



KANSAS CORPORATION COMMISSION 1113019
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: _____



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
---	---

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
-----------------------------------	-----------	---------	-------------	---------------	---------

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: _____ _____
---	---	--

Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	DONNA 1-23
Doc ID	1113019

Tops

Name	Top	Datum
ANHYDRITE	454	+1299
BASE ANHYDRITE	474	+1279
TOPEKA	2592	-839
HEEBNER	2861	-1109
BROWN LIME	2985	-1232
LANSING	3007	-1254
BASE KANSAS CITY	3244	-1491
ARBUCKLE	3254	-1501

Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	DONNA 1-23
Doc ID	1113019

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	24	465	A-CON BLEND	175	
SURFACE	12.25	8.625	24	465	COMMON	175	3%CC, 1/4#CF
PRODUC TION	7.875	5.5	14	3346	COMMON	150	
PROUCTI ON	7.875	5.5	14	3346	60/40 POZMIX	60	



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

FIELD SERVICE TICKET
1718 07406 A

DATE _____ TICKET NO. _____

DATE OF JOB <i>11-14-12</i> DISTRICT <i>PLATT KS</i>		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 <i>L.D. Drilling</i>		LEASE <i>DONNA</i>		WELL NO. <i>1-23</i>	
ADDRESS		COUNTY <i>BARTON</i>		STATE <i>KS</i>	
CITY		STATE		SERVICE CREW <i>Sullivan, Wright, Phyc</i>	
AUTHORIZED BY		JOB TYPE: <i>CNW 8 3/8</i>			

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<i>33706-20920</i>	<i>35</i>						<i>11-14-12</i>			<i>12:30</i>
<i>70959-19918</i>	<i>35</i>									<i>2:45</i>
<i>37900</i>										<i>3:10</i>
										<i>4:15</i>
										<i>5:00</i>
MILES FROM STATION TO WELL							<i>60</i>			

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: *Breandon wills*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<i>CP 101</i>	<i>A-cw-Blend cut</i>	<i>SK</i>	<i>175</i>		<i>3,150 00</i>
<i>CP 100-C</i>	<i>Common cut</i>	<i>SK</i>	<i>175</i>		<i>2,800 00</i>
<i>CC 102</i>	<i>Collidie</i>	<i>lb</i>	<i>88</i>		<i>325 60</i>
<i>CC 109</i>	<i>Coleman chloride</i>	<i>lb</i>	<i>825</i>		<i>816 25</i>
<i>CF 153</i>	<i>Wood... Plug 8 3/8</i>	<i>SA</i>	<i>1</i>		<i>160 00</i>
<i>E 100</i>	<i>rig... mi</i>	<i>mi</i>	<i>600</i>		<i>255 00</i>
<i>E 101</i>	<i>Hoop Equit mi</i>	<i>mi</i>	<i>120</i>		<i>540 00</i>
<i>E 113</i>	<i>Bulk Defung</i>	<i>tm</i>	<i>990</i>		<i>1,584 00</i>
<i>PE 200</i>	<i>Depth charge</i>	<i>SA</i>	<i>1</i>		<i>1,000 00</i>
<i>PE 240</i>	<i>Blending - m...</i>	<i>SK</i>	<i>350</i>		<i>490 00</i>
<i>PE 504</i>	<i>plug... Related</i>	<i>SA</i>	<i>1</i>		<i>250 00</i>
<i>S 003</i>	<i>Schw... Separator</i>	<i>SA</i>	<i>1</i>		<i>175 00</i>

SUB TOTAL
DL5 8,921 69

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

Thank you

CHEMICAL / ACID DATA:			

SERVICE REPRESENTATIVE *Robert...* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Breandon wills*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer <i>L.O. Drilling</i>	Lease No.	Date <i>11-14-12</i>	
Lease <i>DONNA</i>	Well # <i>1-23</i>		
Field Order # <i>1406</i>	Station <i>P211-H vs</i>	Casing <i>8 5/8</i>	Depth <i>470'</i>
Type Job <i>CNW 8 5/8</i>	Formation	County <i>BARTON</i>	State <i>KS</i>
		Legal Description <i>23-20-11</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>8 5/8</i>							5 Min.	
Depth <i>470</i>	Depth	From	To	Pre Pad	Max			
Volume <i>18</i>	Volume	From	To	Pad	Min		10 Min.	
Max Press <i>500</i>	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection <i>N.C</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <i>430</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Jullien</i>
-------------------------	--------------------------------------	----------------------------------

Service Units	<i>37900</i>	<i>33708</i>	<i>20920</i>	<i>70959</i>	<i>9918</i>				
Driver Names	<i>Sullivan</i>	<i>Wright</i>	<i>Phue</i>						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>2:45</i>					<i>on loc softy making</i>
					<i>Run 11 sts 8 5/8 # 23 csg.</i>
<i>2:30</i>					<i>CASING on BOTTOM</i>
					<i>Hook up cnc</i>
<i>2:40</i>			<i>3</i>	<i>3</i>	<i>1st Spaced</i>
			<i>77</i>	<i>4.5</i>	<i>mix A-cow cont c 12 ppq. 175sk</i>
			<i>37</i>		<i>mix Tail cont 175sk com 3% cc 1/4 ct</i>
					<i>cont mix A shut down</i>
					<i>Release Plug</i>
				<i>4</i>	<i>1st Disp</i>
<i>4:15</i>	<i>200</i>		<i>28</i>		<i>plug down</i>
					<i>cancel 15 BBL cont to pit</i>
					<i>Job complete</i>
					<i>Bank full</i>



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 07407 A

DATE _____ TICKET NO. _____

DATE OF JOB: 11-19-12	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: L.D. Drilling	LEASE: DONNA	1-23		WELL NO.						
ADDRESS:	COUNTY: CARTON	STATE: KS								
CITY:	STATE:	SERVICE CREW: Sullivan, Wright, Phyc								
AUTHORIZED BY:	JOB TYPE: CNW 5 1/2 LonSiz									
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
33700-20920	35						11-19-12			12:00
70959-19862	35									3:00
37900										5:00
										5:30
										6:00
						MILES FROM STATION TO WELL	60			

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: *Jim Mickle*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 100-5	Commons cont	SK	150		2,400.00
CP 103	60/40 Puz call	SK	600		220.00
CC 105	C-41 Redomer	lb	36		144.00
CC 111	SALT	lb	1216		609.00
CC 112	Cont Friction Redom	lb	106		636.00
CC 113	Gypsum	lb	205		528.75
CC 201	Gilsonite	lb	750		502.50
CF 103	Top Rubber Plug 5 1/2	SA	1		105.00
CF 251	Acids Stop	SA	1		250.00
CF 1451	Insurd Flow	SA	1		215.00
CF 1051	Teaball	SA	6		660.00
E 100	rubber mix	mi	60		255.00
E 101	Heavy Egg mix	mi	120		840.00
E 43	Bulk Delivery	TOL	579		926.40
CE 204	Depth change	SA	1		2,160.00
CE 240	Flowing - minor	SK	210		294.00
CE 504	plug constant change	SA	1		250.00
SO23	Solvent Superwell	SA	1		175.00

SUB TOTAL

DLS 9,752.24

CHEMICAL / ACID DATA:			

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

Thank you TOTAL

SERVICE REPRESENTATIVE: *Robert J. ...*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Jim Mickle*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer <i>L.P. Donnan</i>	Lease No.	Date <i>11-17-12</i>	
Lease <i>DONNA</i>	Well # <i>1-23</i>	County <i>BARTON</i>	State <i>KS</i>
Field Order # <i>1407</i>	Station <i>PRATT KS</i>	Casing <i>5 1/2</i>	Depth <i>3346</i>
Type Job <i>CDW 5 1/2 long string</i>	Formation	Legal Description <i>23-20-11</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>5 1/2</i>							5 Min.	
Depth <i>3346</i>	Depth	From	To	Pre Pad	Max		10 Min.	
Volume <i>81</i>	Volume	From	To	Pad	Min		15 Min.	
Max Press <i>1500</i>	Max Press	From	To	Frac	Avg		Annulus Pressure	
Well Connection <i>P.O.</i>	Annulus Vol.	From	To		HHP Used		Total Load	
Plug Depth <i>3321</i>	Packer Depth	From	To	Flush	Gas Volume			

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Johnson</i>
-------------------------	--------------------------------------	----------------------------------

Service Units	<i>37900</i>	<i>38700</i>	<i>20970</i>	<i>70959</i>	<i>19862</i>				
Driver Names	<i>Sullivan</i>	<i>Wright</i>	<i>Phye</i>						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>3:45</i>	<i>400</i>				<i>on loc set, meet</i>
					<i>Run 29 JTS 5 1/2 14 csg.</i>
					<i>Cent 1-3-5-7-9-11</i>
<i>4:15</i>					<i>CASING on Bottom Hook by cnc.</i>
<i>5:04</i>			<i>7</i>		<i>at Squarager cont 30sk</i>
			<i>36</i>	<i>4.5</i>	<i>mix 150 sk cement @ 150-ppg</i>
					<i>cont mix at start down wash down pump</i>
					<i>Release Plug</i>
				<i>5</i>	<i>at Pump</i>
	<i>200</i>		<i>54</i>	<i>5</i>	<i>left PS</i>
	<i>500</i>			<i>7</i>	<i>Slow Rate</i>
<i>5:30</i>	<i>950</i>		<i>81</i>		<i>Plug down</i>
			<i>7</i>		<i>plug RH w/ 30 sk</i>
					<i>JOB Complete</i>
					<i>Thank you</i>



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

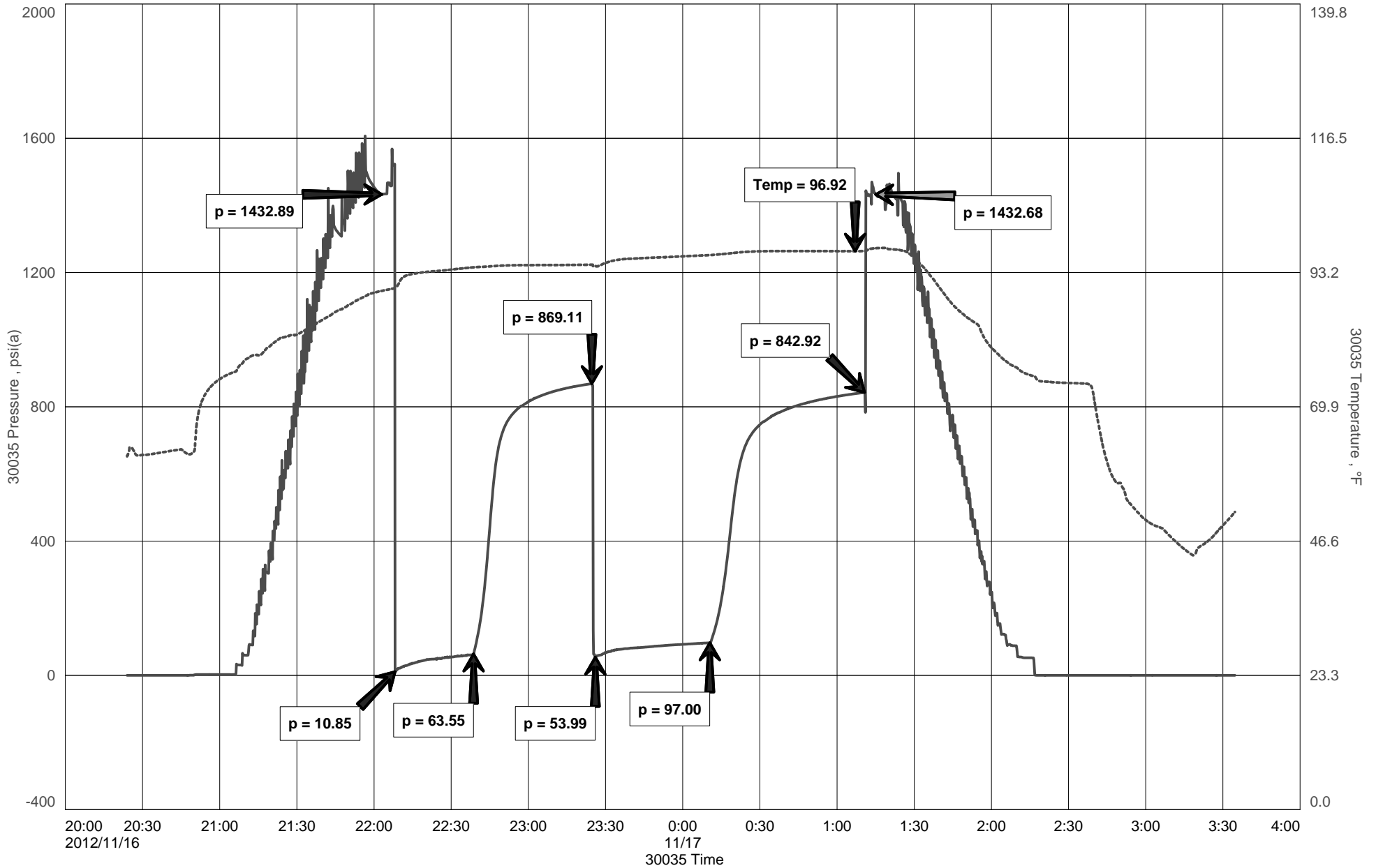
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

LD Drilling Inc.
DST #1 Lansing A-G 3015-3100'
Start Test Date: 2012/11/16
Final Test Date: 2012/11/17

Donna #1-23
Formation: DST #1 Lansing A-G 3015-3100'
Pool: Infield
Job Number: S0244

Donna #1-23



Diamond Testing

General information Report

General Information

Company Name LD Drilling Inc.

Contact	LD Davis	Job Number	S0244
Well Name	Donna #1-23	Representative	Jacob McCallie
Unique Well ID	DST #1 Lansing A-G 3015-3100'	Well Operator	LD Drilling Inc.
Surface Location	SEC 23-20S-11W Barton County	Report Date	2012/11/17
Well License Number		Prepared By	Jacob McCallie
Field	Chase-Silica		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #1 Lansing A-G 3015-3100'		
Well Fluid Type	01 Oil	Start Test Time	20:24:00
		Final Test Time	03:35:00
Start Test Date	2012/11/16		
Final Test Date	2012/11/17		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

1062'	GIP		
36'	SOSM	1% O	99% M
183'	GWMO	17% G	45% O 18% W 20% M
219'	TOTAL FLUID		

PH: 7

RW: .15 @ 72 degrees F
Chlorides: 42,000 ppm

TOOL SAMPLE:

52% O 15% W 33% M



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

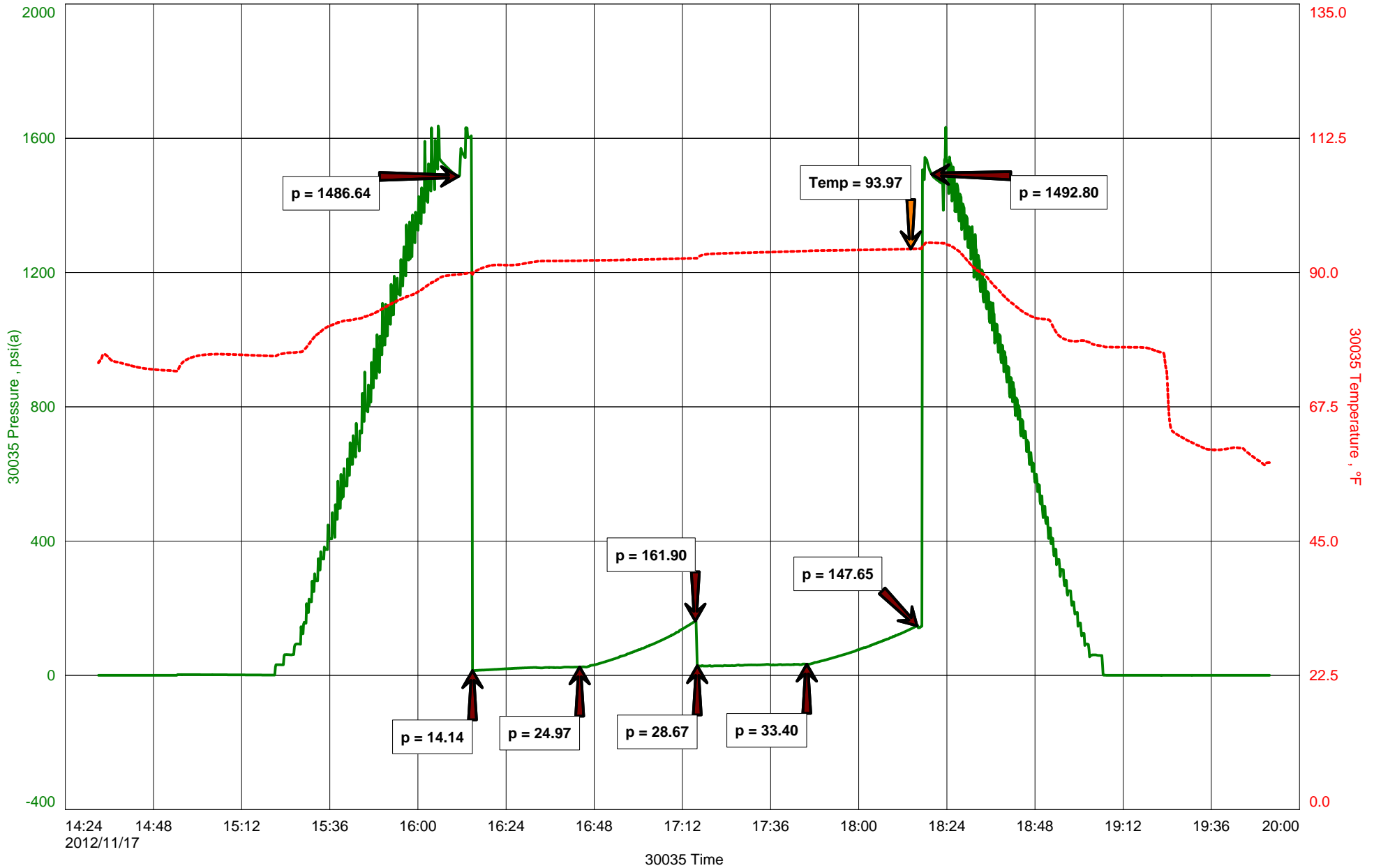
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
 Initial Hydrostatic Pressure..... (A) _____ P.S.I.
 Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
 Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
 Final Flow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

LD Drilling Inc.
DST #2 Lansing "H-K" 3133-3226'
Start Test Date: 2012/11/17
Final Test Date: 2012/11/17

Donna #1-23
Formation: DST #2 Lansing "H-K" 3133-3226'
Pool: Infield
Job Number: S0245

Donna #1-23



Diamond Testing

General information Report

General Information

Company Name LD Drilling Inc.

Contact	LD Davis	Job Number	S0245
Well Name	Donna #1-23	Representative	Jacob McCallie
Unique Well ID	DST #2 Lansing "H-K" 3133-3226'	Well Operator	LD Drilling Inc.
Surface Location	SEC 23-20S-11W Barton County	Report Date	2012/11/17
Well License Number		Prepared By	Jacob McCallie
Field	Chase-Silica		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #2 Lansing "H-K" 3133-3226'		
Well Fluid Type	01 Oil	Start Test Time	14:33:00
		Final Test Time	19:53:00
Start Test Date	2012/11/17		
Final Test Date	2012/11/17		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:
133' GIP
50' MUD 100% MUD

TOOL SAMPLE:
2% O 98% M



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: _____	

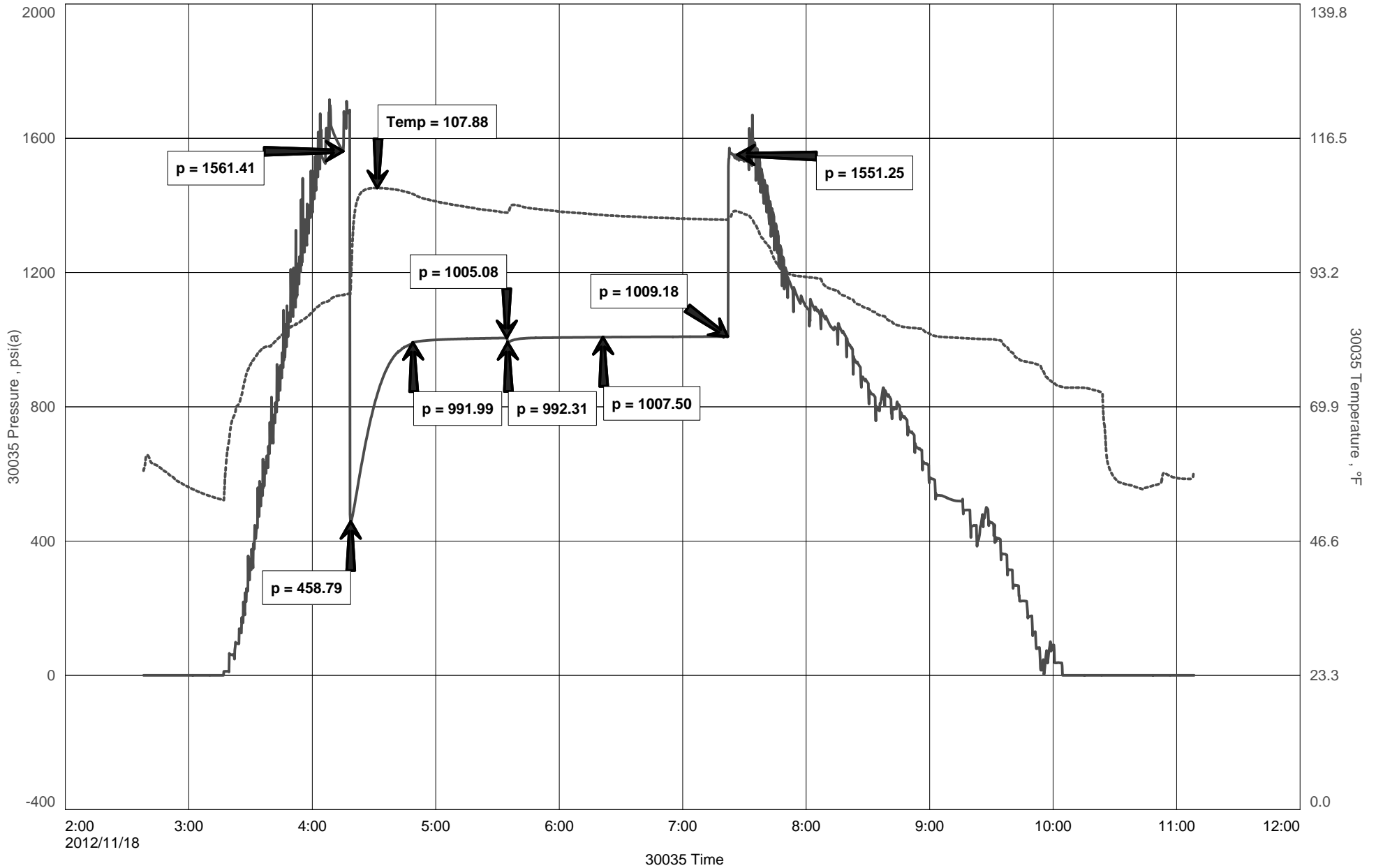
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

LD Drilling Inc.
DST #3 Arbuckle 3240-3264'
Start Test Date: 2012/11/18
Final Test Date: 2012/11/18

Donna #1-23
Formation: DST #3 Arbuckle 3240-3264'
Pool: Infield
Job Number: S0246

Donna #1-23



Diamond Testing

General information Report

General Information

Company Name LD Drilling Inc.

Contact	LD Davis	Job Number	S0246
Well Name	Donna #1-23	Representative	Jacob McCallie
Unique Well ID	DST #3 Arbuckle 3240-3264'	Well Operator	LD Drilling Inc.
Surface Location	SEC 23-20S-11W Barton County	Report Date	2012/11/18
Well License Number		Prepared By	Jacob McCallie
Field	Chase-Silica		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #3 Arbuckle 3240-3264'		
Well Fluid Type	01 Oil	Start Test Time	02:38:00
		Final Test Time	11:09:00
Start Test Date	2012/11/18		
Final Test Date	2012/11/18		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

534'	GIP		
156'	WHOCM	30% O	24% W 46% M
756'	MCSOCW	15% O	79% W 6% M
1476'	MCSOSW	2% O	97% W 1% M
2388'	TOTAL FLUID		

PH: 7

RW: .35 @ 55 degrees F

Chlorides: 21,000 ppm

TOOL SAMPLE:

10% O 86% W 4% M

KIM B. SHOEMAKER

CONSULTING GEOLOGIST

316-884-9709 * WICHITA, KS

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

COMPANY L. D. DRILLING, INC.

LEASE # 1-23 DONNA

FIELD CHASE-SILICA

LOCATION 1354' FSL & 1603' FEL

SEC 23 TWP 20s RGE 11w

COUNTY BARTON STATE KANSAS

CONTRACTOR PETROMARK DRILLING, LLC RIG 2

SPUD 11-13-12 COMP 11-19-12

RTD 3351 LTD 3350

MUD UP 2600 TYPE MUD CHEMICAL

ELEVATIONS

KR 1753

OF _____

GL 1748

Measurements Are All
From 1753 KB

CASING
SURFACE 8 5/8" @ 465'
PRODUCTION 5 1/2" @

ELECTRICAL SURVEYS
DUAL IND., DENS-N., MICRO

SAMPLES SAVED FROM 2700 TO 3351

DRILLING TIME KEPT FROM 2500 TO 3351

SAMPLES EXAMINED FROM 2700 TO 3351

GEOLOGICAL SUPERVISION FROM 3000 TO 3351

GEOLOGIST ON WELL KIM B. SHOEMAKER

FORMATION TOPS	LOG	SAMPLES
ANHYDRITE	454+ 1299	452+ 1301
B/ANH.	474+ 1279	473+ 1280
TOPEKA	2592- 839	2598- 846
HEEBNER	2861- 1109	2863- 1110
BROWN LIME	2985- 1232	2987- 1234
LANSING	3007- 1259	3005- 1252
B/KC	3244- 1491	3241- 1488
ARBUCKLE	3259- 1501	3260- 1507



API: 15-009-25776

REMARKS
11-13-12 5000
11-14 @ 470'
11-15 @ 1936'
11-16 @ 2845'
11-17 @ 3131'
11-18 @ 3264'
11-19 @ 3351'

LEGEND

- Anhydrite
- Soil
- Sandstone
- Shale
- Carb sh
- Limestone
- Oil Lime
- Chert
- Dolomite

DRILLING TIME IN MINUTES
PER FOOT
Rate of Penetration increases

DEPTH
400
450
500

REMARKS

SAMPLE DESCRIPTIONS

LITHOLOGY

SK0E01-05

2500

2600

2700

TOP LOG

TOPEKA 2598-815

Samples are Lagged

Sh. BLE. DKY

Sh. lig. silty

15. To surf. w/ dk. foss.

Sh. lig. silty

15. To surf. w/ dk. foss. silty

15. To foss. silty

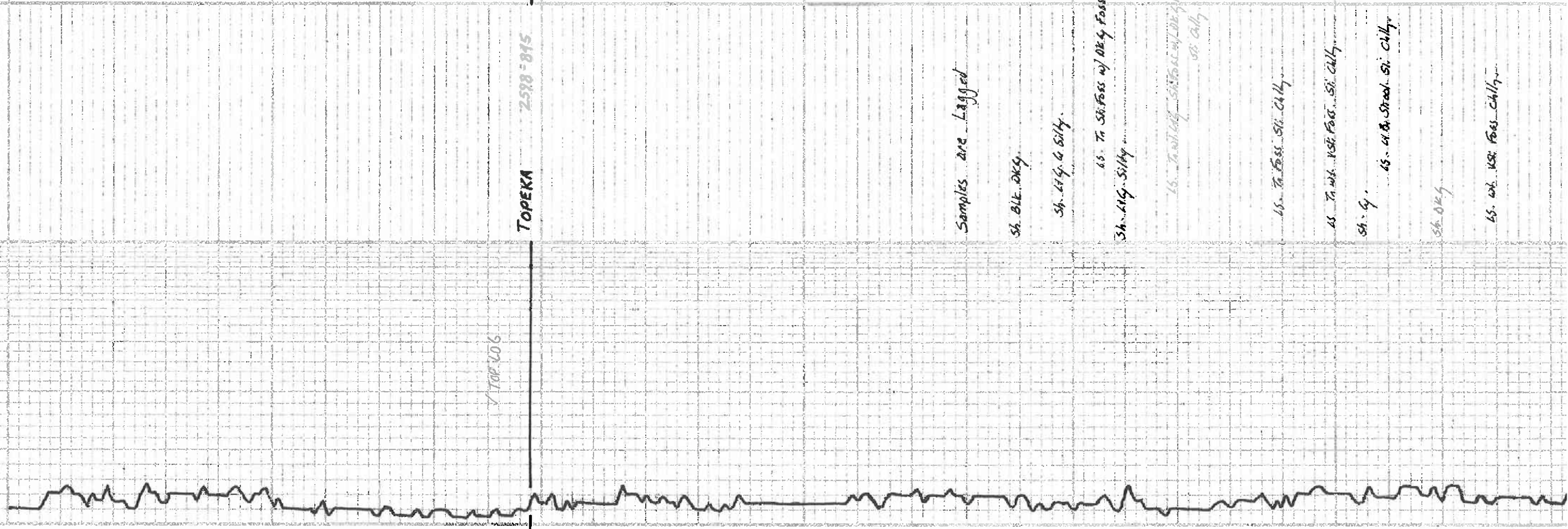
15. To surf. w/ dk. foss. silty

Sh. g.

15. 4 ft. Surf. silty

Sh. DKY

15. dk. w/ dk. foss. silty



2800

Sh. G. Do. V.S.I.A.

65. Tan. Sand. Gravel. Silty Chalk.

65. Wt. chalk.

65. Tan. G. Silty. Foss. Silty Chalk.

HEBNER 2863-1110

Sh. Blue Clay.
Sh. Yellow Clay.

65. Tan. Silty. Foss. Silty A.

Sh. Lt. Blue G.

Sh. Blue G. Silty. Foss.

Sh. Blue F. G. Silty. Foss. No. 8. No. 9. No. 10.

Sh. Lt. Blue G. Silty.

Sh. Lt. Blue G. Silty.

Sh. Lt. Blue G. Tan. Silty. Foss. No. 8. No. 9. No. 10.

BROWN LIME 2887-1234

Sh. Lt. Blue G.

LANSING 3005-1252

65. Tan. Silty. Foss. Silty. Foss. No. 8. No. 9. No. 10.

65. Wt. Silty. Foss. Silty. Chalk.

65. Lt. Blue Silty. Foss. P. V. G. P. V. G. P. V. G. P. V. G.

65. Tan. G. Silty. Foss. Silty. Foss.

65. Lt. Blue Silty. Foss. Silty. Foss. No. 8. No. 9. No. 10.

65. Blue Foss. Duv.

Sh. G.

65. Wt. Silty. Foss. Silty. Chalk. Foss. Silty. Foss. No. 8. No. 9. No. 10.

65. Wt. chalk.

65. Wt. Silty. Foss. Silty. Chalk. Foss. Silty. Foss. No. 8. No. 9. No. 10.

65. Tan. G. Silty. Foss. Silty. Foss. No. 8. No. 9. No. 10.

A G.

65. Wt. chalk.

TORONTO

DOUGLAS

2900

3000

3100

DST (1) 3015-3100

36" VSSCM (17.0) 99/M

183' SHWD (17.6 45/10)

30' 45' 45' 60

Reg. 1062' G.I.P.

36" VSSCM (17.0) 99/M

183' SHWD (17.6 45/10)

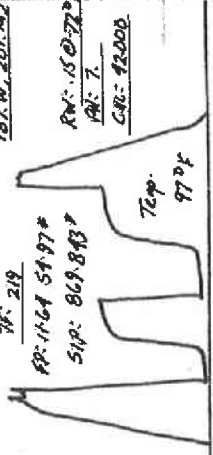
TP: 219

RP: 1164 5197*

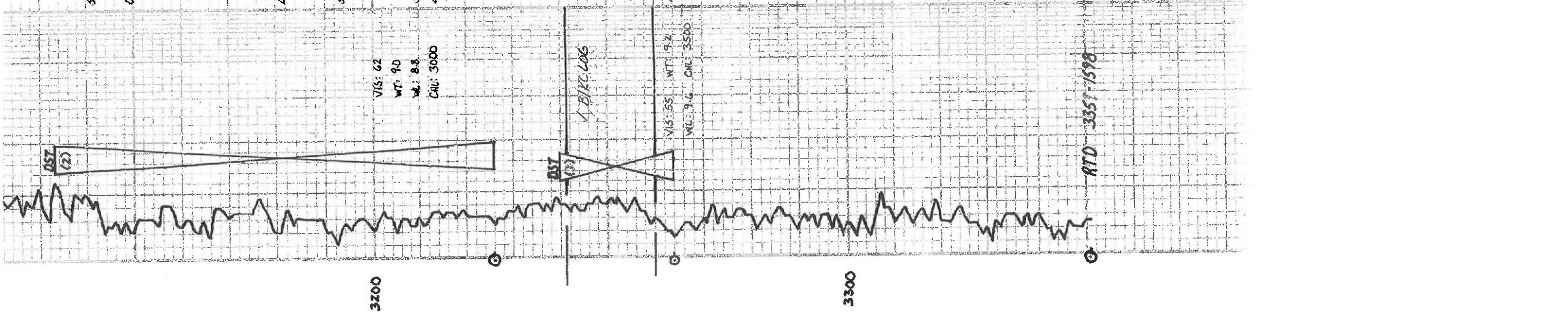
SIP: 869 837

Temp.

97°F



VIS: 51
VFS: 89
VWS: 88
DWS: 3000



3200

3300

15. wt only
16. T.G. Sila
58. 2.14g. 4.8loc

15. wt. Sil. Pass. Pass. 2.14g. 4.8loc
OK brace. all sil. 4.8loc. 4.8loc. 4.8loc.

12. 2.14g. T.G. 4.8loc. 4.8loc.
58. 4.8loc. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
19. T.G. Sil. Pass. Pass. 2.14g. 4.8loc
OK brace. all sil. 4.8loc. 4.8loc.

15. 4.14g. Dm. 4.8loc. 4.8loc.
OK brace. all sil. 4.8loc. 4.8loc.

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3241-1488

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3260-1507

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3351-1598

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3290-3269

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3260-1507

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3351-1598

15. wt only
16. T.G. Sila
58. 2.14g. 4.8loc

15. wt. Sil. Pass. Pass. 2.14g. 4.8loc
OK brace. all sil. 4.8loc. 4.8loc. 4.8loc.

12. 2.14g. T.G. 4.8loc. 4.8loc.
58. 4.8loc. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
19. T.G. Sil. Pass. Pass. 2.14g. 4.8loc
OK brace. all sil. 4.8loc. 4.8loc.

15. 4.14g. Dm. 4.8loc. 4.8loc.
OK brace. all sil. 4.8loc. 4.8loc.

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3241-1488

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3260-1507

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3290-3269

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3260-1507

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3351-1598

15. T.G. Sil. 4.8loc.
58. 4.8loc.

18. wt only. 4.8loc. 4.8loc.
15. wt only.

18. 4.14g. Dm. 4.8loc.
B.I.K.C. 3290-3269

