



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1089724
OIL & GAS CONSERVATION DIVISION

Form ACO-1
August 2013

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
- Plug Back Conv. to GSW Conv. to Producer
- 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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

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

1089724

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

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

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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 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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Hartman Oil Co., Inc.
Well Name	DORIS GREEN 4
Doc ID	1089724

All Electric Logs Run

Microlog
Array Comp. True Resistivity Log
Spectral Density Dual Spaced Neutron Log
Borehole Compensated Sonic Array Log

Form	ACO1 - Well Completion
Operator	Hartman Oil Co., Inc.
Well Name	DORIS GREEN 4
Doc ID	1089724

Tops

Name	Top	Datum
Heebner	3777	-853
Lansing	3822	-898
B/KC	4282	-1358
Marmaton	4304	-1380
Pawnee	4376	-1452
Ft. Scott	4404	-1480
Cherokee	4418	-1494
Morrow Sand	4618	-1694
Mississippi	4641	-1717
LTD	4845	-1921

PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 131991
Invoice Date: Jul 20, 2012
Page: 1



Bill To:
Hartman Oil Co., Inc. H2 Drilling & H2 Trucking 3545 W. Jones Avenue Garden City, KS 67846

84017

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Hart	Doris Green #4	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Oakley	Jul 20, 2012	8/19/12

Quantity	Item	Description	Unit Price	Amount
150.00	MAT	Class A Common	16.25	2,437.50
26.00	MAT	Chloride	58.20	1,513.20
650.00	MAT	Lightweight Type 1	15.00	9,750.00
163.00	MAT	Flo Seal	2.70	440.10
905.00	SER	Cubic Feet	2.10	1,900.50
2,862.00	SER	Ton Mileage	2.35	6,725.70
1.00	SER	Surface	1,925.00	1,925.00
75.00	SER	Pump Truck Mileage	7.00	525.00
1.00	SER	Manifold Head Rental	200.00	200.00
75.00	SER	Light Vehicle Mileage	4.00	300.00
1.00	EQP	8.5/8 Top Rubber Plug	112.00	112.00
1.00	EQP	8.5/8 Guide Shoe	394.00	394.00
3.00	EQP	8.5/8 Centralizer	64.00	192.00
2.00	EQP	8.5/8 Basket	478.00	956.00
1.00	EQP	8.5/8 AFU Insert	382.00	382.00
1.00	CEMENTER	Darren Racette		
1.00	EQUIP OPER	Tyler Flipse		
1.00	OPER ASSIST	Chris Helpingstine		
1.00	OPER ASSIST	Brandon Wilkinson		

**NEW WELL
COMPLETION**

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 55,506.00

ONLY IF PAID ON OR BEFORE
Aug 14, 2012

Subtotal	27,753.00
Sales Tax	1,205.17
Total Invoice Amount	28,958.17
Payment/Credit Applied	
TOTAL	28,958.17

At. M. M. M.
8-2-12



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 132079
Invoice Date: Jul 28, 2012
Page: 1



Bill To:
Hartman Oil Co., Inc. H2 Drilling & H2 Trucking 3545 W. Jones Avenue Garden City, KS 67846

84004

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Hart	Doris Greer #4	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Oakley	Jul 28, 2012	8/27/12

Quantity	Item	Description	Unit Price	Amount
175.00	MAT	Class A Common	16.25	2,843.75
3.00	MAT	Gel	21.25	63.75
175.00	MAT	Lightweight	14.50	2,537.50
875.00	MAT	Gilsonite	0.89	778.75
16.00	MAT	Salt	23.95	383.20
44.00	MAT	Flo Seal	2.70	118.80
419.51	SER	Cubic Feet	2.10	880.97
1,334.77	SER	Ton Mileage	2.35	3,136.72
1.00	SER	Production Casing	2,405.00	2,405.00
75.00	SER	Pump Truck Mileage	7.00	525.00
1.00	SER	Manifold Head Rental	200.00	200.00
75.00	SER	Light Vehicle Mileage	4.00	300.00
1.00	EQP	5.5 AFU Float Shoe	349.00	349.00
1.00	EQP	5.5 Latch Down Plug Assembly	277.00	277.00
2.00	EQP	5.5 Basket	337.00	674.00
10.00	EQP	5.5 Centralizer	49.00	490.00
1.00	CEMENTER	Darren Racette		
1.00	EQUIP OPER	Tyler Flipse		
1.00	OPER ASSIST	D J Gray		
1.00	OPER ASSIST	Brandon Wilkinson		

**NEW WELL
COMPLETION**

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 3192.68

ONLY IF PAID ON OR BEFORE
Aug 22, 2012

Subtotal	15,963.44
Sales Tax	634.42
Total Invoice Amount	16,597.86
Payment/Credit Applied	
TOTAL	16,597.86

A. T. Mitchell
8-7-12

ALLIED OIL & GAS SERVICES, LLC 056653

Federal Tax I.D.# 20-5975804

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

SERVICE POINT

Oakley

DATE <u>7-28-12</u>	SEC. <u>19</u>	TWP. <u>21</u>	RANGE <u>33</u>	CALLED OUT	ON LOCATION	JOB START <u>10:30 AM</u>	JOB FINISH <u>11:30 PM</u>
DORIS Greer		WELL # <u>4</u>		LOCATION <u>Biglows To mend Rd 1w 3/4 S</u>		COUNTY <u>Finney</u>	STATE <u>Ks.</u>
LD OR <u>NEW</u> (Circle one)				Einto		1.02 11.45	

CONTRACTOR # 1
 TYPE OF JOB Production
 OLE SIZE 7 7/8 T.D. 4850
 ASINO SIZE 5 1/2 DEPTH 4845
 UDING SIZE DEPTH
 RILL PIPE DEPTH
 JOL DEPTH
 RES. MAX MINIMUM
 EAS. LINE SHOE JOINT 16.90
 EMENT LEFT IN CSG. 16.90
 ERFS.
 ISPLACEMENT 114.90
 EQUIPMENT

OWNER Same
 CEMENT
 AMOUNT ORDERED 175 SKS Lite 5" Gilsonite
1/4" Flo Seal
175 SKS Com 10% Salt 2% Gel
 COMMON 175 SKS @ \$16.85 \$2843.75
 POZMIX @
 GEL 3 SKS @ \$21.85 \$63.75
 CHLORIDE @
 ASC @
 Lite 175 SKS @ \$14.50 \$2537.50
 Gilsonite 875 # @ .89 \$778.75
 Salt 16 SKS @ \$23.95 \$383.20
 Flo Seal 44 # @ \$2.70 \$118.80
 HANDLING 419.51 @ \$2.12 \$880.97
 MILEAGE 1777 x 75 x @ \$2.25 \$396.75
1334.77 TOTAL \$10743.44

JMP TRUCK CEMENTER Darren Kocette 1
423-281 HELPER Tyler Flipse 2
 ULK TRUCK
323-328 DRIVER DJ Gray 3 & Brandon Wilkison 3
 ULK TRUCK
 DRIVER

7 lug mouse 15 SKS REMARKS:
 lug rat hole 30 SKS mix 145 SKS Lite followed
 4 175 SKS Com Down casing Washup Pump
 Lines Redense Plug Displace with water
 Fr Pressure 1100" Load plug 1500" Float
 id Hold

Thank You.

HAROE TO: Hartman oil
 FREET
 IITY STATE ZIP

SERVICE
 DEPTH OF JOB
 PUMP TRUCK CHARG \$2405.00
 EXTRA FOOTAGE @
 MILEAGE 75 @ \$7.00 \$525.00
 MANIFOLD Head @ \$200.00
LU mileage @ \$4.00 \$300.00
 TOTAL \$3430.00

o: Allied Oil & Gas Services, LLC.
 ou are hereby requested to rent cementing equipment
 id furnish cementer and helper(s) to assist owner or
 ntractor to do work as is listed. The above work was
 one to satisfaction and supervision of owner agent or
 ntractor. I have read and understand the "GENERAL
 ERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT
5/8 Weatherford
1 AF4 Float Slic @ \$319.00
1 Latah Down Plug Assy @ \$277.00
2 Baskets @ \$337 @ \$674.00
10 Centralizers @ \$49.00 \$490.00
 TOTAL \$1790.00

SALES TAX (If Any) 634.42
 TOTAL CHARGES 15,963.44
 DISCOUNT 20 3192.68 IF PAID IN 30 DAYS

UNTED NAME STEVEN CRAIG
 ONATURE Steven Craig

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
Thomas E. Wright, Commissioner

Sam Brownback, Governor

September 10, 2012

Stan Mitchell
Hartman Oil Co., Inc.
10500 E BERKELEY SQ PKWY STE 100
WICHITA, KS 67206

Re: ACO1
API 15-055-22156-00-00
DORIS GREEN 4
SW/4 Sec.19-21S-33W
Finney 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,
Stan Mitchell



DRILL STEM TEST REPORT

Prepared For: **Hartman Oil Co. Inc.**

10500 Berkeley SQ Pkway STE 100
Wichita KS 67206

ATTN: Kitt Noah

Doris Green #4

19-21s-33w-Finney,KS

Start Date: 2012.07.25 @ 00:57:35

End Date: 2012.07.25 @ 09:05:05

Job Ticket #: 48963 DST #: 1

Trilobite Testing, Inc
PO Box 362 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2012.07.31 @ 15:22:03



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Hartman Oil Co. Inc.
 10500 Berkeley SQ Pkway STE 100
 Wichita KS 67206
 ATTN: Kitt Noah

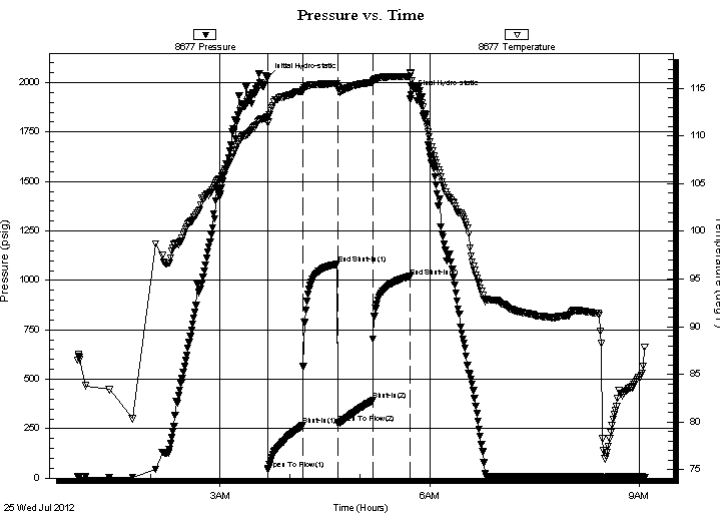
19-21s-33w-Finney, KS
Doris Green #4
 Job Ticket: 48963 **DST#: 1**
 Test Start: 2012.07.25 @ 00:57:35

GENERAL INFORMATION:

Formation: **LKC "K"**
 Deviated: No Whipstock: ft (KB)
 Test Type: Conventional Bottom Hole (Initial)
 Time Tool Opened: 03:41:05 Tester: Tate Lang
 Time Test Ended: 09:05:05 Unit No: 53
 Interval: **4150.00 ft (KB) To 4200.00 ft (KB) (TVD)** Reference Elevations: 2924.00 ft (KB)
 Total Depth: 4200.00 ft (KB) (TVD) ft (CF)
 Hole Diameter: 7.88 inches Hole Condition: Good KB to GR/CF: ft

Serial #: 8677 Inside
 Press @ Run Depth: 392.75 psig @ 4164.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2012.07.25 End Date: 2012.07.25 Last Calib.: 2012.07.25
 Start Time: 00:57:40 End Time: 09:05:04 Time On Btm: 2012.07.25 @ 03:40:50
 Time Off Btm: 2012.07.25 @ 05:43:35

TEST COMMENT: IF-BOB 6 mins
 ISI-Dead No Blow Back
 FF-BOB 8 mins
 FSI-Dead No Blow Back



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2027.50	112.01	Initial Hydro-static
1	42.86	111.36	Open To Flow (1)
31	268.69	114.69	Shut-In(1)
60	1082.10	115.48	End Shut-In(1)
61	276.21	115.18	Open To Flow (2)
91	392.75	115.65	Shut-In(2)
123	1017.59	116.27	End Shut-In(2)
123	1940.14	116.55	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
403.00	10%G 5%M 85%O	3.46
186.00	35%G 10%M 55%O	2.61
124.00	20%M 80%O	1.74
124.00	20%W 40%M 40%O	1.74
72.00	30%M 70%O	1.01

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
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**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Hartman Oil Co. Inc.

19-21s-33w-Finney,KS

10500 Berkeley SQ Pkw ay STE 100
Wichita KS 67206

Doris Green #4

Job Ticket: 48963

DST#: 1

ATTN: Kitt Noah

Test Start: 2012.07.25 @ 00:57:35

Tool Information

Drill Pipe:	Length: 3897.00 ft	Diameter: 3.80 inches	Volume: 54.66 bbl	Tool Weight: 20000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 2.75 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 241.00 ft	Diameter: 2.25 inches	Volume: 1.19 bbl	Weight to Pull Loose: 70000.00 lb
			<u>Total Volume: 55.85 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	8.00 ft			String Weight: Initial 65000.00 lb
Depth to Top Packer:	4150.00 ft			Final 68000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	50.00 ft			
Tool Length:	70.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4131.00	
Shut In Tool	5.00			4136.00	
Hydraulic tool	5.00			4141.00	
Packer	5.00			4146.00	20.00 Bottom Of Top Packer
Packer	4.00			4150.00	
Stubb	1.00			4151.00	
Perforations	13.00			4164.00	
Recorder	0.00	8677	Inside	4164.00	
Recorder	0.00	8522	Outside	4164.00	
Change Over Sub	1.00			4165.00	
Drill Pipe	31.00			4196.00	
Change Over Sub	1.00			4197.00	
Bullnose	3.00			4200.00	50.00 Bottom Packers & Anchor

Total Tool Length: 70.00



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Hartman Oil Co. Inc.
10500 Berkeley SQ Pkw ay STE 100
Wichita KS 67206
ATTN: Kitt Noah

19-21s-33w-Finney,KS
Doris Green #4
Job Ticket: 48963 **DST#: 1**
Test Start: 2012.07.25 @ 00:57:35

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: 47.00 sec/qt	Cushion Volume: bbl		
Water Loss: 7.96 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 2000.00 ppm			
Filter Cake: inches			

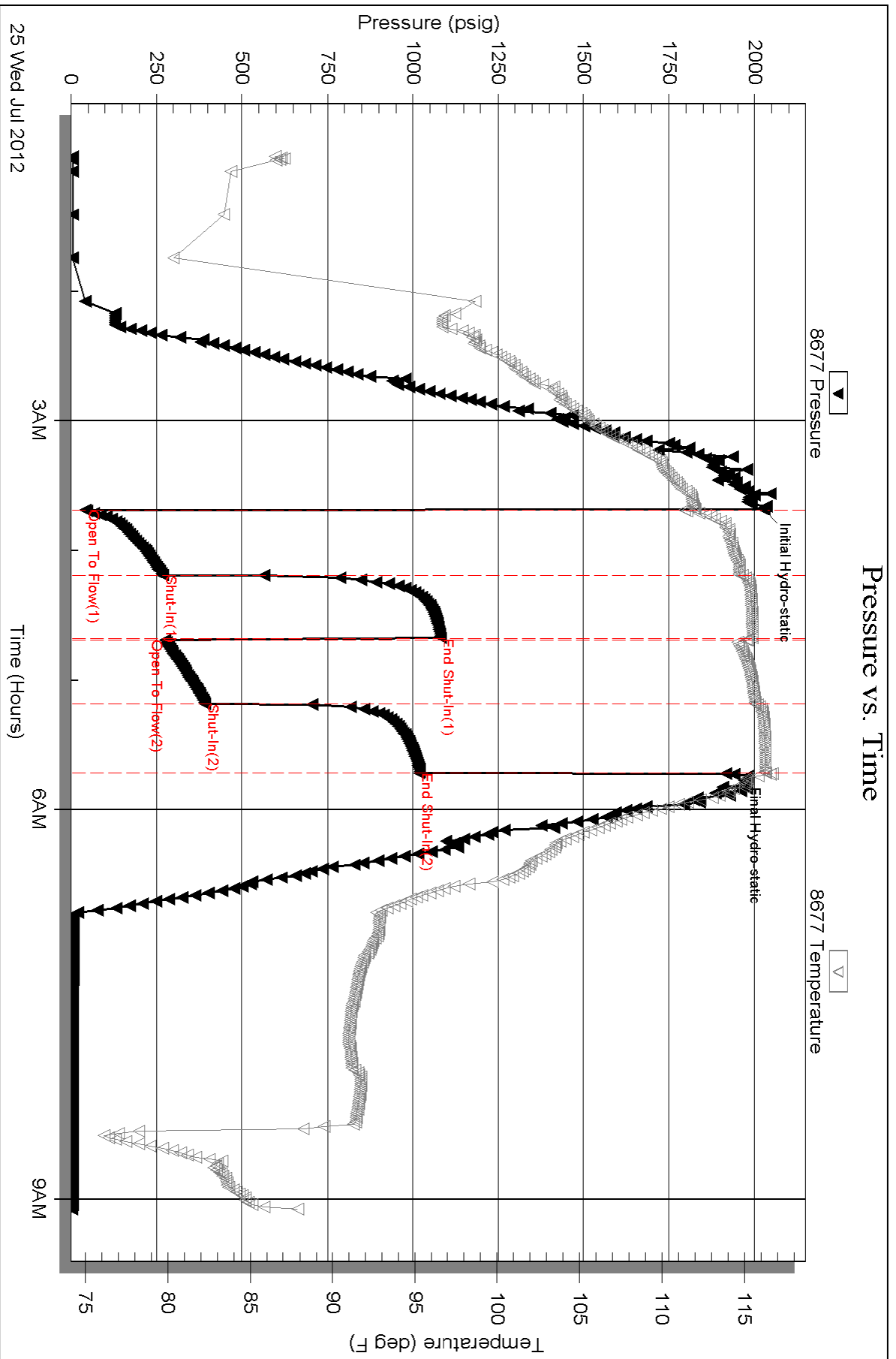
Recovery Information

Recovery Table

Length ft	Description	Volume bbl
403.00	10%G 5%M 85%O	3.458
186.00	35%G 10%M 55%O	2.609
124.00	20%M 80%O	1.739
124.00	20%W 40%M 40%O	1.739
72.00	30%M 70%O	1.010

Total Length: 909.00 ft Total Volume: 10.555 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:

Pressure vs. Time

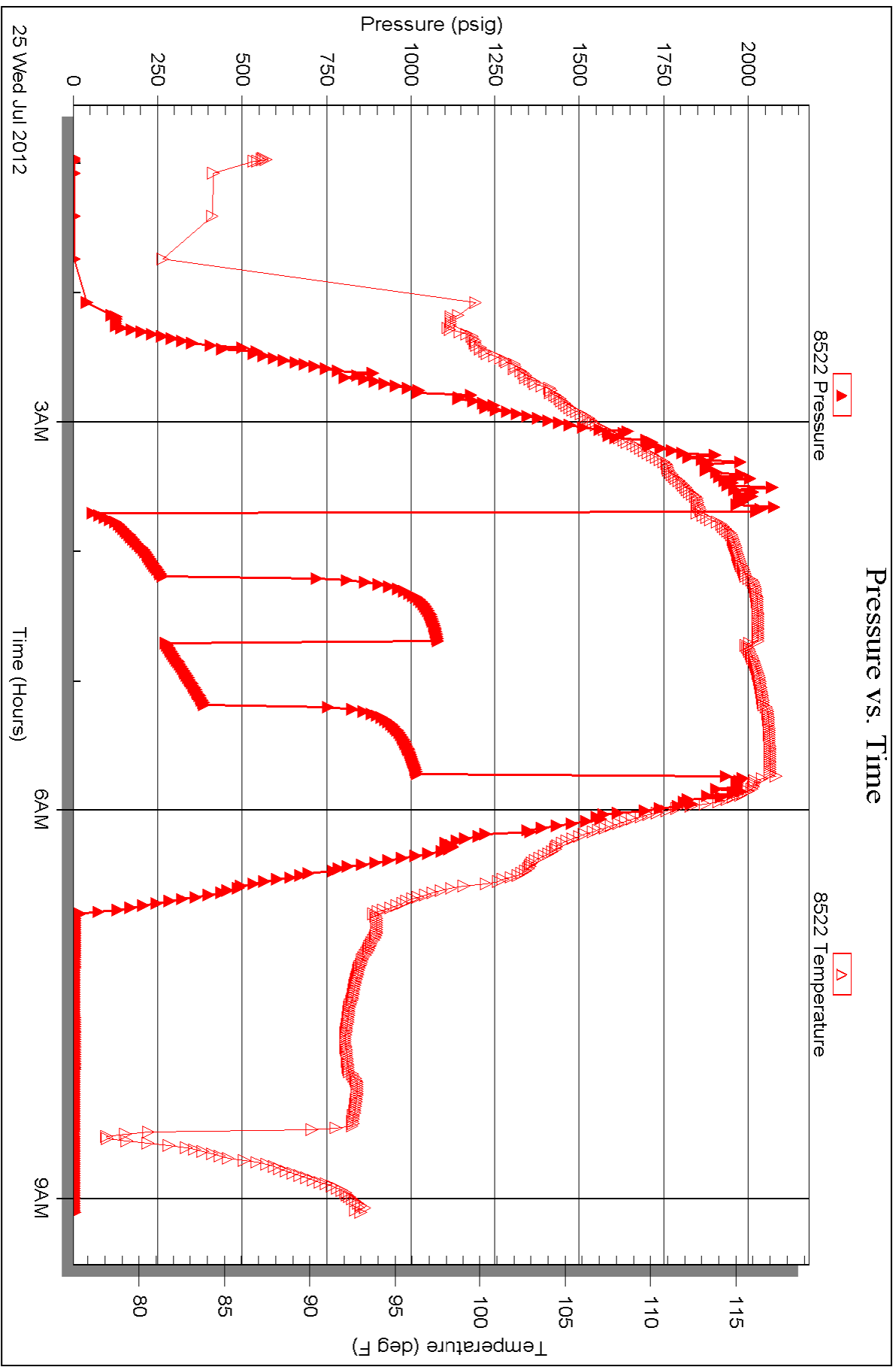


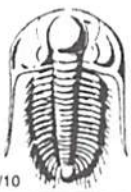
Serial #: 8522

Outside Hartman Oil Co. Inc.

Doris Green #4

DST Test Number: 1





TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

Test Ticket

NO. 48963

Well Name & No. Donis Green #4 Test No. 1 Date 7-24-12
 Company Hartman Oil Co. Inc. Elevation 2924 KB _____ GL _____
 Address 10500 E Berkeley SQ Pkwy STE 100 Wichita 67206
 Co. Rep / Geo. Kitt Noah Rig #2 Rig #2
 Location: Sec. 19 Twp. 2ls Rge. 3.3w Co. Finey State KS

Interval Tested 4150 - 4200 Zone Tested LKC-"K"
 Anchor Length 50 Drill Pipe Run 3897 Mud Wt. 9.0
 Top Packer Depth 4146 Drill Collars Run 241 Vis 47
 Bottom Packer Depth 4150 Wt. Pipe Run _____ WL 8.0
 Total Depth 4200 Chlorides 2000 ppm System LCM 2#

Blow Description IF - B.O.B 6mins
ISF - Dead No Blow Back
FF - B.O.B 8mins
FSI - Dead No Blow Back

Rec	Feet of	%gas	%oil	%water	%mud
<u>3403</u>	<u>GMCO</u>	<u>10</u>	<u>85</u>	<u>5</u>	<u>5</u>
<u>186</u>	<u>GMCO</u>	<u>35</u>	<u>55</u>	<u>10</u>	<u>10</u>
<u>124</u>	<u>MCO</u>	<u>70</u>	<u>20</u>	<u>20</u>	<u>20</u>
<u>124</u>	<u>WCMO</u>	<u>40</u>	<u>26</u>	<u>40</u>	<u>40</u>
<u>72</u>	<u>MCO</u>	<u>70</u>	<u>38</u>	<u>38</u>	<u>38</u>

Rec Total 909 BHT 116 Gravity 19 API RW _____ @ _____ °F Chlorides _____ ppm

(A) Initial Hydrostatic 2028 2028 Test 1250 T-On Location 20:30
 (B) First Initial Flow 43 43 Jars _____ T-Started 00:57
 (C) First Final Flow 269 269 Safety Joint _____ T-Open 03:41
 (D) Initial Shut-In 1082 1082 Circ Sub N/C T-Pulled 05:41
 (E) Second Initial Flow 276 276 Hourly Standby _____ T-Out 09:06
 (F) Second Final Flow 393 393 Mileage 56 R/T 86.80 Comments Loaded @ 2:40
 (G) Final Shut-In 1018 1018 Sampler _____ 7/27/12
 (H) Final Hydrostatic 1940 1940 Straddle _____ Ruined Shale Packer _____
 Shale Packer _____ Ruined Packer _____
 Extra Packer _____ Extra Copies _____
 Extra Recorder _____ Sub Total 0
 Day Standby _____ Total 1336.80
 Accessibility _____ MP/DST Disc't _____

Initial Open 30
 Initial Shut-In 30
 Final Flow 30
 Final Shut-In 30
 Sub Total 1336.80

Approved By Kitt Noah Our Representative [Signature]

TriLOBite Testing Inc. shall not be liable for damaged of any kind of 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 statements or opinion concerning the results 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.