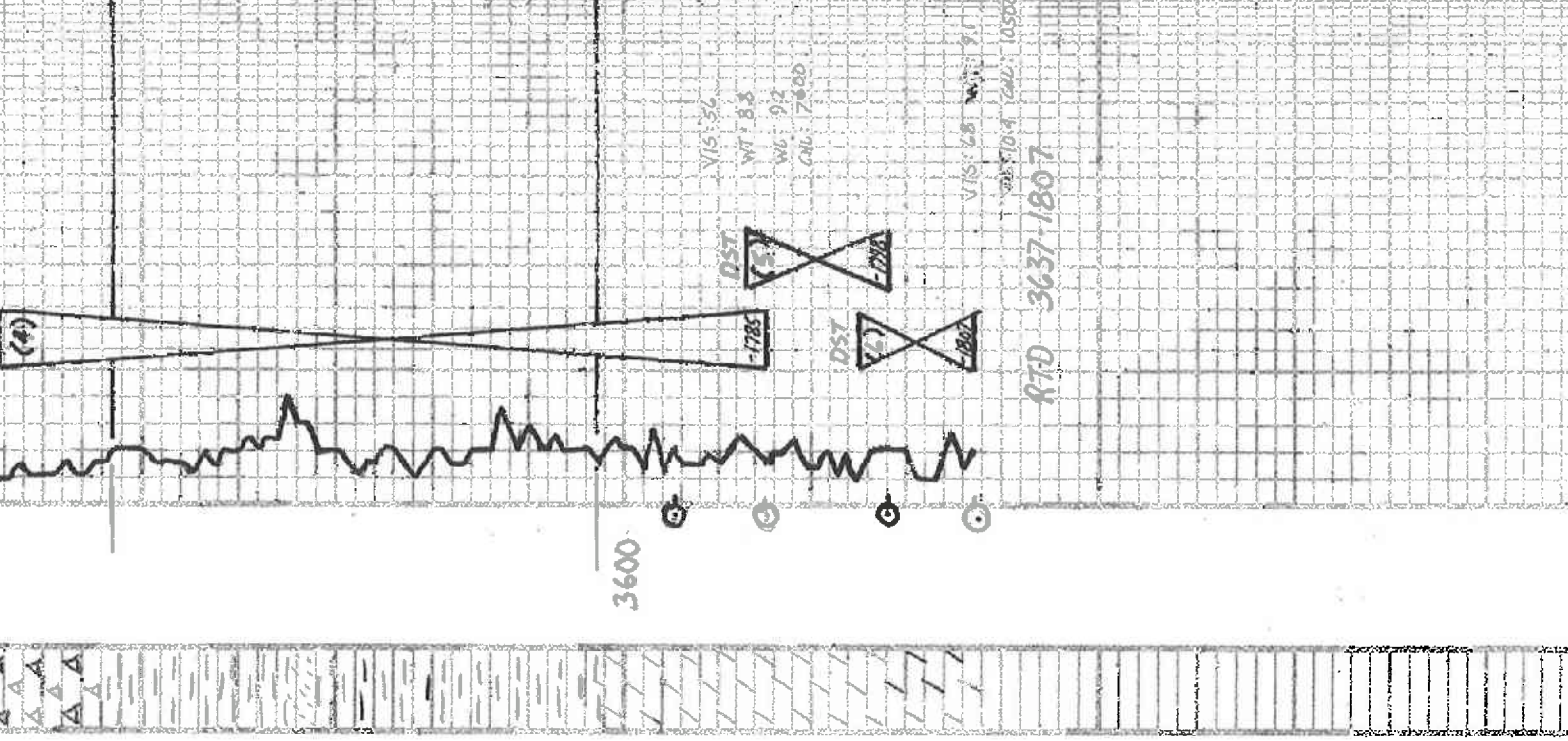
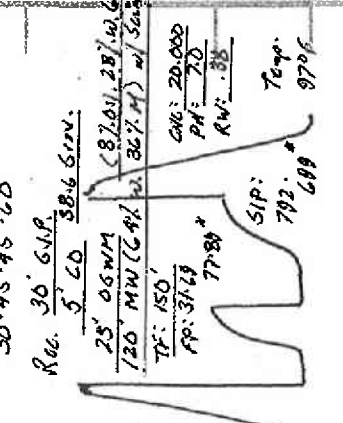
Dol. To. R. Ven. Exp. Bl. Sh. 5/8
R. Sh. 5/8 S.M. 5/8 ESTO. F. 100. 0.12
Dol. To. R. Ven. Exp. Bl. Sh. 5/8
R. Sh. 5/8 S.M. 5/8 ESTO. Dull. 1/2
E. 0.00



RFD 3637-1807

VIS: 56
WT: 83
WG: 92
CG: 7400

DST (6) 3625-3637
STOPPEN: 8'w built to 8"
2nd OPEN: " " 5"
30' 45" 45' 60"
Reg. 30' G.I.R., 5' 60 38.6 G.I.V.



3600

VIS: 68
WT: 91
WG: 92
CG: 7400

DIAMOND TESTING

General Information Report

General Information

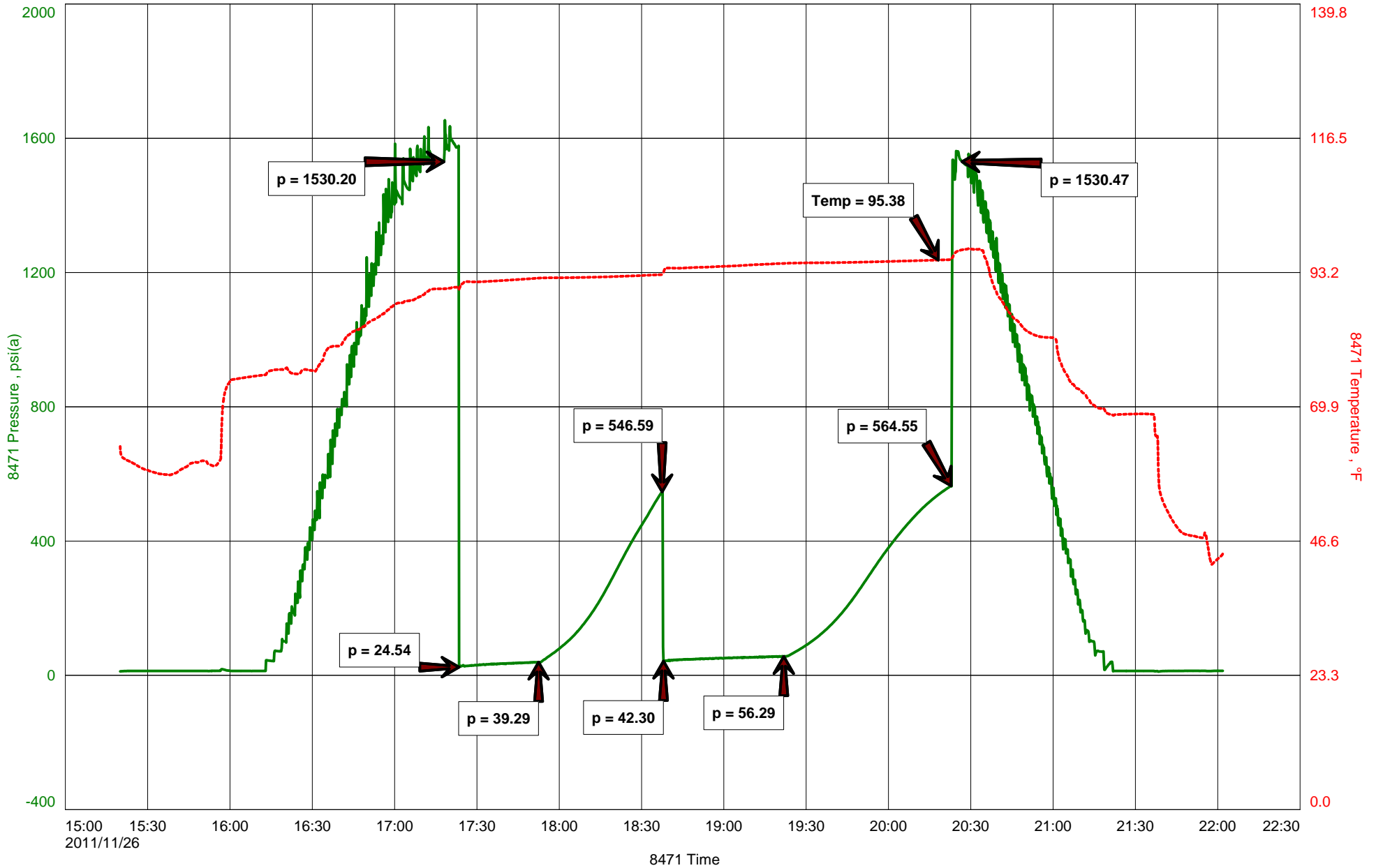
Company Name	L.D. DRILLING, INC.	Representative	ROGER D. FRIEDLY
Contact	L.D. DAVIS	Well Operator	L.D. DRILLING, INC.
Well Name	WIDENER #7-26	Report Date	2011/11/26
Unique Well ID	DST #1 LANSING 'B-F' 3,257' - 3,328'	Prepared By	ROGER D. FRIEDLY
Surface Location	SEC 26-21S-12W STAFFORD COUNTY, KS	Qualified By	KIM SHOEMAKER
Field	WILDCAT		
Well Type	Vertical		
Test Type	CONVENTIONAL DRILL-STEM TEST		
Formation	DST #1 LANSING 'B-F' 3,257' - 3,328'		
Well Fluid Type	01 Oil		
Start Test Date	2011/11/26	Start Test Time	15:20:00
Final Test Date	2011/11/26	Final Test Time	22:02:00

Test Recovery:

RECOVERED: 240' GAS IN PIPE
65' DM 100% MUD

TOOL SAMPLE: 100% DM

WIDENER #7-26





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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 STERLING 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 _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

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.

DIAMOND TESTING

General Information Report

General Information

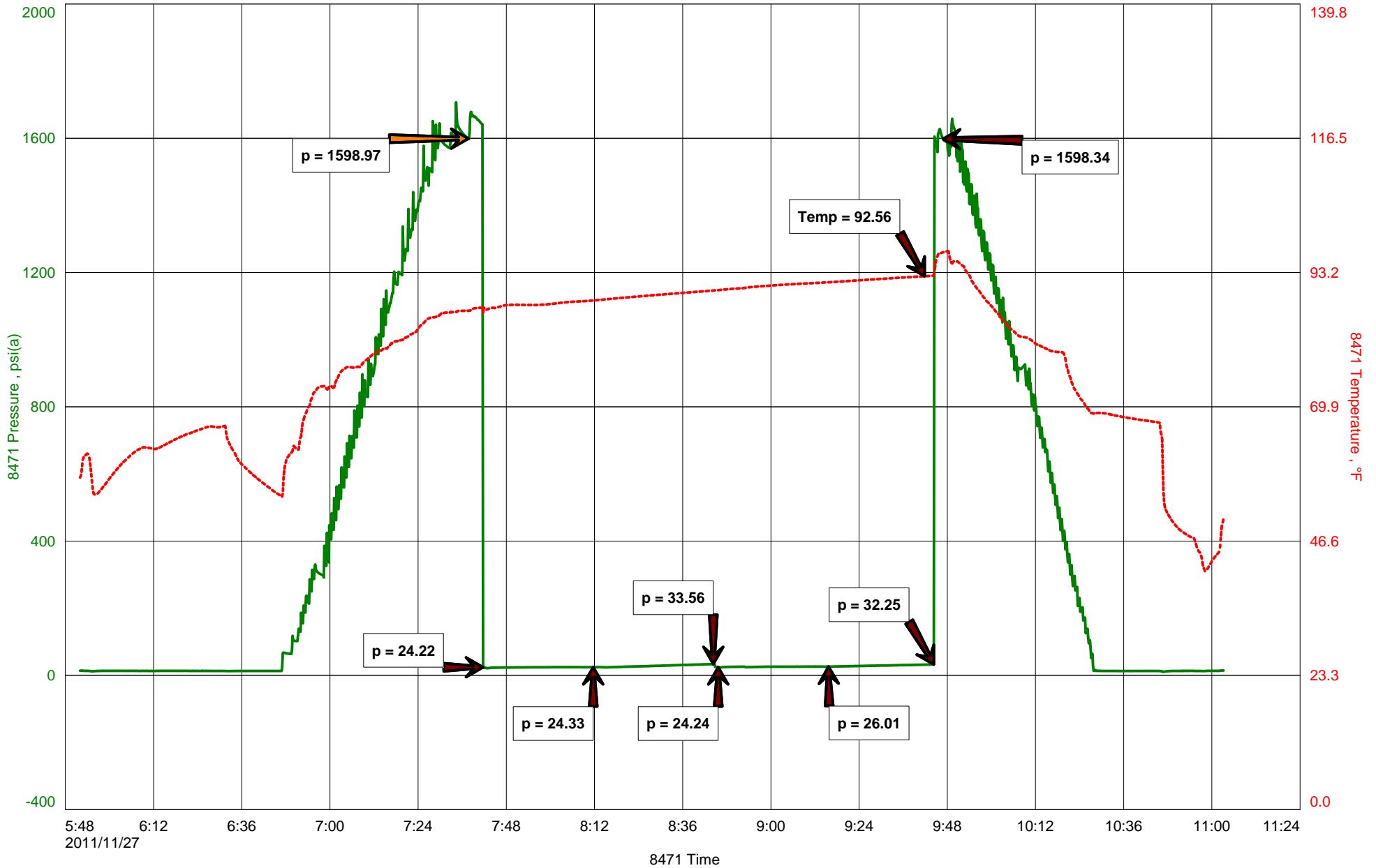
Company Name	L.D. DRILLING, INC.	Representative	ROGER D. FRIEDLY
Contact	L.D. DAVIS	Well Operator	L.D. DRILLING, INC.
Well Name	WIDENER #7-26	Report Date	2011/11/27
Unique Well ID	DST #2 LANSING 'H' 3,363' - 3,390'	Prepared By	ROGER D. FRIEDLY
Surface Location	SEC 26-21S-12W STAFFORD COUNTY, KS	Qualified By	KIM SHOEMAKER
Field	WILDCAT		
Well Type	Vertical		
Test Type	CONVENTIONAL DRILL-STEM TEST		
Formation	DST #2 LANSING 'H' 3,363' - 3,390'		
Well Fluid Type	01 Oil		
Start Test Date	2011/11/27	Start Test Time	05:52:00
Final Test Date	2011/11/27	Final Test Time	11:03:00

Test Recovery:

RECOVERED: 5' DM 100% MUD

TOOL SAMPLE: 100% DM

WIDENER #7-26





DIAMOND TESTING
 P.O. Box 157
HOISINGTON, KANSAS 67544
 (800) 542-7313
DRILL-STEM TEST TICKET
 FILE: _____

TIME ON: _____
 TIME OFF: _____

Company _____ Lease & Well No. _____
 Contractor _____ Charge to _____
 Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
 Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
 Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
 Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
 Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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 STERLING 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 _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	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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DIAMOND TESTING

General Information Report

General Information

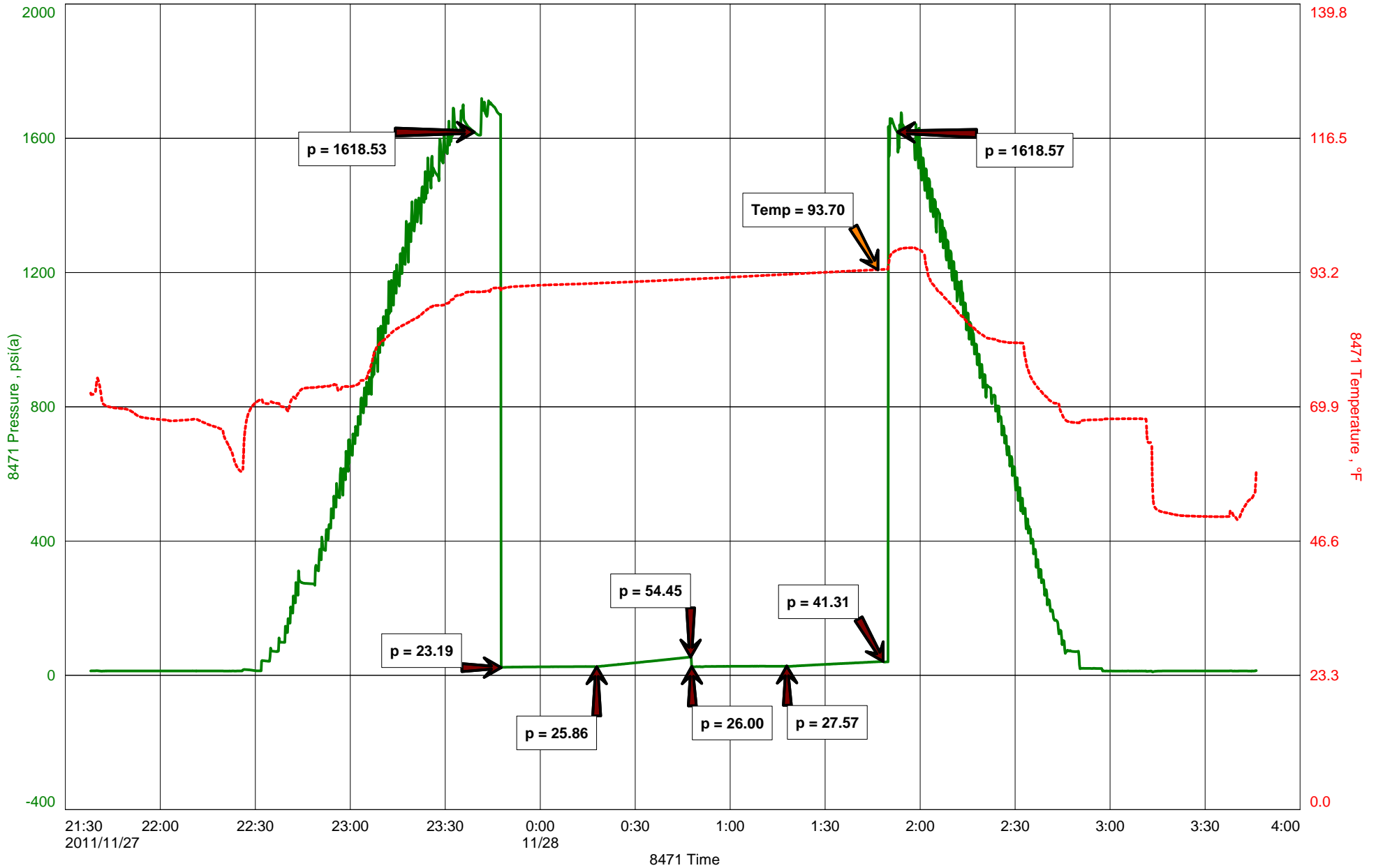
Company Name	L.D. DRILLING, INC.	Representative	ROGER D. FRIEDLY
Contact	L.D. DAVIS	Well Operator	L.D. DRILLING, INC.
Well Name	WIDENER #7-26	Report Date	2011/11/28
Unique Well ID	DST #3 LKC 'K' - CONG. 3,415' - 3,527'	Prepared By	ROGER D. FRIEDLY
Surface Location	SEC 26-21S-12W STAFFORD COUNTY, KS	Qualified By	KIM SHOEMAKER
Field	WILDCAT		
Well Type	Vertical		
Test Type	CONVENTIONAL DRILL-STEM TEST		
Formation	DST #3 LKC 'K' - CONG, 3,415' - 3,527'		
Well Fluid Type	01 Oil		
Start Test Date	2011/11/27	Start Test Time	21:38:00
Final Test Date	2011/11/28	Final Test Time	03:46:00

Test Recovery:

RECOVERED: 5' DM 100% MUD

TOOL SAMPLE: 100% DM

WIDENER #7-26





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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 STERLING 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 _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

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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DIAMOND TESTING

General Information Report

General Information

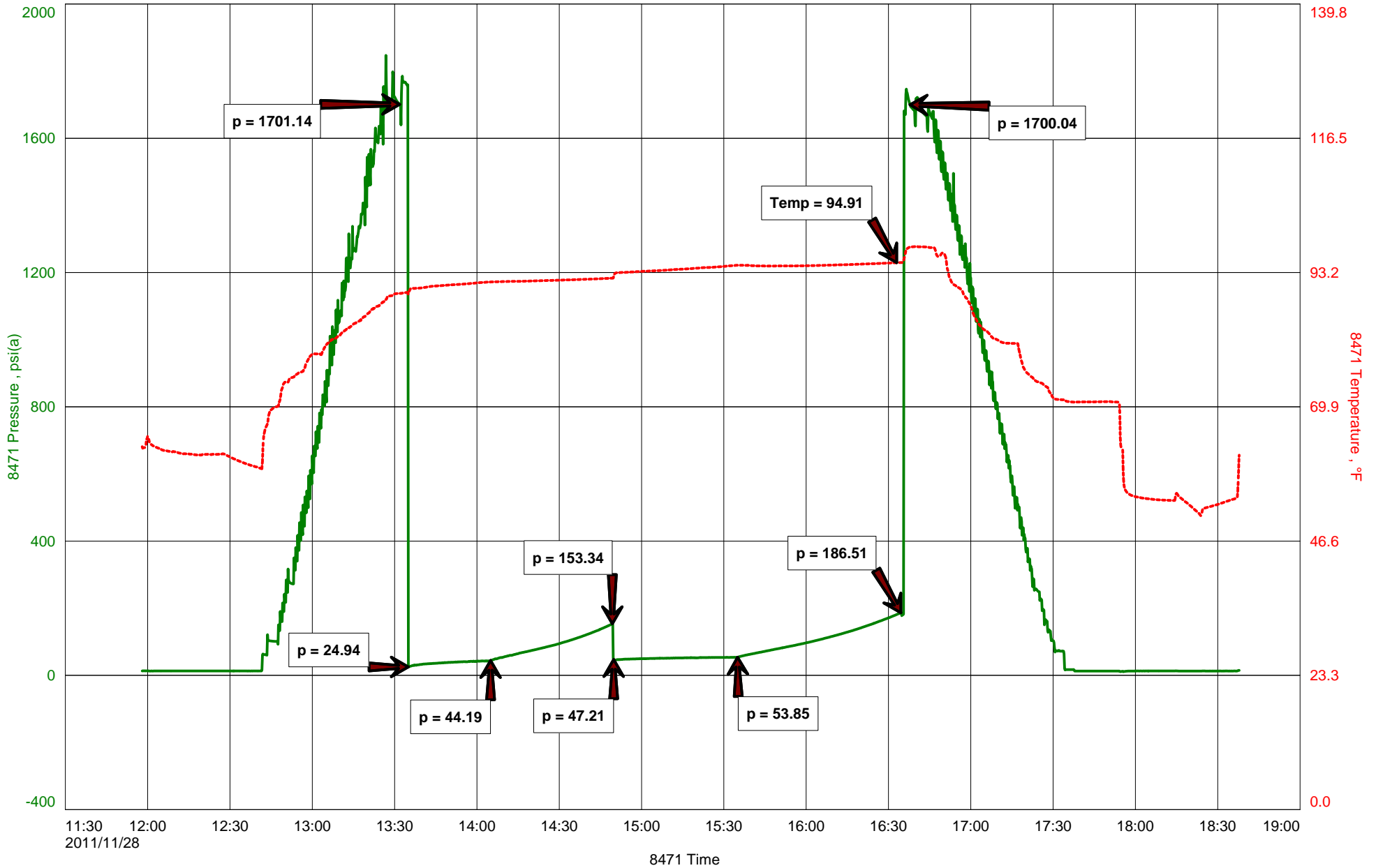
Company Name	L.D. DRILLING, INC.	Representative	ROGER D. FRIEDLY
Contact	L.D. DAVIS	Well Operator	L.D. DRILLING, INC.
Well Name	WIDENER #7-26	Report Date	2011/11/28
Unique Well ID	DST #4 ARBUCKLE 3,535' - 3,615'	Prepared By	ROGER D. FRIEDLY
Surface Location	SEC 26-21S-12W STAFFORD COUNTY, KS	Qualified By	KIM SHOEMAKER
Field	WILDCAT		
Well Type	Vertical		
Test Type	CONVENTIONAL DRILL-STEM TEST		
Formation	DST #4 ARBUCKLE 3,535' - 3,615'		
Well Fluid Type	01 Oil		
Start Test Date	2011/11/28	Start Test Time	11:58:00
Final Test Date	2011/11/28	Final Test Time	18:38:00

Test Recovery:

RECOVERED:	120'	GAS IN PIPE
	65'	G&OCM 2% GAS, 15% OIL, 83% MUD
	65'	TOTAL FLUID

TOOL SAMPLE: 5% GAS, 78% OIL, 17% MUD

WIDENER #7-26





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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 STERLING 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 _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

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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DIAMOND TESTING

General Information Report

General Information

Company Name	L.D. DRILLING, INC.	Representative	ROGER D. FRIEDLY
Contact	L.D. DAVIS	Well Operator	L.D. DRILLING, INC.
Well Name	WIDENER #7-26	Report Date	2011/11/29
Unique Well ID	DST #5 ARBUCKLE 3,613' - 3,628'	Prepared By	ROGER D. FRIEDLY
Surface Location	SEC 26-21S-12W STAFFORD COUNTY, KS	Qualified By	KIM SHOEMAKER
Field	WILDCAT		
Well Type	Vertical		
Test Type	CONVENTIONAL DRILL-STEM TEST		
Formation	DST #5 ARBUCKLE 3,613' - 3,628'		
Well Fluid Type	01 Oil		
Start Test Date	2011/11/28	Start Test Time	23:15:00
Final Test Date	2100/11/29	Final Test Time	06:37:00

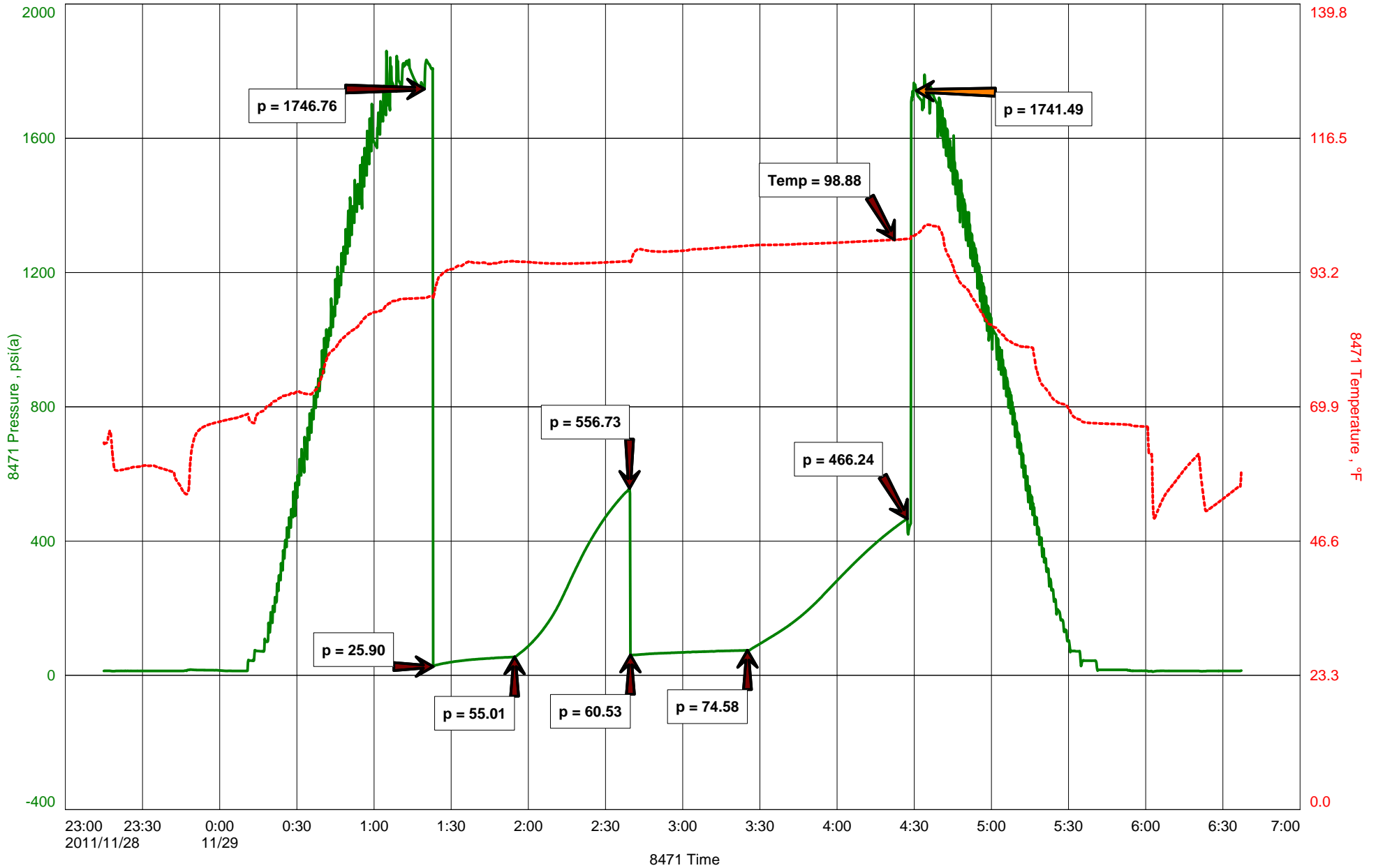
Test Recovery:

RECOVERED:	60'	GAS IN PIPE
	60'	SLTW&OCM 18% OIL, 2% WTR, 80% MUD
	60'	G&OCWM 2% GAS, 10% OIL, 24% WTR, 64% MUD
	120'	TOTAL FLUID

TOOL SAMPLE: 2% GAS, 18% OIL, 25% WTR, 55% MUD

CHLORIDES: 12,000 Ppm
PH: 7.5
RW: .42 @ 62 deg,

WIDENER #7-26





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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 STERLING 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 _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

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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DIAMOND TESTING

General Information Report

General Information

Company Name	L.D. DILLING, INC.	Representative	ROGER D. FRIEDLY
Contact	L.D. DAVIS	Well Operator	L.D. DRILLING, INC.
Well Name	WIDENER #7-26	Report Date	2011/11/29
Unique Well ID	DST #6 ARBUCKLE 3,625' - 3,637'	Prepared By	ROGER D. FRIEDLY
Surface Location	SEC 26-21S-12W STAFFORD COUNTY, KS	Qualified By	KIM SHOEMAKER
Field	WILDCAT		
Well Type	Vertical		
Test Type	CONVVENTIONAL DRILL-STEM TEST		
Formation	DST \$6 ARBUCKLE 3,625' - 3,538'		
Well Fluid Type	01 Oil		
Start Test Date	2011/11/29	Start Test Time	10:51:00
Final Test Date	2011/11/29	Final Test Time	18:15:00

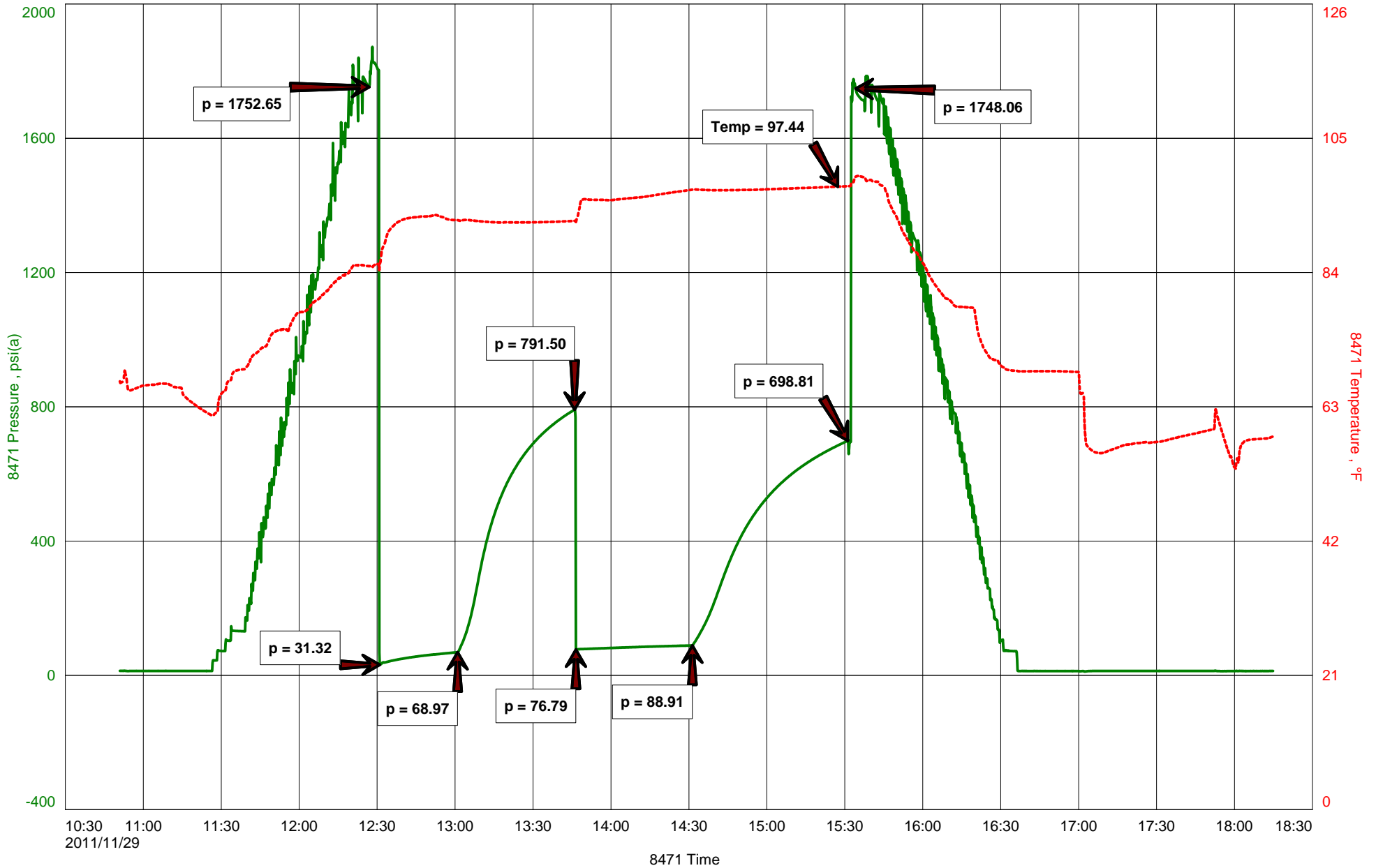
Test Recovery:

RECOVERED:	30'	GAS IN PIPE
	5'	CLEAN OIL 38.6 GRAVITY @ 60 deg.
	25'	OCWM 8% OIL, 28% WTR, 64% MUD
	120'	MW 64% WTR, 36% MUD - SCUM OF OIL
	150'	TOTAL FLUID

TOOL SAMPLE: 2% OIL, 75% WTR, 23% MUD

CHLORIDES: 20,000 Ppm
PH: 7.0
RW: .38 @ 57 deg.

WIDENER #7-26





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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 STERLING 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 _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

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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