



KANSAS CORPORATION COMMISSION 1081073
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

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

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

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

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

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

API No. 15 - _____

Spot Description: _____

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

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

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

County: _____ Permit #: _____

AFFIDAVIT

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

Submitted Electronically

KCC Office Use ONLY

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



1081073

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	Oil Producers Inc. of Kansas
Well Name	Brown 1A-29
Doc ID	1081073

All Electric Logs Run

Dual Induction Log
Compensated Density Neutron PE Log
Micro Log
Sonic Log
Geological Report

Form	ACO1 - Well Completion
Operator	Oil Producers Inc. of Kansas
Well Name	Brown 1A-29
Doc ID	1081073

Tops

Name	Top	Datum
Heebner	4363	-1596
Lansing	4531	-1765
Marmaton	5230	-2463
Altamont	5274	-2505
Atoka	5663	-2896
Morrow Shale	5840	-3073
Chester	6089	-3322
Mid Chester	6149	-3382



PAGE	CUST NO	INVOICE DATE
1 of 1	1002993	12/09/2011
INVOICE NUMBER		
1717 - 90773739		

Liberal (620) 624-2277
 B OIL PRODUCER'S INC OF KANSAS
 I 1710 WATERFRONT PKWY
 L WICHITA
 L KS US 67206
 T
 O **ATTN:** ACCOUNTS PAYABLE

J LEASE NAME Brown #1A-29
O LOCATION
B COUNTY Seward
S STATE KS
I JOB DESCRIPTION Cement-New Well Casing/Pi
T JOB CONTACT
E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40404976	27462		Net - 30 days	01/08/2012
For Service Dates: 12/07/2011 to 12/07/2011				
0040404976				
171702279A Cement-New Well Casing/Pi 12/07/2011 8 5/8" Surface				
A-Con Blend	360.00	EA	13.95	5,022.00 T
Premium Plus Cement	150.00	EA	12.23	1,833.75 T
Calcium Chloride	1,299.00	EA	0.79	1,022.96 T
Celloflake	128.00	EA	2.78	355.20 T
C-51	68.00	EA	18.75	1,275.00 T
Guide Shoe - Regular - 8 5/8"	1.00	EA	285.00	285.00
Insert Float Valve - 8 5/8"	1.00	EA	210.00	210.00
Canvas Basket - 8 5/8"	1.00	EA	787.50	787.50
Top Rubber Cement Plug - 8 5/8"	1.00	EA	168.75	168.75
Heavy Equipment Mileage	30.00	MI	5.25	157.50
Blending & Mixing Service Charge	510.00	MI	1.05	535.50
Proppant and Bulk Delivery Charge	240.00	MI	1.20	288.00
Depth Charge; 1001' - 2000'	1.00	EA	1,125.00	1,125.00
Plug Container Utilization Charge	1.00	EA	187.50	187.50
Pickup Mileage	10.00	MI	3.19	31.88
Service Supervisor	1.00	HR	131.25	131.25
High Head Charge	1.00	EA	225.00	225.00

*Cement for 8 5/8" CSW
JDC
TW*

*902-08
BC*

ENTERED
DEC 13 2011

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	13,641.79
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	717.92
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	14,359.71
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.
P.O. Box 129
Liberal, Kansas 67905
Phone 620-624-2277

FIELD SERVICE TICKET
1717 02279 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>12-7-11</u> DISTRICT <u>1717</u>		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 <u>Oil Producers</u>		LEASE <u>Brown</u>		WELL NO. <u>1A-29</u>					
ADDRESS		COUNTY <u>Seward</u>		STATE <u>KS</u>					
CITY STATE		SERVICE CREW <u>J. Chavez, Adam, Eddie, Victor</u>							
AUTHORIZED BY <u>Jerry Beatty</u> <u>JRB</u>		JOB TYPE: <u>242 8 3/4 Surface</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
						ARRIVED AT JOB	<u>12-7-11</u>	PM	<u>9:00</u>
<u>19820</u>	<u>7</u>	<u>30464</u>	<u>7</u>	<u>19827</u>	<u>7</u>	START OPERATION	<u>12-7-11</u>	AM	<u>4:00</u>
		<u>19808</u>	<u>2</u>	<u>19566</u>	<u>2</u>	FINISH OPERATION	<u>12-7-11</u>	AM	<u>6:30</u>
<u>27462</u>	<u>7</u>					RELEASED	<u>12-7-11</u>	AM	<u>7:00</u>
						MILES FROM STATION TO WELL <u>10</u>			

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: Bob Kasper
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT	
CL101	A-Con Blend	SK	360		6696 00	
CL110	Premium Plus Cement	SK	150		2445 00	
CC109	Calcium Chloride	lb	1299		1363 95	
CC102	CelloFlake	lb	128		473 60	
CC130	C-51	lb	68		1700 00	
CF253	Guide Shoe	EA	1		380 00	
CF1453	Insert Float Valve	EA	1		280 00	
CF4556	Basket 8 3/4	EA	1		1050 00	
CF105	Rubber Plug	EA	1		225 00	
E101	Heavy Equipment Mileage	mi	30		210 00	
CE240	Blending & Mixing Service Charge	SK	510		714 00	
E113	Bulk Delivery Charge	TN	240		384 00	
CE202	Depth Charge	4hrs	1		1500 00	
CE504	Plus Container Charge	Job	1		250 00	
E100	Pickup Mileage	mi	10		42 50	
S003	Service Supervisor	EA	1		175 00	
CE503	Donnelk Charge	EA	1		300 00	
					SUB TOTAL	13641 79

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE <u>Jim Chavez</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Bob Kasper</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO.



BASIC™
ENERGY SERVICES
Liberal, Kansas

Cement Report

Customer <i>Oil Producers</i>		Lease No.		Date <i>12-7-11</i>				
Lease <i>Brown</i>		Well # <i>7A-29</i>		Service Receipt <i>774</i>				
Casing <i>8 3/4 24H</i>	Depth <i>1512'</i>	County <i>Seward</i>		State <i>KS</i>				
Job Type <i>24H SURFACE</i>		Formation		Legal Description <i>29-34-32</i>				
Pipe Data			Perforating Data			Cement Data		
Casing size <i>8 3/4 24H</i>			Tubing Size <i>3 1/2</i>			Lead <i>360 SK A Con</i>		
Depth <i>1520'</i>			Depth <i>55 42'</i>			From		
Volume <i>9465</i>			Volume			To		
Max Press <i>1500</i>			Max Press			From		
Well Connection <i>8 3/4</i>			Annulus Vol.			To		
Plug Depth <i>1478</i>			Packer Depth			From		
						To		
						Tail in <i>From this cont</i>		
						<i>1.3457321505K</i>		
						<i>6.33601 SK 111.5#</i>		
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log <i>Yard 8:00 AM</i>			
<i>1300</i>					<i>Arrive On Location</i>			
<i>1515</i>					<i>Settling, Making Rig Up</i>			
<i>1345</i>					<i>Assembling Casing</i>			
<i>1645</i>					<i>Complete w/ Rig</i>			
<i>1710</i>					<i>Work up to 755</i>			
<i>1715</i>	<i>1750</i>		<i>10</i>	<i>10</i>	<i>Pressure Test</i>			
<i>1720</i>	<i>750</i>		<i>190</i>	<i>5.5</i>	<i>Pump Lead out @ 114#5</i>			
<i>1800</i>	<i>200</i>		<i>37</i>	<i>5.0</i>	<i>Pump Test out @ 145#5</i>			
<i>1810</i>					<i>Drop Plug - 145#5</i>			
<i>1815</i>	<i>300</i>		<i>95</i>	<i>6.0</i>	<i>Displace</i>			
<i>1835</i>	<i>500</i>		<i>10</i>	<i>2.0</i>	<i>Shut Down Displace</i>			
<i>1845</i>	<i>1000</i>		<i>1</i>	<i>1</i>	<i>Land Plug - Flood Hold</i>			
					<i>Job Complete</i>			
					<i>Cement to Surface</i>			
					<i>Thanks For Using Basic Energy Services</i>			
Service Units <i>19870</i>		<i>27467</i>		<i>301641-19803</i>		<i>10827-10860</i>		
Driver Names <i>J. Chao</i>		<i>Adam</i>		<i>Eddie</i>		<i>Victor</i>		

Bob Casper
Customer Representative

Tom R... ..
Station Manager

Samuel Chavez
Cementer



PAGE 1 of 1	CUST NO 1002993	INVOICE DATE 12/19/2011
INVOICE NUMBER 1717 - 90781098		

Liberal (620) 624-2277
 B OIL PRODUCER'S INC OF KANSAS
 I 1710 WATERFRONT PKWY
 L WICHITA
 L KS US 67206
 T
 O **ATTN:** ACCOUNTS PAYABLE

J LEASE NAME Brown #1A-29
O LOCATION
B COUNTY Seward
S STATE KS
I JOB DESCRIPTION Cement-New Well Casing/Pi
T JOB CONTACT
E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40408768	38111		Net - 30 days	01/18/2012

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 12/16/2011 to 12/16/2011				
0040408768				
171702261A Cement-New Well Casing/Pi 12/16/2011 4 1/2" Longstring				
Premium/Common	50.00	EA	12.00	600.00 T
AA2 Cement	150.00	EA	13.65	2,047.50 T
Gypsum	705.00	EA	0.56	396.56 T
Salt	830.00	EA	0.38	311.25 T
C-15	85.00	EA	9.38	796.88 T
C-42P	36.00	EA	6.00	216.00 T
Gilsonite	750.00	EA	0.50	376.88 T
Auto Fill Float Shoe - 4 1/2"	1.00	EA	247.50	247.50
Latch Down Plug & Baffle - 4 1/2"	1.00	EA	277.50	277.50
Econimizer Centralizer - 4 1/2"	10.00	EA	52.50	525.00
Canvas Baskets - 4 1/2"	2.00	EA	675.00	1,350.00
Super Flush II	500.00	EA	1.15	573.75 T
Heavy Equipment Mileage	30.00	MI	5.25	157.50
Blending & Mixing Service Charge	200.00	MI	1.05	210.00
Proppant and Bulk Delivery Charge	94.00	MI	1.20	112.80
Depth Charge; 6001' - 7000'	1.00	EA	2,429.99	2,429.99
Plug Container Utilization Charge	1.00	EA	187.50	187.50
Pickup Mileage	10.00	MI	3.19	31.88
Service Supervisor	1.00	HR	131.25	131.25

*CEMENT 4 1/2" CSW
JAC
TR.*

*902-39
? (AC)*

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	10,979.74
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	401.57
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	11,381.31
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.
P.O. Box 129
Liberal, Kansas 67905
Phone 620-624-2277

FIELD SERVICE TICKET
1717 02261 A

DATE _____ TICKET NO. _____

DATE OF JOB 12-16-11		DISTRICT 1717		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 Oil Producers				LEASE Brown #1A.29				WELL NO.	
ADDRESS				COUNTY Sumner		STATE KS			
CITY		STATE		SERVICE CREW P. Matting, C. T. Garcia					
AUTHORIZED BY J. Bennett JRB				JOB TYPE: 747 4 1/2" Production					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM PM	TIME
21776	1						12-16-11		12:00
35111	1								3:30
19919	3								5:00
19858	1								6:00
19883	3								6:30
						MILES FROM STATION TO WELL 10 mi			

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

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SIGNED: Bob Kasper
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CF1100	Premium/Common	SK	50		800 00
CF1105	Oil	SK	150		2730 00
CF1113	Supp	TL	705		528 75
CF1111	SPH		330		415 00
CF1103	C-15		80		1062 50
CF1107	C-150		36		288 00
CF1101	Galsonic		750		502 50
CF1150	1 1/2" Auto Fill Float Valve	ea	1		330 00
CF1106	Catch Down Plug Ball		1		370 00
CF1151	Condenser		10		700 00
CF1150	Basket		2		180 00
CF1155	Superdust	gal	500		765 00
FT01	Personnel Equipment Allowance	hr	30		210 00
CF7110	Blending & Mixing Service	SK	700		280 00
CF113	Propagator Bulk Delivery	ton/hr	24		150 00
CF707	Drum Rental 6001-7000	ea	1		3240 00
CF504	Plug Container	ea	1		250 00
FT00	Union Millwork	hr	10		42 50
5003	Service Supervisor	ea	1		175 00
SUB TOTAL					10,979 74

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE <u>L. J. Dine</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Bob Kasper</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
--	--

FIELD SERVICE ORDER NO. _____



BASIC
ENERGY SERVICES
Liberal, Kansas

Cement Report

Customer	Oil Producers	Lease No.		Date	12-16-11
Lease	Brown	Well #	1A-29	Service Receipt	02261
Casing	1 1/2" 11.6"	Depth	6416'	County	Seward
Job Type	2 1/2" 1 1/2" Production	Formation		State	KS
				Legal Description	29-34-32

Pipe Data		Perforating Data		Cement Data
Casing size	1 1/2" 11.6"	Tubing Size		Lead 150 sk AA2
Depth	6416'	Depth		
Volume	1100-100 bbl	Volume	JAB	Tail in 50 sk Premium/Common
Max Press	3500#	Max Press		
Well Connection	10-64164"	Annulus Vol.		
Plug Depth	ST 15' 6415'	Packer Depth		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
3:30					on loc. - site assessment (run in case)
3:45					spot trucks - rig up
4:30					CSG on btm, break circ
4:45					safety meeting / TSA
5:10					pressure test 3500#
5:15	300		5	4	dump 5 bbl H ₂ O spacer
5:17	300		12	4	dump 12 bbl super flush
5:19	300		5	4	dump 5 bbl H ₂ O spacer
5:30	300		40	5	mix & pump 150 sk AA2 w/ 5% W-60, 10% S.H., 16% C-15, 1% Defoamer
					ST Gilsonite @ 14.8 ppm - 1.51 H ₂ O sk, 6.6 lbs
5:30					wash pump plus lines
5:35	0		0	5	drop dur, disp csgr
5:55	700		40	5	slow rate, lost 10 bbl of disp
6:00	1700		100	0	land plug, float hold
			13	3	plug rat & mouse holes w/ 50 sk
					job complete

Service Units	34726	5811/1900	19838-19883		
Driver Names	K. Allen	R. Markel	C. Tibbitts		

Customer Representative

Station Manager

Cementer

Taylor Printing, Inc.



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Oil Producers Inc.
 1710 Waterfront Parkway Wichita Ks.67206
 ATTN: Steve

29/34/32
Brown #1A-29
 Job Ticket: 42363 **DST#: 1**
 Test Start: 2011.12.14 @ 02:15:00

GENERAL INFORMATION:

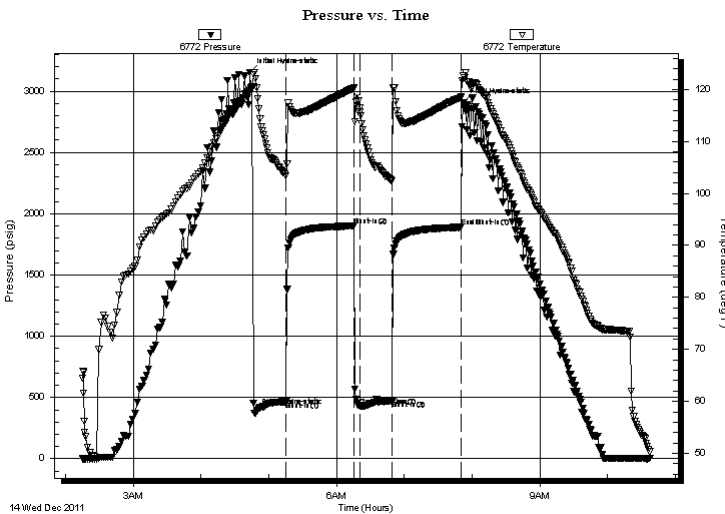
Formation: **Chester**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 06:20:45
 Time Test Ended: 10:37:45
 Interval: **6045.00 ft (KB) To 6090.00 ft (KB) (TVD)**
 Total Depth: 6090.00 ft (KB) (TVD)
 Hole Diameter: 7.78 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Harley Davidson
 Unit No: 58
 Reference Elevations: 2766.00 ft (KB)
 2754.00 ft (CF)
 KB to GR/CF: 12.00 ft

Serial #: 6772

Press @ Run Depth: 475.12 psig @ ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.12.14 End Date: 2011.12.14 Last Calib.: 2011.12.14
 Start Time: 02:15:05 End Time: 10:37:44 Time On Btm: 2011.12.14 @ 04:43:15
 Time Off Btm: 2011.12.14 @ 04:47:15

TEST COMMENT: IF- Strong blow BOB ASAO, GTS 2.5min.
 IS- No blow back.
 FF- Strong blow BOB,GTS, ASAO.
 FS- No blow back.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	3153.03	119.67	Initial Hydro-static
4	374.73	123.28	Final Hydro-static
32	467.05	103.45	Shut-In(1)
92	1901.68	120.28	Shut-In(2)
98	431.28	115.64	Open To Flow (1)
126	475.12	102.45	Shut-In(3)
187	1889.81	118.53	End Shut-In(1)
189	2907.13	122.56	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
40.00	30%gas 70%mud trace of water	0.20

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
First Gas Rate	1.00	52.00	1908.92
Last Gas Rate	1.00	60.00	2138.91
Max. Gas Rate	1.00	60.00	2138.91



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Oil Producers Inc.

29/34/32

1710 Waterfront Parkway Wichita Ks.67206

Brown #1A-29

Job Ticket: 42363

DST#: 1

ATTN: Steve

Test Start: 2011.12.14 @ 02:15:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 61.00 sec/qt

Cushion Volume:

bbbl

Water Loss: in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
40.00	30%gas 70%mud trace of water	0.197

Total Length: 40.00 ft Total Volume: 0.197 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

GAS RATES

Oil Producers Inc.

29/34/32

1710 Waterfront Parkway Wichita Ks.67206

Brown #1A-29

Job Ticket: 42363

DST#: 1

ATTN: Steve

Test Start: 2011.12.14 @ 02:15:00

Gas Rates Information

Temperature: 59 (deg F)
Relative Density: 0.65
Z Factor: 0.8

Gas Rates Table

Flow Period	Elapsed Time	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
1	10	1.00	52.00	1908.92
1	10	1.00	52.00	1908.92
1	20	1.00	56.00	2023.92
1	30	1.00	58.00	2081.41
2	10	1.00	54.00	1966.42
2	20	1.00	60.00	2138.91

