



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

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

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

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

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

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

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

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

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

County: _____ Permit #: _____

AFFIDAVIT

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

Submitted Electronically

KCC Office Use ONLY

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



Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	O'Brien Resources, LLC
Well Name	Sharp Seed Lease 2 1
Doc ID	1072035

All Electric Logs Run

Triple Combo
Micro
Dual Induction
Compensated Density

Summary of Changes

Lease Name and Number: Sharp Seed Lease 2 1

API/Permit #: 15-101-22314-00-00

Doc ID: 1072035

Correction Number: 2

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	12/14/2011	01/19/2012
Date of First or Resumed Production or SWD or Enhr Producing Method Pumping	No	01/12/2012 Yes
Production - Barrels Oil		78
Production - Barrels of Water		0
Save Link	../kcc/detail/operatorEditDetail.cfm?docID=1070234	../kcc/detail/operatorEditDetail.cfm?docID=1072035

**CONFIDENTIAL****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 DistributionALT I II III Approved by: _____ Date: _____



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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Form	ACO1 - Well Completion
Operator	O'Brien Resources, LLC
Well Name	Sharp Seed Lease 2 1
Doc ID	1070234

All Electric Logs Run

Triple Combo
Micro
Dual Induction
Compensated Density

Summary of Changes

Lease Name and Number: Sharp Seed Lease 2 1

API/Permit #: 15-101-22314-00-00

Doc ID: 1070234

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	12/08/2011	12/14/2011
Date of First or Resumed Production or SWD or Enhr Producing Method Pumping	11/21/2011 Yes	No
Production - Barrels Oil	47	
Production - Barrels of Water	7	
Production Interval #1	LKC	
Save Link	../..kcc/detail/operatorEditDetail.cfm?docID=1068130	../..kcc/detail/operatorEditDetail.cfm?docID=1070234



CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

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Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

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Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

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_____ Feet from North / South Line of Section

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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: _____



1068130

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.

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Form	ACO1 - Well Completion
Operator	O'Brien Resources, LLC
Well Name	Sharp Seed Lease 2 1
Doc ID	1068130

All Electric Logs Run

Triple Combo
Micro
Dual Induction
Compensated Density

ALLIED CEMENTING CO., LLC. 037389

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Great Bend, KS
9-21-11

DATE <i>9-20-11</i>	SEC. <i>2</i>	TWP. <i>17</i>	RANGE <i>30</i>	CALLED OUT	ON LOCATION	JOB START <i>7:15 AM</i>	JOB FINISH <i>1:45 PM</i>
LEASE <i>LEASE 2</i>		WELL # <i>#1</i>		LOCATION <i>Hedy, KS 1/2 NORTH</i>		COUNTY <i>Lane</i>	STATE <i>KS</i>
OLD OR NEW (Circle one)				<i>EAST 100 TO</i>			

CONTRACTOR *Pickell #10*

TYPE OF JOB *Sur face*

HOLE SIZE <i>12 1/4</i>	T.D. <i>272</i>
CASING SIZE <i>8 5/8</i>	DEPTH <i>272</i>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <i>15 ft.</i>	
PERFS.	
DISPLACEMENT	

OWNER *O'Brien Resources, LLC*

CEMENT
AMOUNT ORDERED *185 sks Class A*
30% cc 2% gel 1/4 flo.

COMMON	<i>185</i>	@	<i>16.25</i>	<i>3006.25</i>
POZMIX		@		
GEL	<i>3</i>	@	<i>21.25</i>	<i>63.75</i>
CHLORIDE	<i>6</i>	@	<i>58.20</i>	<i>349.20</i>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>194</i>	@	<i>2.25</i>	<i>436.50</i>
MILEAGE	<i>194 x 32 x .11</i>			<i>1.173.70</i>
TOTAL				<i>5029.20</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Greg L.*

566 HELPER *Dustin C.*

BULK TRUCK

341 DRIVER *Kevin W.*

BULK TRUCK

DRIVER

REMARKS:

Pipe on bottom - Break circulation with rig up. MIX 185 sks class A 30% cc 2% gel 1/4 flo

Displace with 16.37 bbls freshwater - Shut in - Cement did circulate

Rig down

SERVICE

DEPTH OF JOB	
PUMP TRUCK CHARGE	<i>1125.00</i>
EXTRA FOOTAGE	@
MILEAGE <i>HUM 110</i>	@ <i>7.00</i> <i>770.00</i>
MANIFOLD	@
<i>HUM 110</i>	@ <i>4.00</i> <i>440.00</i>
	@

TOTAL *2335.00*

PLUG & FLOAT EQUIPMENT

	@
	@
	@
	@
	@

TOTAL

SALES TAX (If Any)

TOTAL CHARGES *7.364.40*

DISCOUNT *70% 20% 2.664.73* IF PAID IN 30 DAYS

4.699.67

CHARGE TO: *O'Brien Resources*

STREET

CITY STATE ZIP

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

PRINTED NAME *Mike Kern*

SIGNATURE *Mike Kern*

Thank you!



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

O Brien Resources
P.O. Box 6149
Shreveport, LA 71136
ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
Job Ticket: 43829 **DST#: 1**
Test Start: 2011.09.27 @ 06:14:59

GENERAL INFORMATION:

Formation: **Lansing A-B**
 Deviated: No Whipstock: ft (KB)
 Test Type: Conventional Bottom Hole (Initial)
 Time Tool Opened: 08:26:39
 Tester: Brandon Turley
 Time Test Ended: 12:53:23
 Unit No: 35
 Interval: **3925.00 ft (KB) To 3982.00 ft (KB) (TVD)**
 Reference Elevations: 2858.00 ft (KB)
 Total Depth: 3982.00 ft (KB) (TVD)
 2851.00 ft (CF)
 Hole Diameter: 7.88 inches Hole Condition: Good
 KB to GR/CF: 7.00 ft

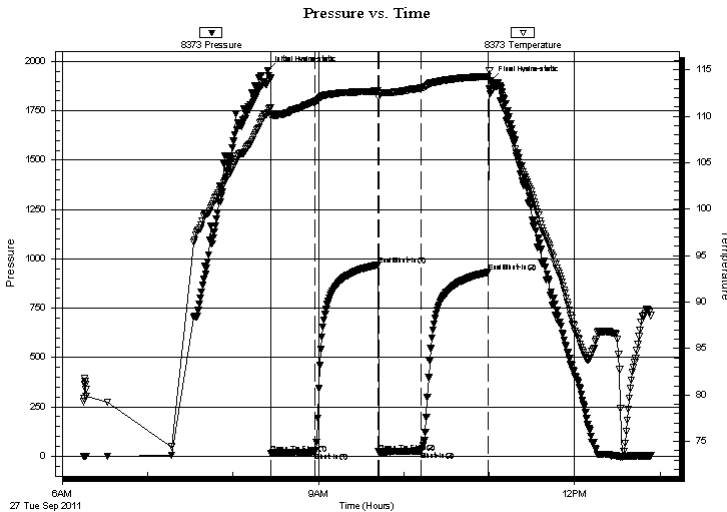
Serial #: 8373

Inside

Press @ Run Depth: 26.49 psig @ 3926.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.09.27 End Date: 2011.09.27 Last Calib.: 2011.09.27
 Start Time: 06:14:59 End Time: 12:53:23 Time On Btm: 2011.09.27 @ 08:24:09
 Time Off Btm: 2011.09.27 @ 11:01:08

TEST COMMENT: IF: 1/4 blow built to 2 in 30 min.
 IS: No return.
 FF: Surface blow built to 1/4 in 30 min.
 FS: No return.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1954.92	110.36	Initial Hydro-static
3	15.40	110.02	Open To Flow (1)
34	21.25	111.56	Shut-In(1)
78	969.66	112.73	End Shut-In(1)
78	21.45	112.01	Open To Flow (2)
108	26.49	113.04	Shut-In(2)
156	932.04	114.31	End Shut-In(2)
157	1903.30	113.62	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
31.00	mud oil spots 100%m	0.43

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

O Brien Resources

2-17s-30w Lane Ks

P.O. Box 6149
Shreveport, LA 71136

Sharp Seed Lease 2#1

Job Ticket: 43829

DST#: 1

ATTN: Kurt Talbott

Test Start: 2011.09.27 @ 06:14:59

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 41.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.97 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 800.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
31.00	mud oil spots 100%m	0.435

Total Length: 31.00 ft Total Volume: 0.435 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Serial #: 8373

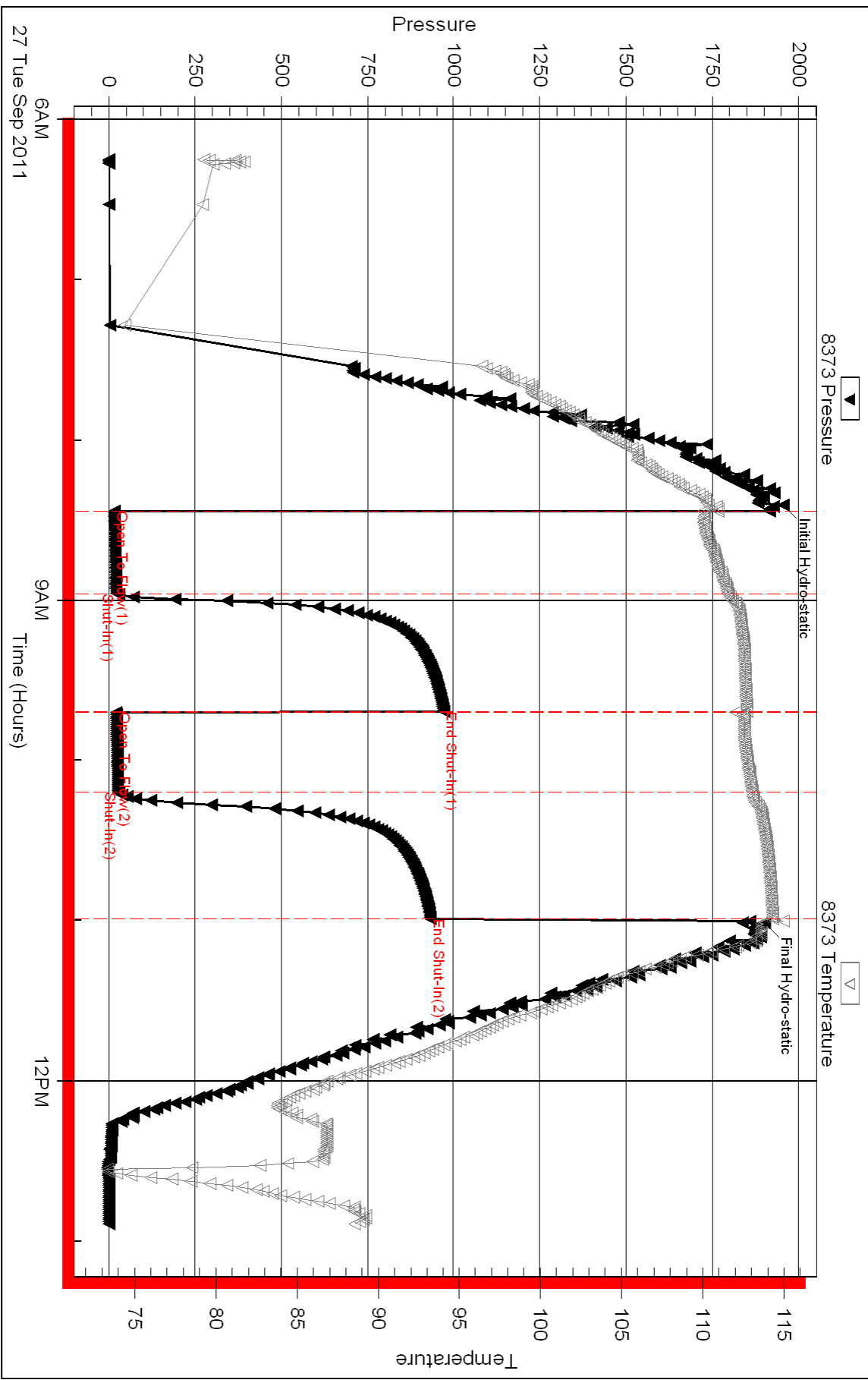
Inside

O'Brien Resources

Sharp Seed Lease 2#1

DST Test Number: 1

Pressure vs. Time



Triobite Testing, Inc

Ref. No: 43829

Printed: 2011.09.28 @ 09:30:41



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

O Brien Resources
 P.O. Box 6149
 Shreveport, LA 71136
 ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
 Job Ticket: 43830 **DST#: 2**
 Test Start: 2011.09.27 @ 22:18:00

GENERAL INFORMATION:

Formation: **Lansing E**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 23:57:00
 Time Test Ended: 03:38:30
 Interval: **4010.00 ft (KB) To 4030.00 ft (KB) (TVD)**
 Total Depth: 4030.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good
 Test Type: Conventional Bottom Hole (Reset)
 Tester: Brandon Turley
 Unit No: 35
 Reference Elevations: 2858.00 ft (KB)
 2851.00 ft (CF)
 KB to GR/CF: 7.00 ft

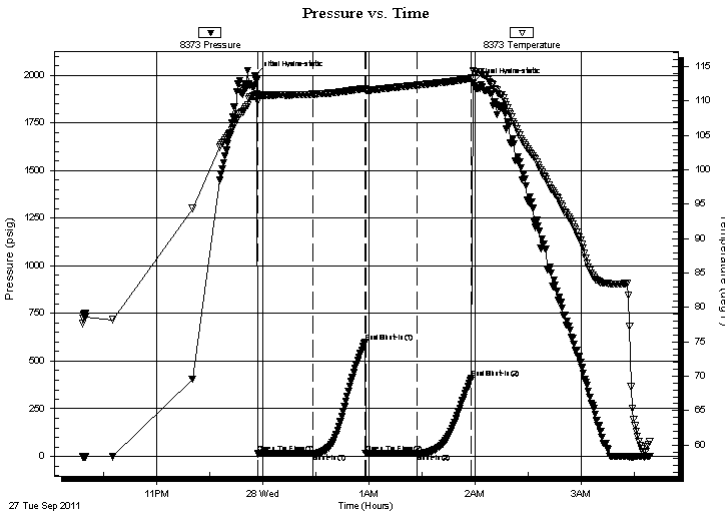
Serial #: 8373

Inside

Press @ Run Depth: 15.85 psig @ 4011.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.09.27 End Date: 2011.09.28 Last Calib.: 2011.09.28
 Start Time: 22:18:05 End Time: 03:38:29 Time On Btm: 2011.09.27 @ 23:55:30
 Time Off Btm: 2011.09.28 @ 01:58:45

TEST COMMENT: IF: Surface blow died in 16 min.
 IS: No return.
 FF: No blow.
 FS: No return.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1996.79	110.84	Initial Hydro-static
2	14.37	109.87	Open To Flow (1)
33	15.50	110.99	Shut-In(1)
62	599.29	111.81	End Shut-In(1)
63	15.61	111.52	Open To Flow (2)
92	15.85	112.31	Shut-In(2)
123	411.82	113.33	End Shut-In(2)
124	1959.12	114.46	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
5.00	mud oil spots 100%m	0.07

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

O Brien Resources
P.O. Box 6149
Shreveport, LA 71136
ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
Job Ticket: 43830 **DST#: 2**
Test Start: 2011.09.27 @ 22:18:00

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	0 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	0 ppm
Viscosity: 46.00 sec/qt	Cushion Volume: bbl		
Water Loss: 8.79 in ³	Gas Cushion Type:		
Resistivity: 0.00 ohm.m	Gas Cushion Pressure: psig		
Salinity: 4400.00 ppm			
Filter Cake: 1.00 inches			

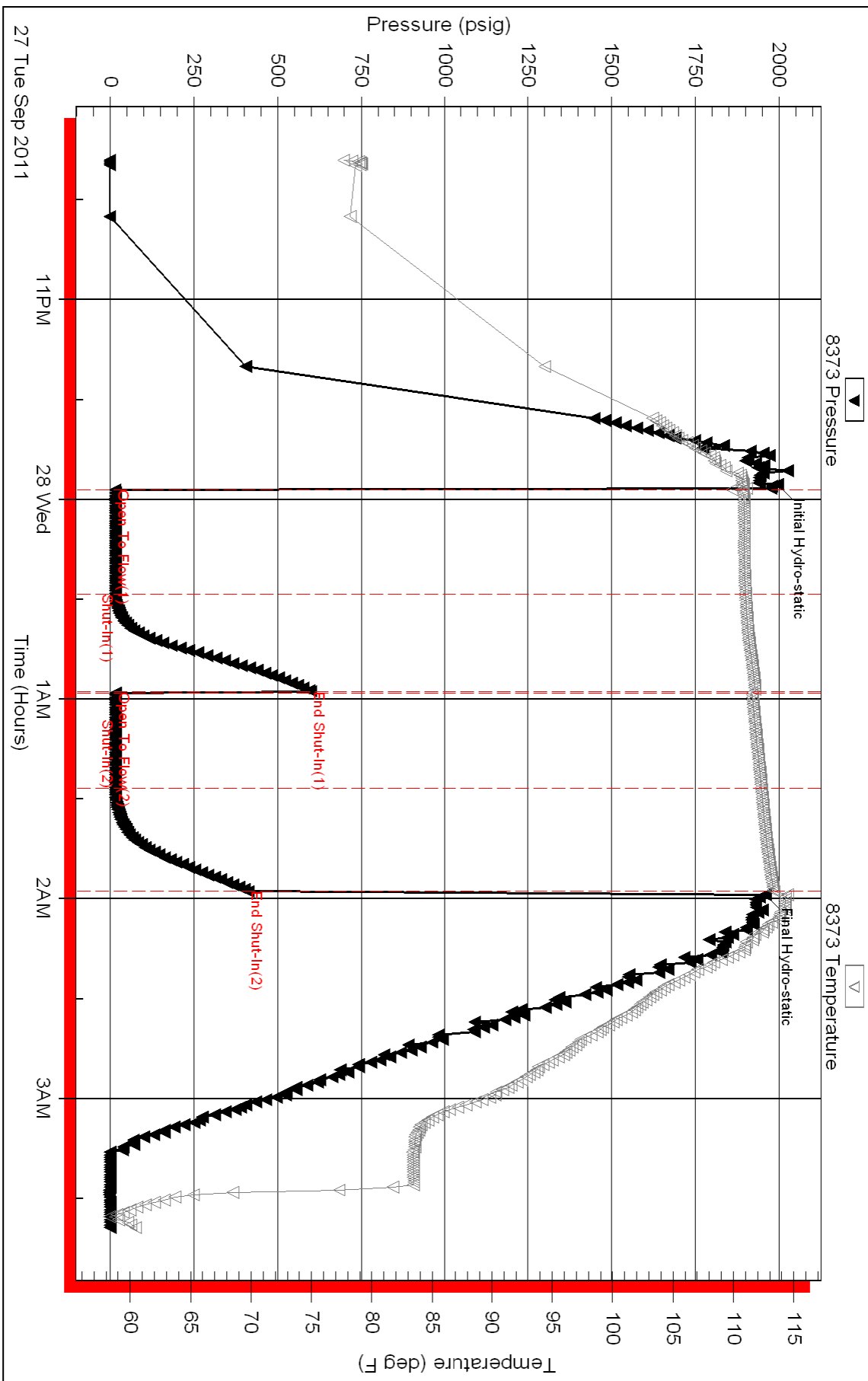
Recovery Information

Recovery Table

Length ft	Description	Volume bbl
5.00	mud oil spots 100%m	0.070

Total Length: 5.00 ft Total Volume: 0.070 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments:

Pressure vs. Time





TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

O Brien Resources
 P.O. Box 6149
 Shreveport, LA 71136
 ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
 Job Ticket: 43831 **DST#: 3**
 Test Start: 2011.09.28 @ 19:21:51

GENERAL INFORMATION:

Formation: **H-I-J**
 Deviated: No Whipstock: ft (KB)
 Test Type: Conventional Bottom Hole (Reset)
 Time Tool Opened: 21:16:31 Tester: Brandon Turley
 Time Test Ended: 00:56:15 Unit No: 35
 Interval: **4103.00 ft (KB) To 4190.00 ft (KB) (TVD)** Reference Elevations: 2858.00 ft (KB)
 Total Depth: 4190.00 ft (KB) (TVD) 2851.00 ft (CF)
 Hole Diameter: 7.88 inches Hole Condition: Good KB to GR/CF: 7.00 ft

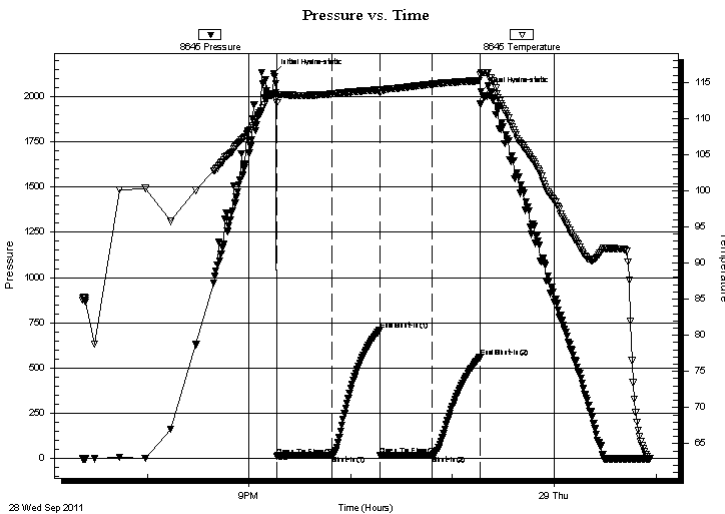
Serial #: 8645

Inside

Press @ Run Depth: 18.71 psig @ 4104.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.09.28 End Date: 2011.09.29 Last Calib.: 2011.09.29
 Start Time: 19:21:51 End Time: 00:56:15 Time On Btm: 2011.09.28 @ 21:14:46
 Time Off Btm: 2011.09.28 @ 23:17:01

TEST COMMENT: IF: 1/4 blow died in 9 min.
 IS: No return.
 FF: No blow.
 FS: No return.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2128.79	113.43	Initial Hydro-static
2	12.49	112.16	Open To Flow (1)
34	17.09	113.37	Shut-In(1)
63	710.23	113.96	End Shut-In(1)
63	17.27	113.51	Open To Flow (2)
93	18.71	114.75	Shut-In(2)
122	558.41	115.22	End Shut-In(2)
123	2027.16	116.27	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	mud 100%m	0.14

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

O Brien Resources

2-17s-30w Lane Ks

P.O. Box 6149
Shreveport, LA 71136

Sharp Seed Lease 2#1

Job Ticket: 43831

DST#: 3

ATTN: Kurt Talbott

Test Start: 2011.09.28 @ 19:21:51

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.78 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 3000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
10.00	mud 100%m	0.140

Total Length: 10.00 ft Total Volume: 0.140 bbl

Num Fluid Samples: 0

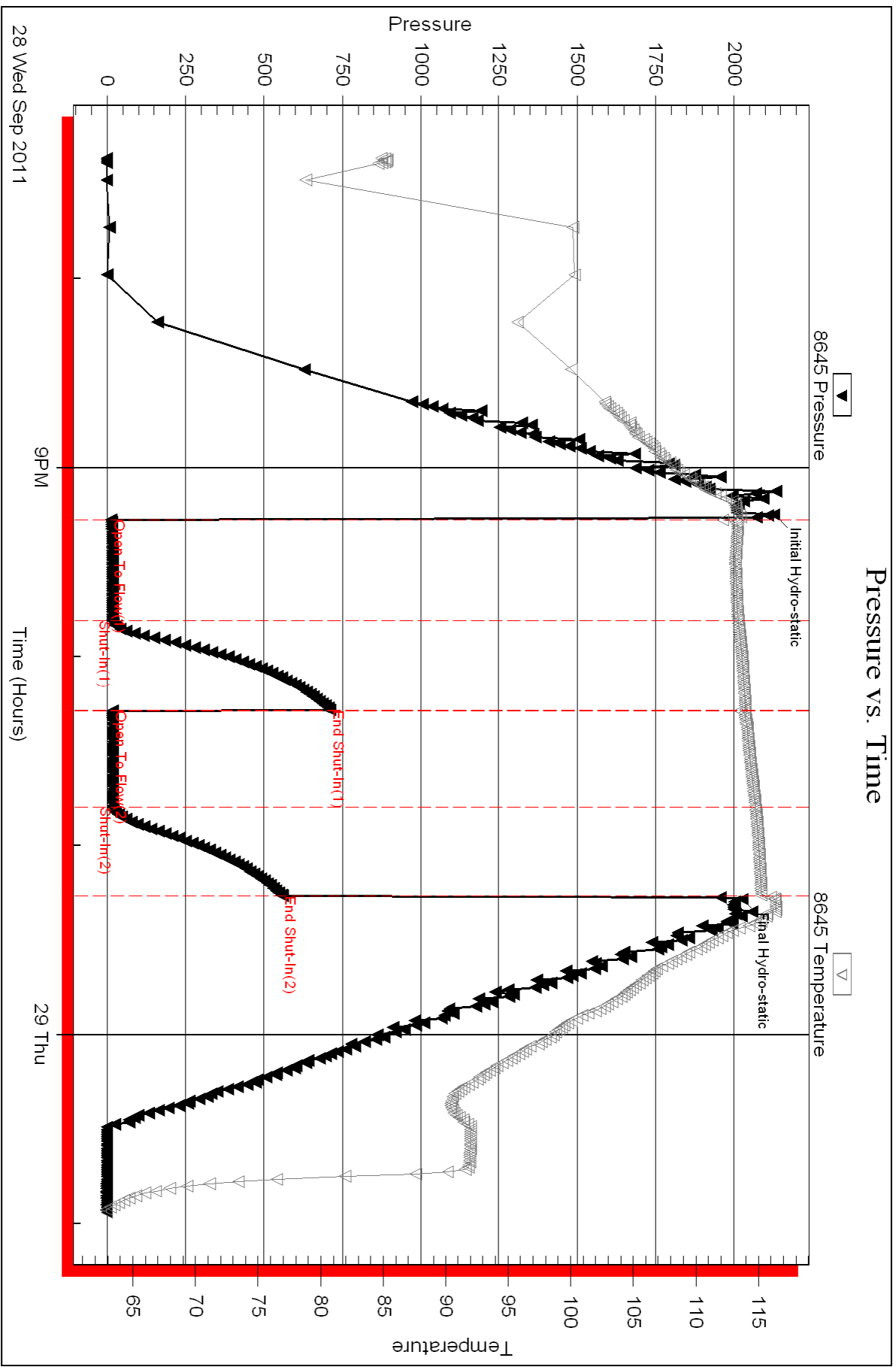
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

O'Brien Resources
P.O. Box 6149
Shreveport, LA 71136
ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
Job Ticket: 43832 **DST#: 4**
Test Start: 2011.09.29 @ 08:54:25

GENERAL INFORMATION:

Formation: **Lansing K**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 10:41:20
Time Test Ended: 15:56:49
Interval: **4194.00 ft (KB) To 4225.00 ft (KB) (TVD)**
Total Depth: 4225.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Good
Test Type: Conventional Bottom Hole (Reset)
Tester: Brandon Turley
Unit No: 35
Reference Elevations: 2858.00 ft (KB)
2851.00 ft (CF)
KB to GR/CF: 7.00 ft

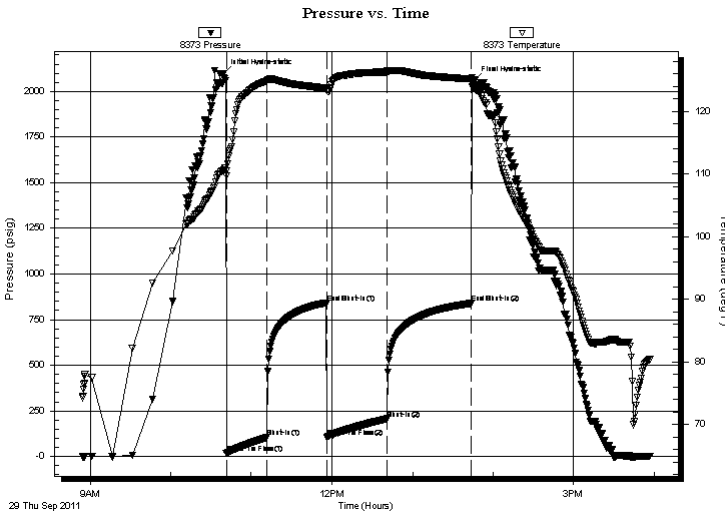
Serial #: 8373

Inside

Press @ Run Depth: 207.07 psig @ 4195.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2011.09.29 End Date: 2011.09.29 Last Calib.: 2011.09.29
Start Time: 08:54:25 End Time: 15:56:49 Time On Btm: 2011.09.29 @ 10:39:35
Time Off Btm: 2011.09.29 @ 13:45:34

TEST COMMENT: IF: 1/4 blow BOB in 15 min.
IS: No return.
FF: 1/4 blow BOB in 24 min.
FS: No return.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2099.44	110.69	Initial Hydro-static
2	19.51	109.78	Open To Flow (1)
32	104.24	124.91	Shut-In(1)
77	842.80	123.73	End Shut-In(1)
77	107.77	123.36	Open To Flow (2)
122	207.07	126.33	Shut-In(2)
185	839.38	125.21	End Shut-In(2)
186	2062.23	124.23	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
124.00	mcw 95%w 5%m	1.74
186.00	mcw 80%w 20%m	2.61
72.00	w cm 40%w 60%m	1.01

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

O Brien Resources

2-17s-30w Lane Ks

P.O. Box 6149
Shreveport, LA 71136

Sharp Seed Lease 2#1

Job Ticket: 43832

DST#: 4

ATTN: Kurt Talbott

Test Start: 2011.09.29 @ 08:54:25

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

24000 ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.78 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 3000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
124.00	mcw 95%w 5%m	1.739
186.00	mcw 80%w 20%m	2.609
72.00	w cm 40%w 60%m	1.010

Total Length: 382.00 ft Total Volume: 5.358 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

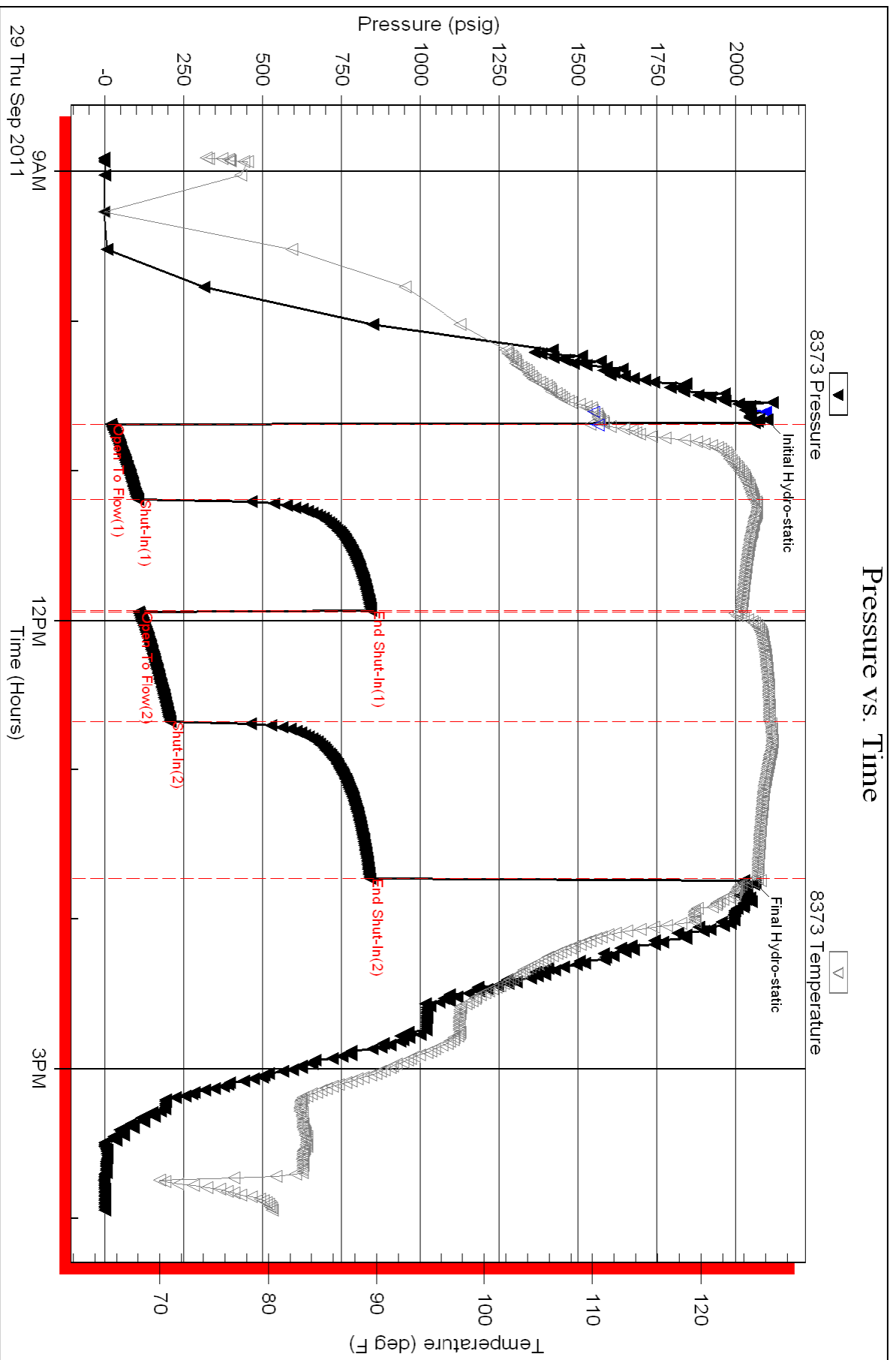
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: .25@81=24000

Pressure vs. Time





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

O Brien Resources
P.O. Box 6149
Shreveport, LA 71136
ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
Job Ticket: 43833 **DST#: 5**
Test Start: 2011.09.30 @ 02:34:46

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API: 0 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity: 32000 ppm
Viscosity: 42.00 sec/qt	Cushion Volume: bbl	
Water Loss: 11.98 in ³	Gas Cushion Type:	
Resistivity: 0.00 ohm.m	Gas Cushion Pressure: psig	
Salinity: 3600.00 ppm		
Filter Cake: 1.00 inches		

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
558.00	water 100%w	7.827
372.00	mcw 90%w 10%m	5.218
310.00	mcw 60%w 40%m	4.348
226.00	mw trace of oil 50%w 50%m	3.170

Total Length: 1466.00 ft Total Volume: 20.563 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments: .28@55=32000

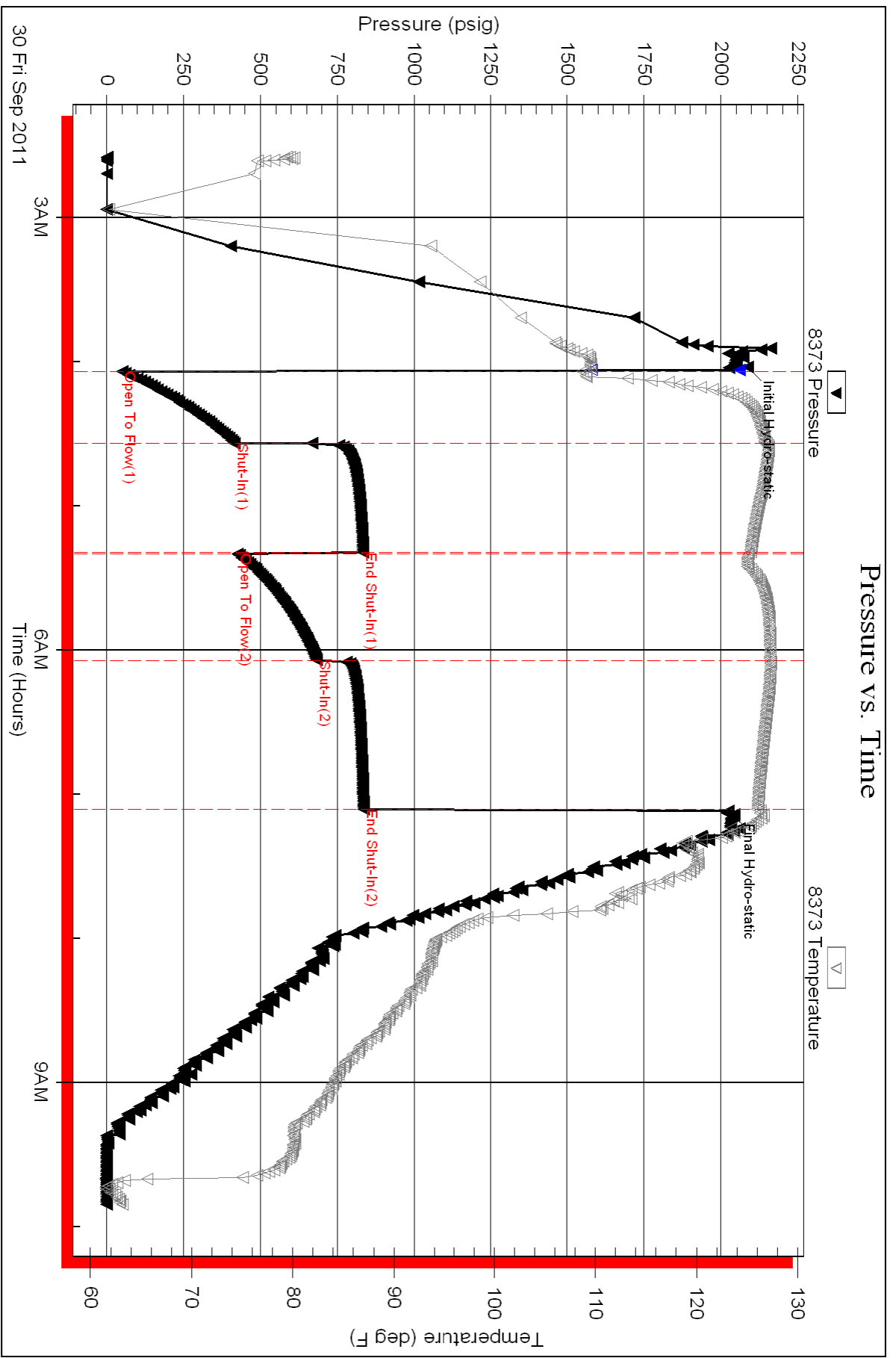
Serial #: 8373

Inside

O'Brien Resources

Sharp Seed Lease 2#1

DST Test Number: 5





TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

O Brien Resources
 P.O. Box 6149
 Shreveport, LA 71136
 ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
 Job Ticket: 43834 **DST#: 6**
 Test Start: 2011.10.01 @ 02:00:47

GENERAL INFORMATION:

Formation: **Marmaton**
 Deviated: No Whipstock: ft (KB)
 Test Type: Conventional Bottom Hole (Reset)
 Time Tool Opened: 08:08:47
 Tester: Brandon Turley
 Time Test Ended: 13:47:17
 Unit No: 35
 Interval: **4269.00 ft (KB) To 4390.00 ft (KB) (TVD)**
 Reference Elevations: 2858.00 ft (KB)
 Total Depth: 4390.00 ft (KB) (TVD)
 2851.00 ft (CF)
 Hole Diameter: 7.88 inches
 Hole Condition: Good
 KB to GR/CF: 7.00 ft

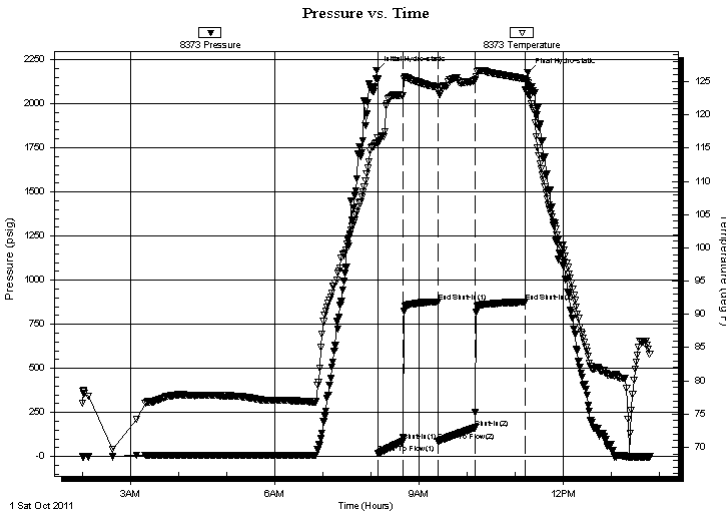
Serial #: 8373

Inside

Press @ Run Depth: 163.30 psig @ 4270.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.10.01 End Date: 2011.10.01 Last Calib.: 2011.10.01
 Start Time: 02:00:52 End Time: 13:47:17 Time On Btm: 2011.10.01 @ 08:07:02
 Time Off Btm: 2011.10.01 @ 11:15:32

TEST COMMENT: IF: BOB in 18 min.
 IS: No return.
 FF: BOB in 26 min.
 FS: No return.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2188.59	115.84	Initial Hydro-static
2	17.98	115.72	Open To Flow (1)
33	85.54	122.90	Shut-In(1)
77	876.99	124.19	End Shut-In(1)
77	87.84	123.61	Open To Flow (2)
123	163.30	125.15	Shut-In(2)
186	875.05	125.41	End Shut-In(2)
189	2175.22	124.78	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
62.00	mcw 90%w 10%m	0.87
124.00	mcw 80%w 20%m	1.74
124.00	w cm trace of oil 40%w 60%m	1.74
31.00	mcw 90%o 10%m	0.43

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

O'Brien Resources
P.O. Box 6149
Shreveport, LA 71136
ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
Job Ticket: 43834 **DST#: 6**
Test Start: 2011.10.01 @ 02:00:47

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API: 0 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity: 29000 ppm
Viscosity: 45.00 sec/qt	Cushion Volume: bbl	
Water Loss: 10.39 in ³	Gas Cushion Type:	
Resistivity: 0.00 ohm.m	Gas Cushion Pressure: psig	
Salinity: 4200.00 ppm		
Filter Cake: 1.00 inches		

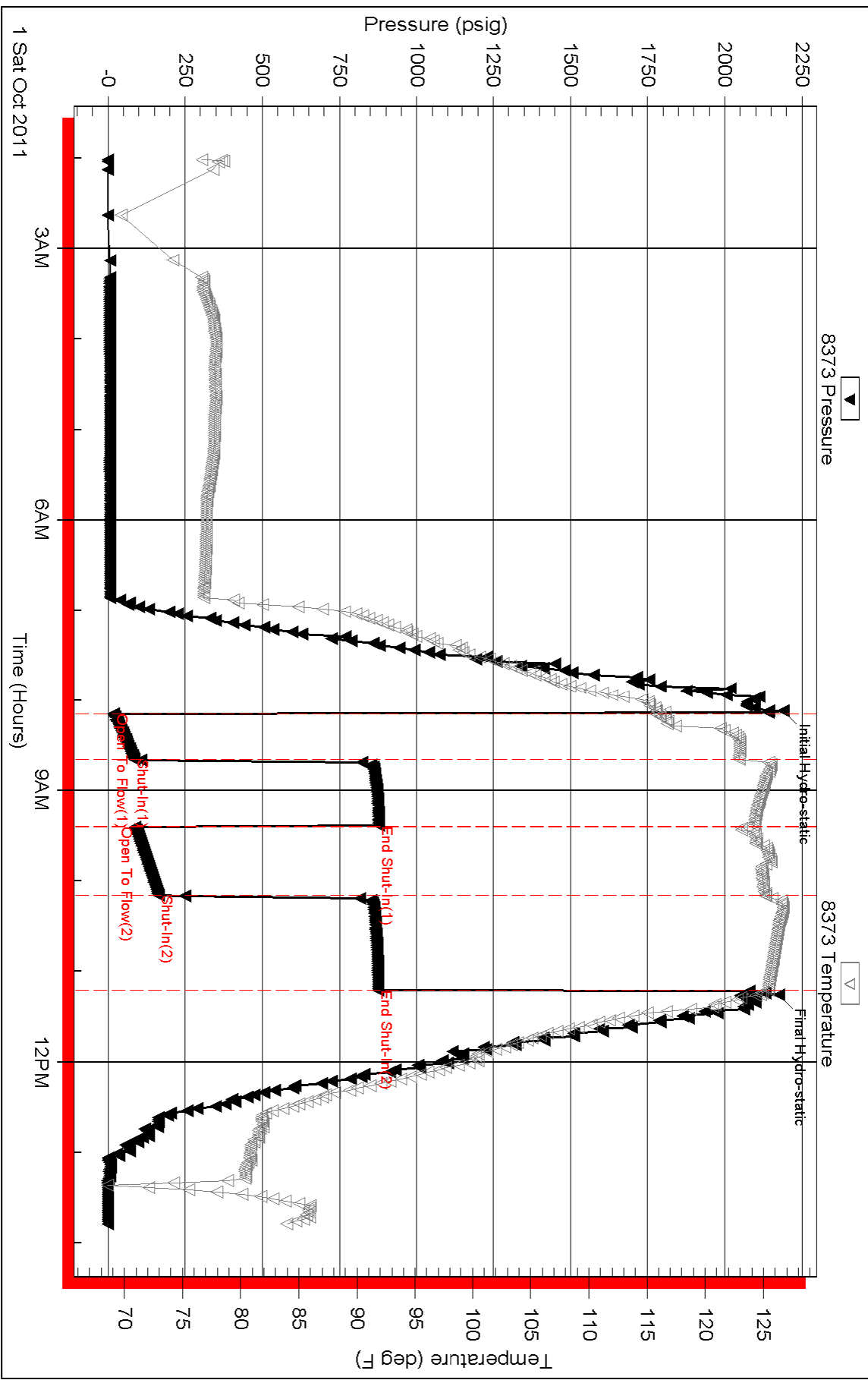
Recovery Information

Recovery Table

Length ft	Description	Volume bbl
62.00	mcw 90%w 10%m	0.870
124.00	mcw 80%w 20%m	1.739
124.00	w cm trace of oil 40%w 60%m	1.739
31.00	mcw 90%o 10%m	0.435

Total Length: 341.00 ft Total Volume: 4.783 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments: .21@82=29000

Pressure vs. Time





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

O'Brien Resources
P.O. Box 6149
Shreveport, LA 71136
ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
Job Ticket: 43835 **DST#: 7**
Test Start: 2011.10.02 @ 05:30:25

GENERAL INFORMATION:

Formation: **Goe didnt leave info**
 Deviated: No Whipstock: ft (KB)
 Test Type: Conventional Bottom Hole (Reset)
 Time Tool Opened: 07:37:05
 Tester: Brandon Turley
 Time Test Ended: 13:18:04
 Unit No: 35
 Interval: **4418.00 ft (KB) To 4490.00 ft (KB) (TVD)**
 Reference Elevations: 2858.00 ft (KB)
 Total Depth: 4490.00 ft (KB) (TVD)
 2851.00 ft (CF)
 Hole Diameter: 7.88 inches
 Hole Condition: Good
 KB to GR/CF: 7.00 ft

Serial #: 8373

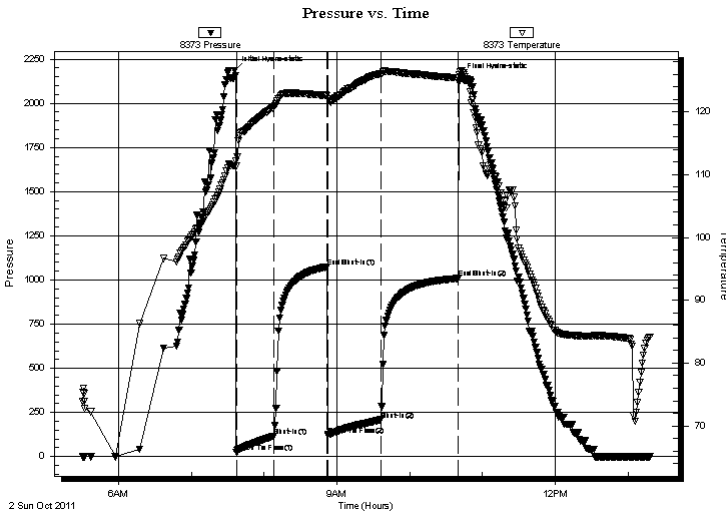
Inside

Press @ Run Depth: 208.36 psig @ 4419.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.10.02 End Date: 2011.10.02 Last Calib.: 2011.10.02
 Start Time: 05:30:25 End Time: 13:18:04 Time On Btm: 2011.10.02 @ 07:35:50
 Time Off Btm: 2011.10.02 @ 10:41:49

TEST COMMENT: IF: BOB in 3 min.
 IS: No return.
 FF: BOB in 4 min.
 FS: 1/4 blow built to 8 in 60 min.

PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2185.97	111.44	Initial Hydro-static
2	24.83	111.31	Open To Flow (1)
32	115.49	120.66	Shut-In(1)
77	1074.59	122.61	End Shut-In(1)
77	119.86	122.12	Open To Flow (2)
121	208.36	126.08	Shut-In(2)
184	1008.51	125.37	End Shut-In(2)
186	2148.20	126.40	Final Hydro-static



Recovery

Length (ft)	Description	Volume (bbl)
62.00	mcgo 30%g 50%o 20%m	0.87
124.00	mcgo 40%g 40%o 20%m	1.74
186.00	mcgo 50%g 30%o 20%m	2.61
112.00	ocm 10%o 90%m	1.57
0.00	496 GIP	0.00

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

O Brien Resources

2-17s-30w Lane Ks

P.O. Box 6149
Shreveport, LA 71136

Sharp Seed Lease 2#1

Job Ticket: 43835

DST#: 7

ATTN: Kurt Talbott

Test Start: 2011.10.02 @ 05:30:25

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 44.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.78 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 4200.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
62.00	mcgo 30%g 50%o 20%m	0.870
124.00	mcgo 40%g 40%o 20%m	1.739
186.00	mcgo 50%g 30%o 20%m	2.609
112.00	ocm 10%o 90%m	1.571
0.00	496 GIP	0.000

Total Length: 484.00 ft

Total Volume: 6.789 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

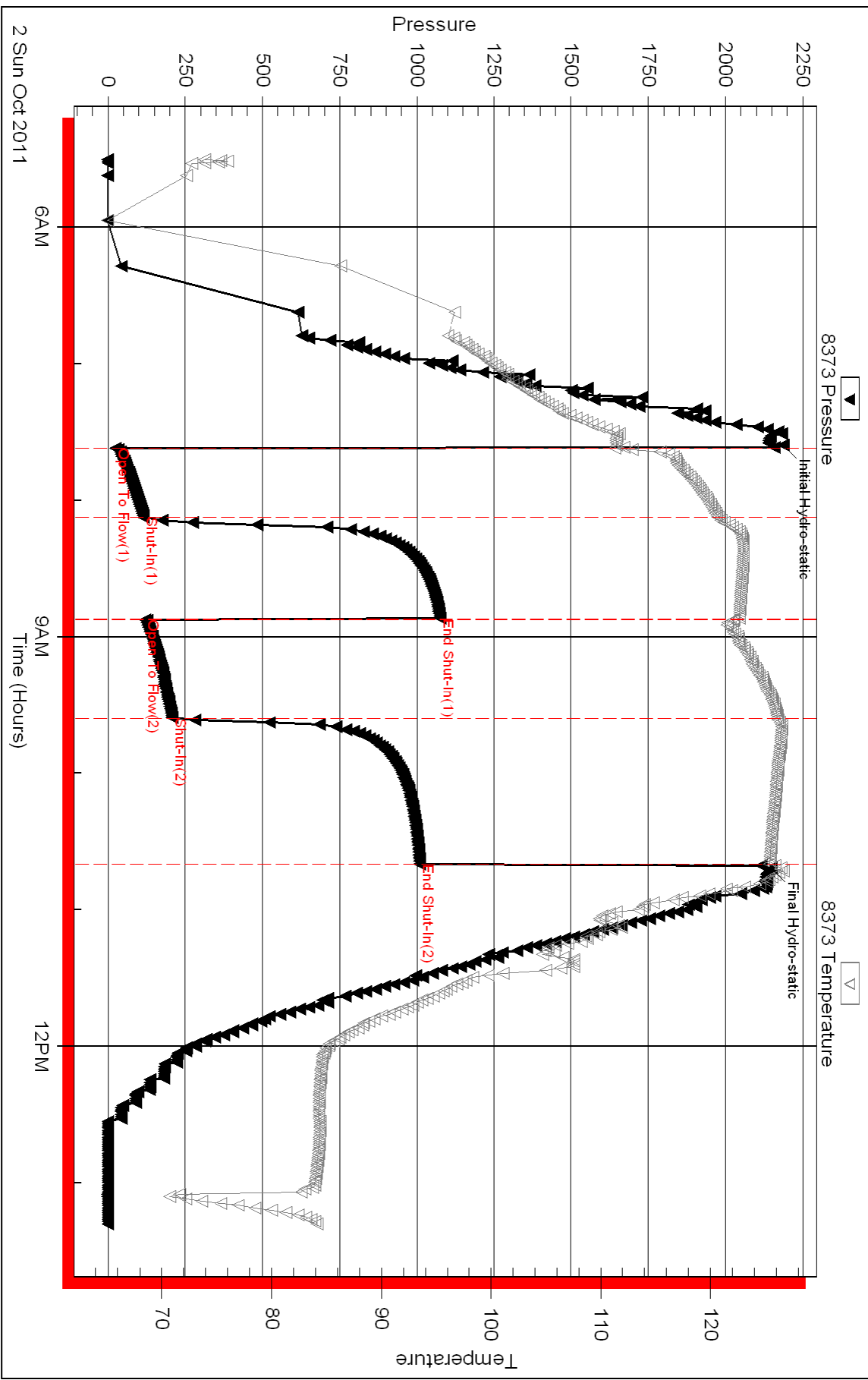
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

O'Brien Resources
P.O. Box 6149
Shreveport, LA 71136
ATTN: Kurt Talbott

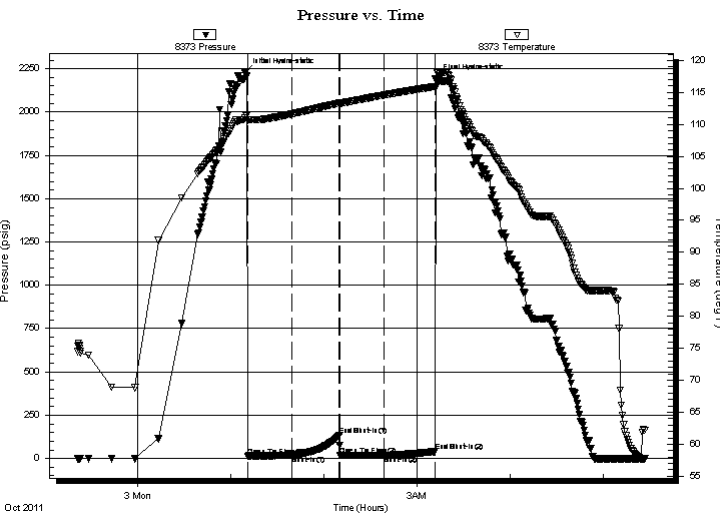
2-17s-30w Lane Ks
Sharp Seed Lease 2#1
Job Ticket: 43836 **DST#: 8**
Test Start: 2011.10.02 @ 23:21:11

GENERAL INFORMATION:

Formation: **Johnson**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 01:10:36
Time Test Ended: 05:26:35
Interval: **4488.00 ft (KB) To 4535.00 ft (KB) (TVD)**
Total Depth: 4535.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Good
Test Type: Conventional Bottom Hole (Reset)
Tester: Brandon Turley
Unit No: 35
Reference Elevations: 2858.00 ft (KB)
2851.00 ft (CF)
KB to GR/CF: 7.00 ft

Serial #: 8373 Inside
Press @ Run Depth: 18.33 psig @ 4489.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2011.10.02 End Date: 2011.10.03 Last Calib.: 2011.10.03
Start Time: 23:21:11 End Time: 05:26:35 Time On Btm: 2011.10.03 @ 01:09:06
Time Off Btm: 2011.10.03 @ 03:11:51

TEST COMMENT: IF: Surface blow died in 7 min.
IS: No return.
FF: No blow.
FS: No return.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2228.62	111.00	Initial Hydro-static
2	14.68	110.69	Open To Flow (1)
30	17.05	111.62	Shut-In(1)
61	133.30	113.33	End Shut-In(1)
61	17.81	113.28	Open To Flow (2)
90	18.33	114.59	Shut-In(2)
123	40.56	115.94	End Shut-In(2)
123	2191.42	116.92	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
5.00	mud 100% m	0.07

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

O'Brien Resources
P.O. Box 6149
Shreveport, LA 71136
ATTN: Kurt Talbott

2-17s-30w Lane Ks
Sharp Seed Lease 2#1
Job Ticket: 43836 **DST#: 8**
Test Start: 2011.10.02 @ 23:21:11

Mud and Cushion Information

Mud Type:	Gel Chem	Cushion Type:		Oil API:	0 deg API
Mud Weight:	9.00 lb/gal	Cushion Length:	ft	Water Salinity:	0 ppm
Viscosity:	44.00 sec/qt	Cushion Volume:	bbbl		
Water Loss:	8.78 in ³	Gas Cushion Type:			
Resistivity:	0.00 ohm.m	Gas Cushion Pressure:	psig		
Salinity:	3800.00 ppm				
Filter Cake:	1.00 inches				

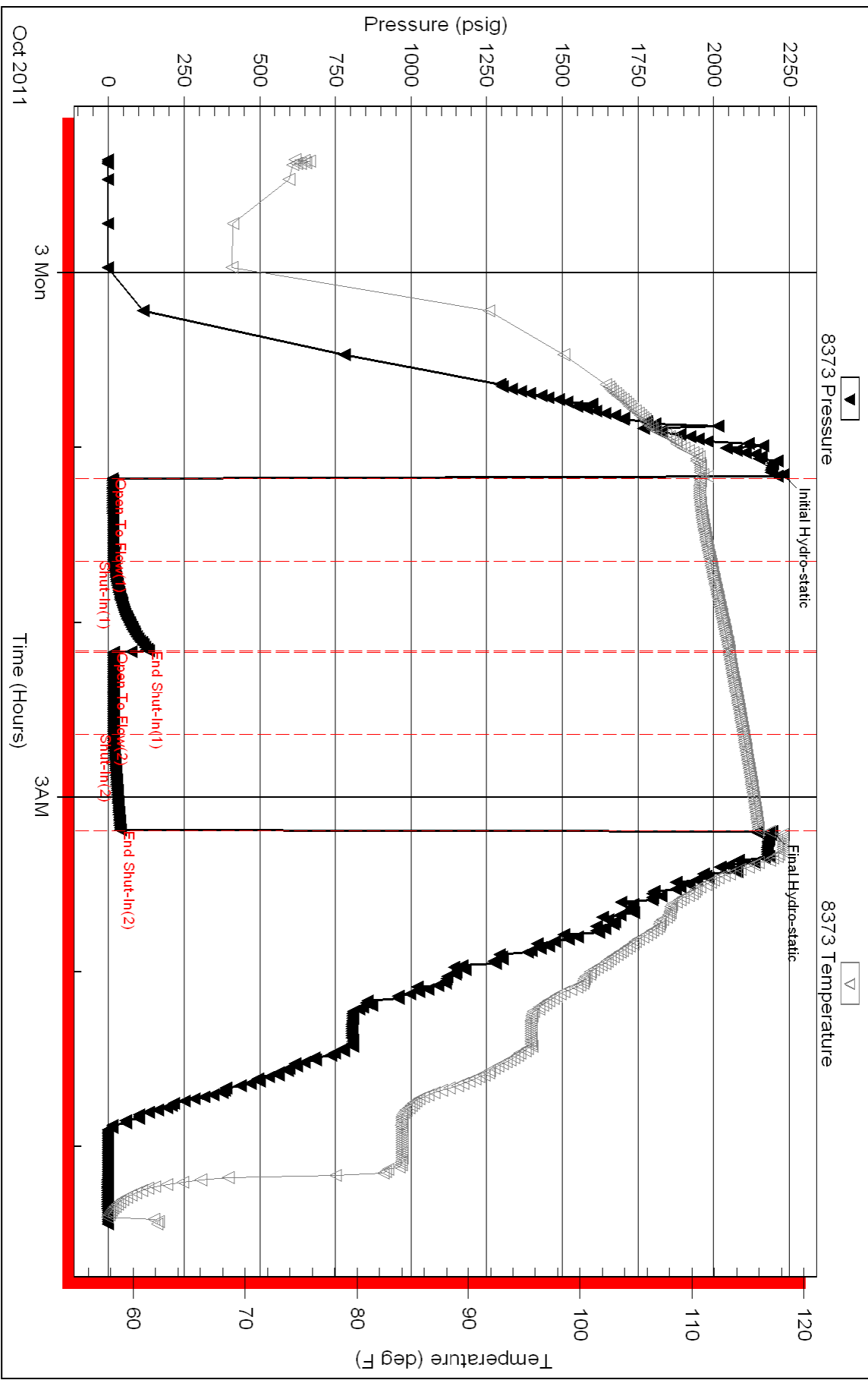
Recovery Information

Recovery Table

Length ft	Description	Volume bbl
5.00	mud 100%m	0.070

Total Length: 5.00 ft Total Volume: 0.070 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:

Pressure vs. Time



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

November 17, 2011

Heather Haynes
O'Brien Resources, LLC
PO BOX 6149
SHREVEPORT, LA 71136

Re: ACO1
API 15-101-22314-00-00
Sharp Seed Lease 2 1
NW/4 Sec.02-17S-30W
Lane 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,
Heather Haynes

ALLIED CEMENTING CO., LLC. 038180

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell Ks.

DATE <u>10-24-2011</u>	SEC. <u>12</u>	TWP. <u>20 S</u>	RANGE <u>24 W</u>	CALLED OUT	ON LOCATION	JOB START <u>4:30 PM</u>	JOB FINISH <u>5:00 PM</u>
LEASE <u>SHARP</u>	WELL # <u>C#2</u>	LOCATION <u>Healy Ks. 3/4 N 1/2 E + N 1/2 W</u>			COUNTY <u>NESS</u>	STATE <u>KANSAS</u>	

OLD OR NEW (Circle one)

CONTRACTOR Alliance Well Service
 TYPE OF JOB Circulate Cement (PERF)
 HOLE SIZE _____ T.D. _____
 CASING SIZE 4 1/2 DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 600# MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. @ 600'
 DISPLACEMENT 2 1/4 BBL / Give 7 BBL
 EQUIPMENT _____

OWNER _____
 CEMENT _____
 AMOUNT ORDERED 130 SX Lite / weight
50 SX Comm 3% cc

COMMON	<u>50 SX @ 16.25</u>	<u>812.50</u>
POZMIX	@	
GEL	@	
CHLORIDE	<u>2 SX @ 58.00</u>	<u>116.40</u>
ASC	@	
Lite/weight	<u>130 SX @ 15.00</u>	<u>1950.00</u>
Fin-Seal	<u>33 32 LBS @ 2.70</u>	<u>89.10</u>
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING	<u>180 Total SX @ 2.25</u>	<u>405.00</u>
MILEAGE	<u>55 @ 11¢</u>	<u>1089.00</u>
		<u>TOTAL 4462.00</u>

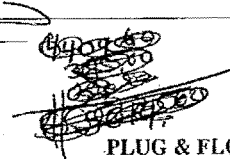
PUMP TRUCK CEMENTER Glen
 # 417 HELPER woody
 BULK TRUCK _____
 # 423 DRIVER Cody
 BULK TRUCK _____
 # 410 DRIVER Nick

REMARKS:

4 1/2 csg 10,500' Perf @ 600'
4 1/2 csg Swage - pumped 1 BBL H₂O &
Received Circulation Around Annulus
Mixed 130 SX @ 15.00 - WT Cement &
Cement Circulation Around Annulus, mixed
another 50 SX Comm 3% cc, &
Displaced 7 BBL - & Pressured to 600#
Decide to stop there w/ displacement,
shut in annulus, & also 4 1/2 Swage.

~~4462.00~~
~~1089.00~~
~~89.10~~
~~405.00~~
~~116.40~~
~~1950.00~~
~~812.50~~
 SERVICE
 DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____ 1050.00
 EXTRA FOOTAGE @ _____
 MILEAGE 55 HV MI @ 7.00 385.00
 MANIFOLD @ _____
55 LV MI @ 4.00 220.00

CHARGE TO: O'Brian Resources
 STREET _____
 CITY _____ STATE _____ ZIP _____

THANKS

 TOTAL 1655.00

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL _____

SALES TAX (If Any) _____
 TOTAL CHARGES 6117.00
 DISCOUNT _____ IF PAID IN 30 DAYS

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

PRINTED NAME _____
 SIGNATURE Gail Bellini

~~4462.00~~
~~1089.00~~
~~89.10~~
~~405.00~~
~~116.40~~
~~1950.00~~
~~812.50~~
 TOTAL 1655.00

ALLIED CEMENTING CO., LLC. 036078

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Dakley, KS

DATE <u>10-4-11</u>	SEC. <u>2</u>	TWP. <u>17</u>	RANGE <u>30</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00pm</u>	JOB FINISH <u>1:00pm</u>
LEASE <u>Sharp Seed</u>	WELL # <u>1</u>	LOCATION <u>Healy, KS Y4U Edwite</u>			COUNTY <u>Lane</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Pickrell #10

TYPE OF JOB production Bottom Slap

HOLE SIZE 7 7/8 T.D. 4698'

CASING SIZE 4 1/2 DEPTH 4708.

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL D.U. DEPTH 2255.75

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT 4202

CEMENT LEFT IN CSG. 4202

PERFS.

DISPLACEMENT 72.33

OWNER same

CEMENT

AMOUNT ORDERED 180com 1090 salt 290gel (150 sks 6940 890gel Y4 # flo-salt (Life)

COMMON	<u>180 sks</u>	@	<u>16.25</u>	<u>2925.00</u>
POZMIX		@		
GEL	<u>3 sks</u>	@	<u>21.25</u>	<u>63.75</u>
CHLORIDE		@		
ASC		@		
<u>Life</u>	<u>150 sks</u>	@	<u>14.50</u>	<u>2175.00</u>
<u>salt</u>	<u>18 sks</u>	@	<u>23.95</u>	<u>431.10</u>
		@		
<u>No-seal</u>	<u>38 #</u>	@	<u>2.70</u>	<u>102.60</u>
		@		
<u>WFR-2</u>	<u>500 gal</u>	@	<u>1.27</u>	<u>635.00</u>
		@		
		@		
HANDLING	<u>362 sks</u>	@	<u>2.25</u>	<u>814.50</u>
MILEAGE	<u>110 sk mile</u>			<u>2190.10</u>
TOTAL				<u>9337.05</u>

EQUIPMENT

PUMP TRUCK CEMENTER Lakene

431 HELPER Darven

BULK TRUCK

386/310 DRIVER Earl - Brandon

BULK TRUCK

481? DRIVER Mark R (Russell)

REMARKS:

pump ball through mix WFR-2
mix cement down casing, wash up
pump & loss. Displace with water
med. sand plug at 2100'. float
held. Open DU tool circulate with
rig pump.

Thank you

CHARGE TO: O'Brien Resources

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>4708'</u>		
PUMP TRUCK CHARGE			<u>2405.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>55 x 2</u>	@	<u>7.00</u> <u>770.00</u>
MANIFOLD	<u>head</u>	@	<u>200.00</u>
<u>Light vehicle</u>		@	<u>4.00</u> <u>440.00</u>
		@	
TOTAL <u>3815.00</u>			

PLUG & FLOAT EQUIPMENT

<u>1-DUT tool</u>			<u>3187.00</u>
<u>40-Recip/scrubbers</u>	@	<u>76.00</u>	<u>3040.00</u>
<u>10-Centralizers</u>	@	<u>48.00</u>	<u>480.00</u>
<u>2-Baskets</u>	@	<u>270.00</u>	<u>540.00</u>
<u>1-Latch down plug/baffle</u>	@		<u>233.00</u>
<u>1-top rubber plug</u>	@		<u>71.00</u>
<u>1-AFM Float shoe</u>			<u>327.00</u>
TOTAL <u>7878.00</u>			

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

To Allied Cementing Co., LLC.
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PRINTED NAME _____

SIGNATURE [Signature]

ALLIED CEMENTING CO., LLC. 036079

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Dakota, KS

DATE <u>10-5-11</u>	SEC. <u>2</u>	TWP <u>17</u>	RANGE <u>30</u>	CALLED OUT	ON LOCATION	JOB START <u>4:00 am</u>	JOB FINISH <u>5:00 Day</u>
LEASE <u>Sharp Seed</u>	WELL # <u>1</u>	LOCATION <u>Healy KS 1/4 N Ed N into</u>			COUNTY <u>Lawrence</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Pickrell #10

TYPE OF JOB production Top Stage

HOLE SIZE 7 7/8" T.D. 4698"

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL D U DEPTH 2255.75

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 34.96

OWNER Same

CEMENT AMOUNT ORDERED 425 sks Lite 1/4 # floss

EQUIPMENT

PUMP TRUCK # 431 CEMENTER Lakene HELPER Darren

BULK TRUCK # 386/310 DRIVER Earl-Brandon

BULK TRUCK # 481/7 DRIVER Mark R (Russell)

COMMON	@		
POZMIX	@		
GEL	@		
CHLORIDE	@		
ASC	@		
<u>Lite</u>	@	<u>425 sks</u>	<u>14.50</u>
<u>floss</u>	@	<u>106 #</u>	<u>2.70</u>
	@		
	@		
	@		
	@		
	@		
HANDLING <u>458</u>	@	<u>458 sks</u>	<u>1030.50</u>
MILEAGE <u>116 sks/mile</u>	@	<u>2.25</u>	<u>2770.90</u>
TOTAL			<u>10250.10</u>

REMARKS:

plug not here 30 sks
mix cement down casing
displace plug down with water
1 and plug at 1500 # float held
Cement did not circulate
Thank you.

CHARGE TO: O'Brien Resources

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>2255.75'</u>		
PUMP TRUCK CHARGE			<u>nc</u>
EXTRA FOOTAGE	@		
MILEAGE <u>55X2</u>	@	<u>7.00</u>	<u>nc</u>
MANIFOLD <u>Light Vehicle</u>	@	<u>4.00</u>	<u>nc</u>
	@		
TOTAL			

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
TOTAL			

To Allied Cementing Co., LLC.
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PRINTED NAME _____

SIGNATURE [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS