



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

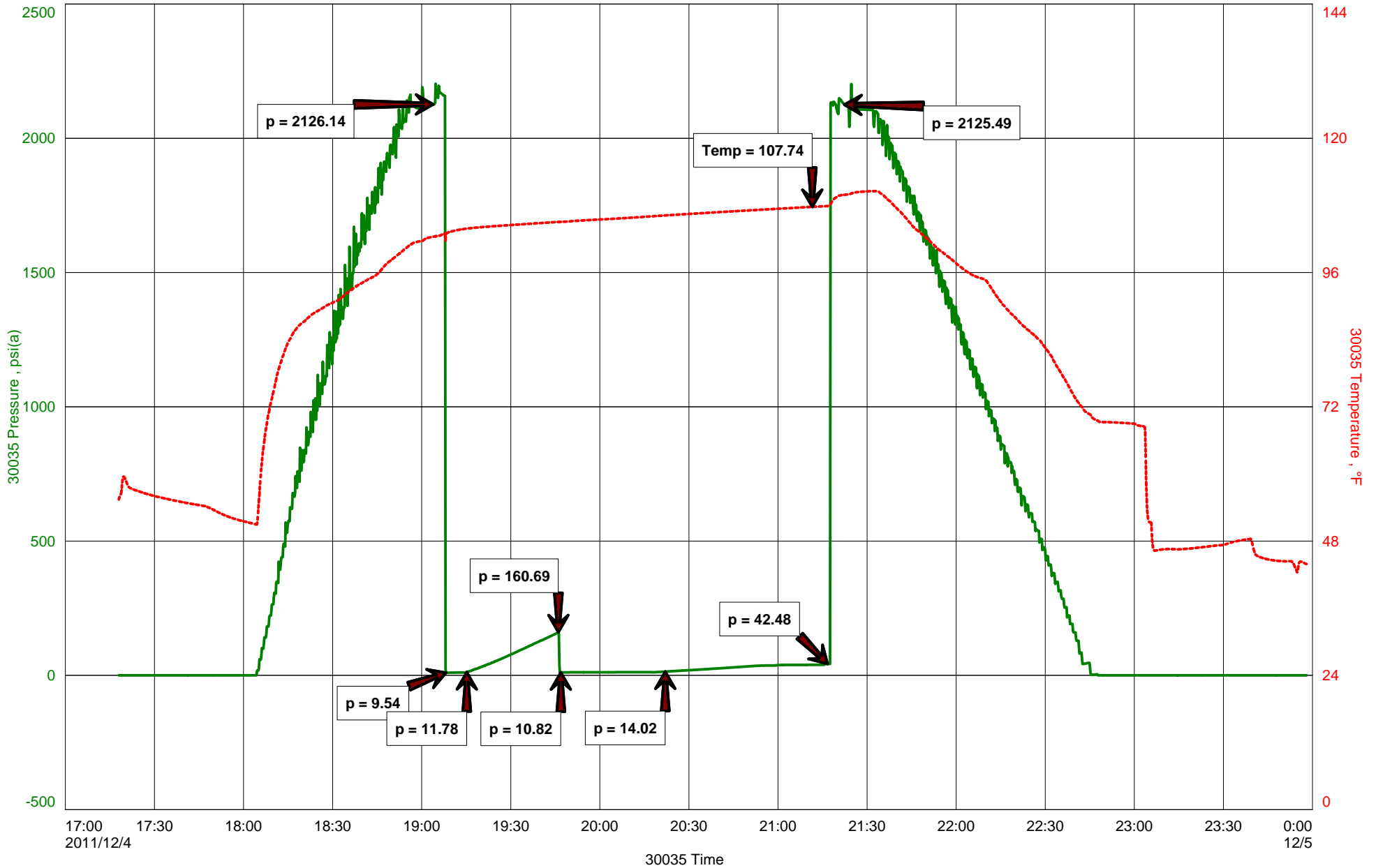
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... 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.

Mull Drilling Co. Inc.
DST # 2 4310-4390' Cher. Snd.
Start Test Date: 2011/12/04
Final Test Date: 2011/12/04

KWT # 1-6
Formation: DST # 2 4310-4390' Cher. Snd.
Pool: Wildcat
Job Number: S0063

KWT # 1-6



Diamond Testing

General information Report

General Information

Company Name Mull Drilling Co. Inc.

Contact	Mark Shreve	Job Number	S0063
Well Name	KWT # 1-6	Representative	Jacob McCallie
Unique Well ID	DST # 2 4310-4390' Cher. Snd.	Well Operator	Mull Drilling Co. Inc
Surface Location	SEC 6-16S-22W Ness County	Report Date	2011/12/04
Well License Number		Prepared By	Jacob McCallie
Field	Wildcat		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST # 2 4310-4390' Cher. Snd.		
Well Fluid Type	01 Oil	Start Test Time	17:18:00
		Final Test Time	23:58:00
Start Test Date	2011/12/04		
Final Test Date	2011/12/04		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:
3' Oil Specked Mud 1% OIL 99% MUD
3' Total Fluid

TOOL SAMPLE:
100% MUD