



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: \_\_\_\_\_



1073361

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	L. D. Drilling, Inc.
Well Name	SIEFKES 5-27
Doc ID	1073361

Tops

Name	Top	Datum
TOPEKA	2821	-976
HEEBNER	3112	-1267
TORONTO	3129	-1284
DOUGLAS	3140	-1295
BROWN LIME	3244	-1399
LANSING	3258	-1413
BASE KANSAS CITY	3482	-1637
VIOLA	3504	-1659
SIMPSON SHALE	3536	-1691
ARBUCKLE	3582	-1737

Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	SIEFKES 5-27
Doc ID	1073361

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Tyep and Percent Additives
SURFACE	12.25	8.625	23	411	COMMON	200	
SURFACE CONT	12.25	8.625	23	411	A-CONN	200	
PRODUC TION	7.875	5.5	14	3710	COMMON	150	
RATHOLE	7.875	5.5	14	3710	60/40 POZMIX	30	



Customer LD Drilling	Lease No.	Date 12-11-11
Lease Sieskos	Well # 5-27	
Field Order # 5494	Station Pratt	Casing 8 5/8
	Depth 401	County Stafford
Type Job CNW-8 5/8 Surface	Formation	State KS
		Legal Description 27-21-15

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft				RATE	PRESS	ISIP
2 3/8				Acid Blend				
Depth 410	Depth	From	To 200sk	Pre Pad 2.12 yield	Max			5 Min.
Volume 26.1	Volume	From	To Common	Pad 1.12 yield	Min			10 Min.
Max Press 500	Max Press	From	To 200sk	Frac	Avg			15 Min.
Well Connection P.C.	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth 410	Packer Depth	From	To	Flush 25.4	Gas Volume			Total Load

Customer Representative Jim	Station Manager Dave Scott	Treater Steve Okada
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Service Units	27283	27463	19831	19862					
Driver Names	Okada	M. Hall	Yours						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
10:00 PM					On location Safety meeting
					Ran 10 Jls 8 5/8 casing
					Casing on Bottom
					Break Circ w/ris
10:00	300		75.5	45	Mix 200sk Acid Blend
10:15	250		43	45	Mix 200sk Common
					Shot Down - Clear Pump it
10:24	0		0	4	Start H2O Displacement
10:28	250		15	4	Cement to Surface
10:30	300		25.4	4	Plug Down
					Circulation thru job
					Circulated 10 bbl cement top it
					Job Complete
					Thanks, Steve





**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET  
1718 05509 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB: 12-17-2011	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: LD DRILLING, INC.	LEASE: SIEFKES	WELL NO. 5-27							
ADDRESS:	COUNTY: STAFFORD	STATE: Ks.							
CITY:	STATE:	SERVICE CREW: LESLEY, LAWRENCE, MCGRAW							
AUTHORIZED BY:	JOB TYPE: CNW - 5 1/2" L.S.								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
37586	1.5					12-17-11		AM	12:00
33708-20920	1.5							AM	12:30
19826-19860	1.5							AM	9:30
								AM	11:10
								AM	11:45
						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: *[Signature]*  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 100	COMMON	SK	150		2,400.00
CP 103	60/40 POZ	SK	30		360.00
CC 102	CELLEFLAKE	lb	38		140.60
CC 112	CEMENT FRICTION REDUCER	lb	43		258.00
CC 113	CAL-SFT	lb	705		528.75
CC 200	CEMENT GEL	lb	282		70.50
CF 103	TOP RUBBER PLUG, 5 1/2"	EA	1		105.00
CF 251	GUIDE SHOE - REGULAR, 5 1/2"	EA	1		250.00
CF 145	FLAPPER TYPE INSERT FLOAT VALVE, 5 1/2"	EA	1		215.00
CF 11.51	TURBOLIZER, 5 1/2"	EA	6		660.00
CC 151	MUD FLUSH	GAL	1000		860.00
E 100	PICKUP MILEAGE	MI	45		191.25
E 101	HEAVY EQUIPMENT MILEAGE	MI	90		630.00
E 113	BUK DELIVERY CHARGE	TM	376		601.20
CF 204	DEPTH CHARGE, 3001'-4000'	HRS	1-4		2,160.00
CF 240	BLENDING SERVICE CHARGE	SK	180		252.00
CF 504	PLUG CONTAINER CHARGE	JOB	1		250.00
S 003	SERVICE SUPERVISOR	EA	1		175.00

SUB TOTAL *1,984.77*

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: *[Signature]* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *[Signature]*  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.







James C. Musgrave  
Petroleum Geologist

Office (920) 978-4250 212 Main St. • P.O. Box 215 • Clarita, KS 67525 Home (920) 587-3434

# GEOLOGIST'S REPORT

## DRILLING TIME AND SAMPLE LOG

COMPANY <u>LD Drilling Inc</u>	ELEVATIONS
LEASE <u>Siefkes #5-27</u>	KB <u>1845</u>
FIELD <u>Max North</u>	DF
LOCATION <u>NW-NW-NE (400' FNL &amp; 2310 FEL)</u>	GL <u>1840</u>
SEC <u>27</u> TWP <u>Z1</u> RGE <u>12</u>	MEASUREMENTS AND ALL FROM <u>KB</u>
COUNTY <u>Stafford</u> STATE <u>Kansas</u>	CASING SURFACE <u>8 1/4" @ 4#1</u>
CONTRACTOR <u>Petromark Drilling (rig #2)</u>	PRODUCTION
SPUD <u>12-10-2011</u> COMP <u>12-17-2011</u>	ELECTRICAL SURVEYS
RTD <u>3718</u> LTD <u>3718</u>	<u>BY Log-Tech</u>
MUD UP <u>2788</u> TYPE MUD <u>Chemical Displaced</u>	<u>CDL-CDL DIL MUD.</u>
SAMPLES SAVED FROM <u>2900</u> TO <u>3718</u>	
DRILLING TIME KEPT FROM <u>2750</u> TO <u>3718</u>	
SAMPLES EXAMINED FROM <u>2900</u> TO <u>3718</u>	
GEOLOGICAL SUPERVISION FROM <u>2920</u> TO <u>3718</u>	
GEOLOGIST ON WELL <u>Josh Austin</u>	

FORMATION TOPS	LOG	SAMPLES
Topeka	2821 -976	
Heebner	3112 -1267	
Toronto	3129 -1284	
Douglas	3140 -1295	
Brown Lime	3244 -1399	
Lansing	3258 -1413	
Base Kansas City	3482 -1637	
Viola	3504 -1659	
Simpson Shale	3536 -1691	
Arbuckle	3582 -1737	
RTD	3718 -1873	
LTD	3718 -1873	

REMARKS 5 1/2" production casing was set and cemented.

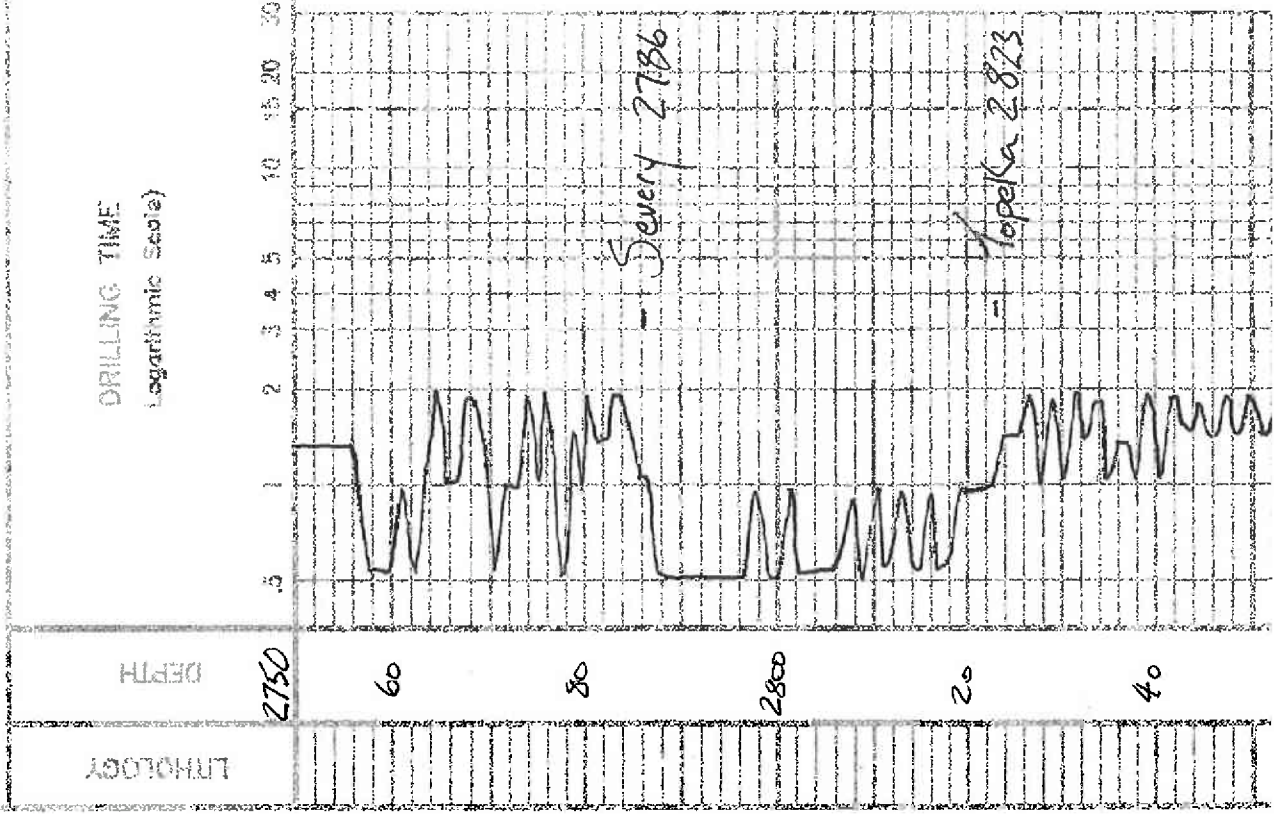
Respectfully submitted,  
*Josh Austin*  
Petroleum Geologist

REMARKS

7506

### LEGEND

- Dolomite
- Chert
- Coal/Lime
- Limestone
- Carb sil
- Shale
- Sandstone
- Salt
- Anhydrite



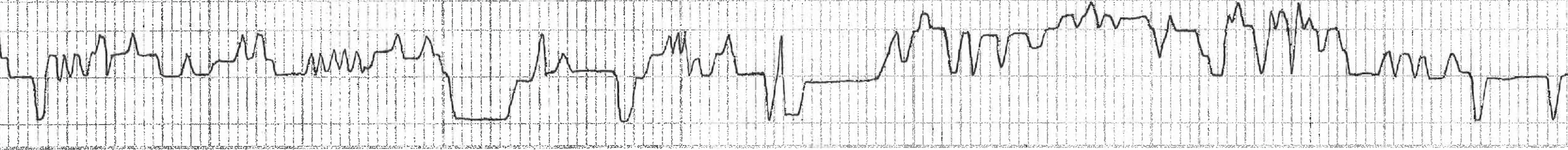
SAMPLE DESCRIPTIONS

REMARKS

LOG 7702



60 80 2900 20 40 60 80 3000 20 40 60 80 3100 20 40 60 80



ls. cream grey fine xl dense  
chilly in part gran  
sl. foss. poor. v. s. n/s

blk carb shale

ls. cream wh. fine chiky (dies)  
+ grey bony A  
ls. grey cream fine chiky  
sect. fossil est. - xl type  
n/s - grey bony A

ls. grey cream fine/ool  
chiky fine good fossil. est. o  
(burren) } }

blk carb sh.

ls. s. cream buff grey fine/ool  
gran in part fr. fossil est. o  
sl. dolomite in part n/s

ls. cream fine sl. sec. ~~carbonate~~  
in part chiky + dk grey A

ls. cream grey fine chiky  
foss. poorly dev. + ool chiky  
to grey bony A n/s

ls. cream tan fine dense  
chiky in part. n/s  
Poor

blk carb shale

grey - grey green - mic shale  
ls. wh. sim. fine chiky dense

grey - green - mic sh

grey - grey sh green  
soft silty mica sh

SS

Shale aa - silty

Heenan 3110

Toronto 3130

Poyles 3142



Silty grey mic shale

shale ca soft/silty

LS tan - brn fxc st. foss dense  
fay in part  
+ grey-green shale

LS cream fxc chalky feathers  
poor vis. N/S

LS grey-cream fxc chalky boss  
N/S

LS cream-grey fxc boss chalky  
few cream v. ssy, N/S

LS grey-cream fxc boss cream  
chalky in part few ssy N/S

LS cream fxc chalky f. fossilifer  
fxc to golden brn str. N/S to No. str.  
+ Fe<sub>2</sub>O<sub>3</sub>

LS wh-cream fxc chalky  
poorly dev. few fine ool. per  
to grey-bk str. N/S to No. str.

LS grey - buff fxc dense  
sl. by poor. v. id.  
dark grey shale

LS grey-cream ool-cream chalky  
f. ool. to golden brn str. N/S to  
Pressure 151P 13  
FSP 10  
1FP 4-6  
FFP 20-20  
HSH 1575  
= 1546

LS cream buff grey fxc dense  
Poor vis. sl. by N/S  
f. grey bossy

LS cream chalky to grey, sl.  
ool. to grey to No. str.

blk Carb. shale

LS cream tan fxc ool. in part  
poor vis. dense N/S

LS tan-cream buff high ool. gran  
in part to brn str. N/S to str.  
partly dev.

dark grey - blk shale

grey - greyish green shale

face. Sand. v. ss. f. str. 50b-X  
Sub rounded fr. 19. ool. str. spotty  
500-ft order

Chert wh-cream bossy semi-fp  
fine blk str. grey ool.

LS wh-cream bossy few ssy to

DST #1 3376-3396  
30-30-30-30

Blow week

Recovery 1' sl. grey. Mel

Pressure 151P 13

FSP 10

1FP 4-6

FFP 20-20

HSH 1575

= 1546

DST #2 3478-3520

30-30-30-30

Blow week

Recovery 2' mud

Pressure 151P 6

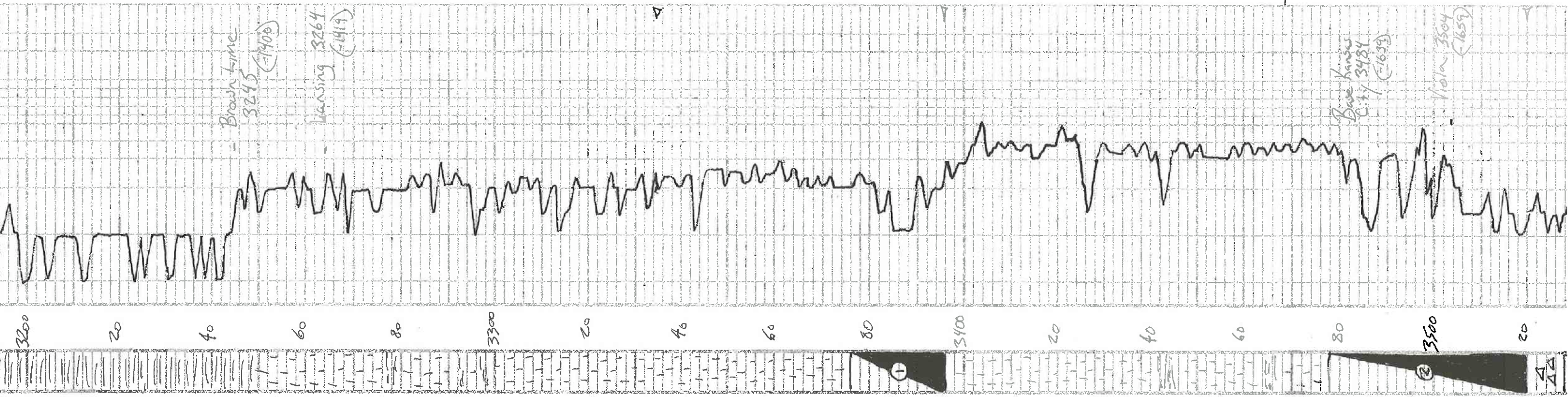
FSP 6-6

1FP 6-6

FFP 6-6

HSH 1689

= 1684



Brown time  
3245 (-1400)

Lansing 3264  
(-1419)

Base known  
3484 (-1639)

Vola 3504  
(-1659)







# DIAMOND TESTING

## Pressure Survey Report

### General Information

Company Name	L.D. DRLG	Job Number	M251
Well Name	SIEFKES #5-27	Representative	MIKE COCHRAN
Unique Well ID	DST#1 3376-3396 L/KC H	Well Operator	L.D. DRLG
Surface Location	SEC.27-21S-12W STAFFORD CO.KS.	Report Date	2011/12/14
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	JOSH AUSTIN
		Test Unit	NO. 1

### Test Information

Test Type	CONVENTIONAL		
Formation	DST#1 3376-3396 L/KC H		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2011/12/13	Start Test Time	21:00:00
Final Test Date	2011/12/14	Final Test Time	02:35:00
		Well Fluid Type	01 Oil
Gauge Name	30044		
Gauge Serial Number			

### Test Results

#### Remarks

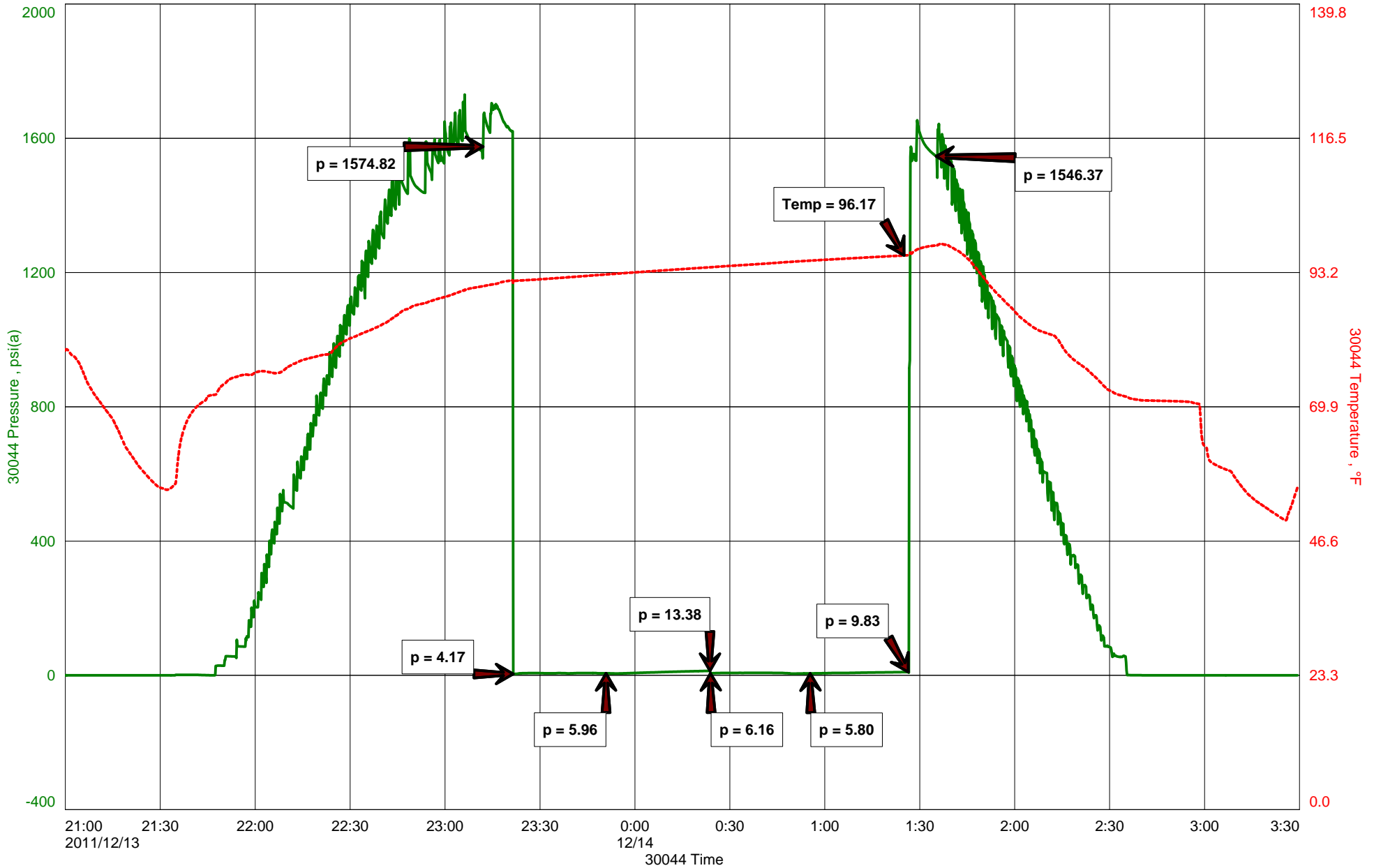
RECOVERED:  
1' DM 100% MUD  
1' TOTAL FLUID

TOOL SAMPLE: DM W/ A SLIGHT GASSY ODOR

L.D. DRLG  
DST#1 3376-3396 L/KC H  
Start Test Date: 2011/12/13  
Final Test Date: 2011/12/14

SIEFKES #5-27  
Formation: DST#1 3376-3396 L/KC H  
Pool: WILDCAT  
Job Number: M251

# SIEFKES #5-27







**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.



New Text Document.txt

No Electronic Chart At This Time. There may be one after recorder repairs.



# DIAMOND TESTING

## Pressure Survey Report

### General Information

Company Name	L.D. DRLG	Job Number	M252
Well Name	SIEFKES #5-27	Representative	MIKE COCHRAN
Unique Well ID	DST#2 3478-3520 CONGL./VIOLA	Well Operator	L.D. DRLG
Surface Location	SEC.27-21S-12W STAFFORD CO.KS.	Report Date	2011/12/14
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	JOSH AUSTIN
		Test Unit	NO. 1

### Test Information

Test Type	CONVENTIONAL		
Formation	DST#2 3478-3520 CONGL./VIOLA		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2011/12/14	Start Test Time	15:50:00
Final Test Date	2011/12/14	Final Test Time	21:25:00
		Well Fluid Type	01 Oil

### Test Results

#### Remarks

RECOVERED:  
2' DM  
2' TOTAL FLUID

TOOL SAMPLE: DRLG MUD, LIGHTGASSY ODOR





**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.

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

## Pressure Survey Report

### General Information

Company Name	L.D. DRLG	Job Number	M253
Well Name	SIEFKES #5-27	Representative	MIKE COCHRAN
Unique Well ID	DST#3 3528-3605 ARBUCKLE	Well Operator	L.D. DRLG
Surface Location	SEC.27-21S-12W STAFFORD CO.KS.	Report Date	2011/12/15
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	JOSH AUSTIN
		Test Unit	NO. 1

### Test Information

Test Type	CONVENTIONAL		
Formation	DST#3 3528-3605 ARBUCKLE		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2011/12/15	Start Test Time	07:43:00
Final Test Date	2011/12/15	Final Test Time	14:53:00
		Well Fluid Type	01 Oil
Gauge Name	E1150		
Gauge Serial Number			

### Test Results

#### Remarks

RECOVERED:  
1575' GIP  
70' CO  
353' GHMCWO 18% GAS, 19% CO, 46% EMULSIFIED OIL, 7% WTR, 10% MUD  
120' MO 90% OIL, 10% MUD  
543' TOTAL FLUID

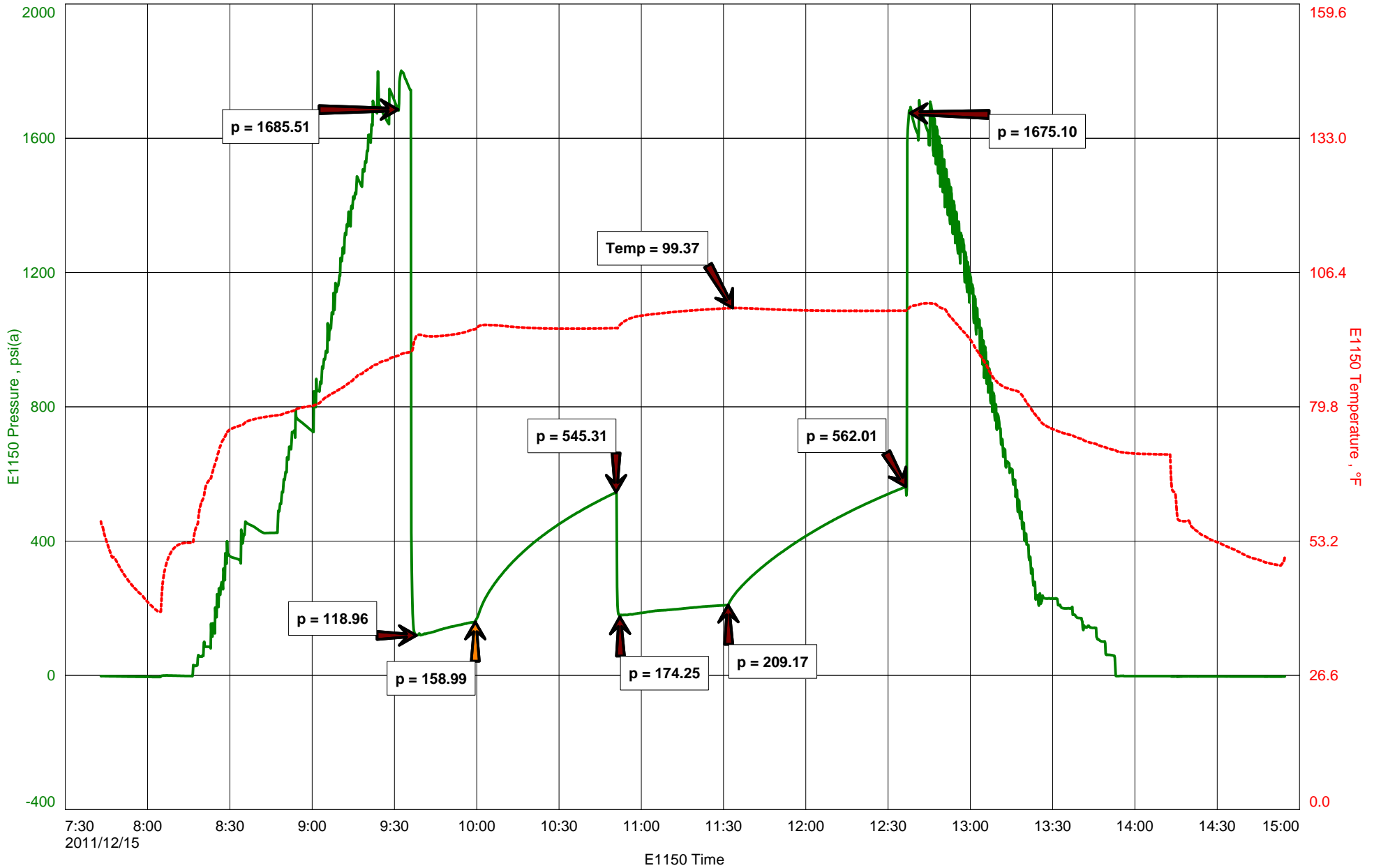
GRAVITY: 37.2 @ 60

TOOL SAMPLE: 100% OIL

L.D. DRLG  
DST#3 3528-3605 ARBUCKLE  
Start Test Date: 2011/12/15  
Final Test Date: 2011/12/15

SIEFKES #5-27  
Formation: DST#3 3528-3605 ARBUCKLE  
Pool: WILDCAT  
Job Number: M253

# SIEFKES #5-27







**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

## Pressure Survey Report

### General Information

Company Name	L.D. DRLG	Job Number	M254
Well Name	SIEFKES #5-27	Representative	MIKE COCHRAN
Unique Well ID	DST#4 3605-3617 ARBUCKLE	Well Operator	L.D. DRLG
Surface Location	SEC.27-21S-12W STAFFORD CO.KS.	Report Date	2011/12/16
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	JOSH AUSTIN
		Test Unit	NO. 1

### Test Information

Test Type	CONVENTIONAL		
Formation	DST#4 3605-3617 ARBUCKLE		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2011/12/15	Start Test Time	20:20:00
Final Test Date	2011/12/16	Final Test Time	04:00:00
		Well Fluid Type	01 Oil
Gauge Name	E1150		
Gauge Serial Number			

### Test Results

#### Remarks

RECOVERED:  
1827' GIP  
468' CO 100% OIL (378'DP, 90'DC)  
30' MO 80% OIL, 20% MUD  
498' TOTAL FLUID

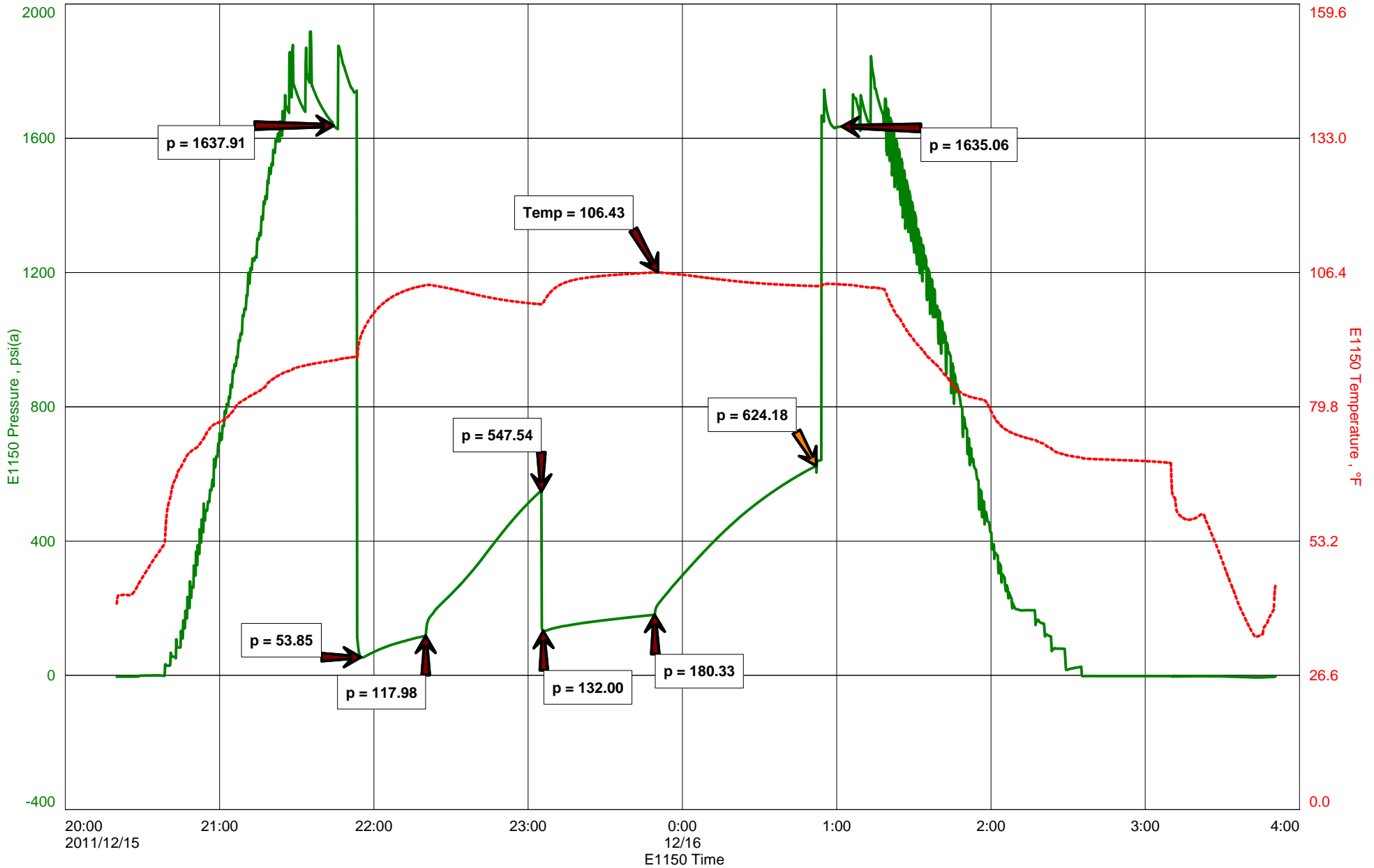
GRAVITY: 38.0 @ 60

TOOL SAMPLE: 90% OIL, 10% MUD

L.D. DRLG  
DST#4 3605-3617 ARBUCKLE  
Start Test Date: 2011/12/15  
Final Test Date: 2011/12/16

SIEFKES #5-27  
Formation: DST#4 3605-3617 ARBUCKLE  
Pool: WILDCAT  
Job Number: M253

# SIEFKES #5-27







**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

## Pressure Survey Report

### General Information

Company Name	L.D. DRLG	Job Number	M255
Well Name	SIEFKES #5-27	Representative	MIKE COCHRAN
Unique Well ID	DST#5 3617-3629 ARBUCKLE	Well Operator	L.D. DRLG
Surface Location	SEC.27-21S-12W STAFFORD CO.KS.	Report Date	2011/12/16
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	JOSH AUSTIN
		Test Unit	NO. 1

### Test Information

Test Type	CONVENTIONAL		
Formation	DST#5 3617-3629 ARBUCKLE		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2011/12/16	Start Test Time	09:05:00
Final Test Date	2011/12/16	Final Test Time	15:10:00
		Well Fluid Type	01 Oil
Gauge Name	E1150		
Gauge Serial Number			

### Test Results

#### Remarks

RECOVERED:  
1005' GIP  
225' CO 100% OIL  
140' GMCWO 10% GAS, 60% OIL, 21% WTR, 9% MUD  
10' GSOCMW 44% GAS, 8% OIL, 36% WTR, 12% MUD  
375' TOTAL FLUID

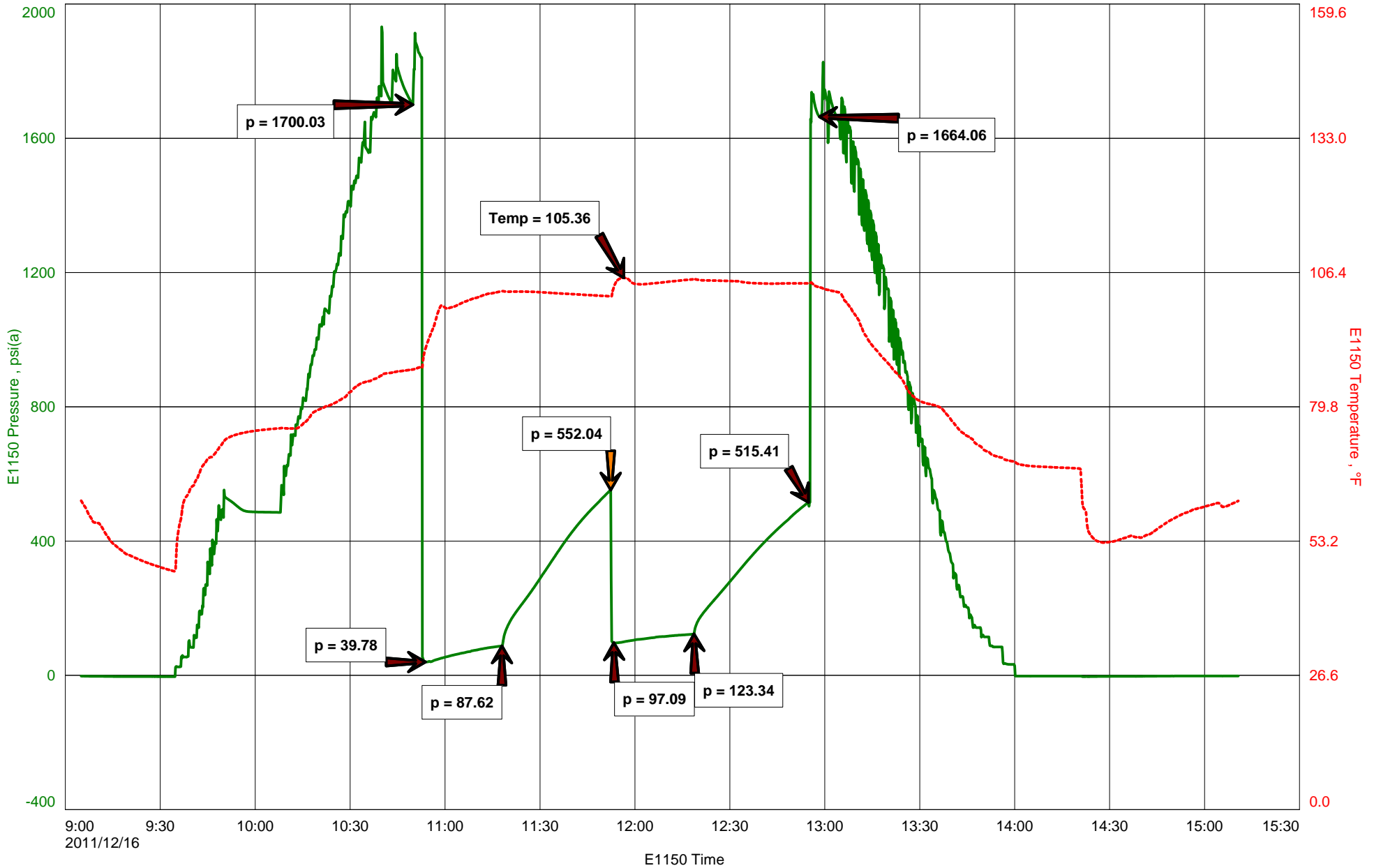
CHLOR: 18,000 PPM  
PH: 7.0  
RW: .50 @ 50DEG  
GRAVITY: 37.2 @ 60

TOOL SAMPLE: 3% GAS, 59% OIL, 31% WTR, 7% MUD

L.D. DRLG  
DST#5 3617-3629 ARBUCKLE  
Start Test Date: 2011/12/16  
Final Test Date: 2011/12/16

SIEFKES #5-27  
Formation: DST#5 3617-3629 ARBUCKLE  
Pool: WILDCAT  
Job Number: M255

# SIEFKES #5-27







**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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