



**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: \_\_\_\_\_



1136913

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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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 Bbbs.	Gas Mcf	Water Bbbs.	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	Demco Oil and Gas Company
Well Name	SEWELL 1
Doc ID	1136913

All Electric Logs Run

Phased Induction Shallow Focus SP
Compensated Neutron PEL Density Micro
Borehole Volume Caliper
Composite PIT-LDT-CNT-GR-SP
Sonic Cement Bond



**BASIC**  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET  
1718 07043 A

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

DATE OF JOB: 11-29-12	DISTRICT: KANSAS	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: DOMCO OIL & GAS CO		LEASE: Sewell # 1				WELL NO.:	
ADDRESS:		COUNTY: Pratt 23-29-1 STATE: KS					
CITY:		STATE:					
AUTHORIZED BY:		SERVICE CREW: Allen M. K. Stone					
		JOB TYPE: 8 3/4 surface					

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
33443 PU	1						11-29-12			7:00
33708-20920	1						11-29-12			4:25
							11-29-12			
							11-29-12			7:40
14760 21010							11-29-12			8:00
						MILES FROM STATION TO WELL: 20.119				

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: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP103	60/40 P22	SK	250		\$ 3000.00
CC102	cell FLAKE	lb	63		\$ 228.60
CC109	Calcium Chloride	lb	645		\$ 627.45
CF153	wooden cement Plug 8 3/8	EA	1		\$ 160.00
CC131	Sugar	lb	50		\$ 100.00
E100	unit Mileage Charge P.U.	mi	20		\$ 45.00
E101	Heavy Exp. P.M. Mileage	mi	40		\$ 280.00
E113	Bulk Delivery Chg.	PM	215		\$ 344.00
CF200	Depth Charge 0-500'	4hr	1		\$ 1000.00
CF240	Blending & mixing Service Chg.	SK	250		\$ 250.00
CF504	Plug container rep. Lization chg.	Job	1		\$ 250.00
SD03	Service Supervisor first 8hrs	EA	1		\$ 175.00

SUB TOTAL  
265 = 4915.76

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: Allen F. Wood

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: \_\_\_\_\_  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. \_\_\_\_\_



**BASIC**  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 07044 A

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

DATE OF JOB: 11-29-12	DISTRICT: Kansas	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: Decker Oil Gas	LEASE: Sewell #1	WELL NO.:							
ADDRESS:		COUNTY: Pratt 27-29-15 STATE:							
CITY: STATE:		SERVICE CREW: Allen, Robert, Jossie							
AUTHORIZED BY:		JOB TYPE: Top OFF CW							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
28443 PU	1/2						11-29-12	PM	1100
19865-19843	1/2					ARRIVED AT JOB	11-29-12	AM	1230
19865-21010	1/2					START OPERATION	11-29-12	AM	100
						FINISH OPERATION	11-29-12	AM	130
						RELEASED	11-29-12	AM	215
						MILES FROM STATION TO WELL	20 mi.		

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
CP100C	Commons Cement	SK	100		\$ 1600 00
CC109	Calcium chloride	lb	282		\$ 296 10
F100	Travel mileage chg	mi	20		\$ 80 00
F101	Heavy Equip Mileage	mi	40		\$ 240 00
F113	Bulk Oil chg	FM	94		\$ 150 40
CE403	Cement pumper add. hrs. use RAC	HR	1		\$ 500 00
CE240	Blending & mixing Service chg	SK	100		\$ 144 00
9002	Secure Superuser First Shw	EA	1		\$ 175 00

SUB TOTAL  
ALS \$ 2419 80

CHEMICAL / ACID DATA:			

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

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

FIELD SERVICE ORDER NO. \_\_\_\_\_



**BASIC**<sup>™</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 06617 A

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

DATE OF JOB: 12-5-12	DISTRICT: Pratt	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: Demco Oil & Gas	LEASE: Sewell	WELL NO. 1					
ADDRESS:	COUNTY: Pratt	STATE: KS					
CITY:	STATE:	SERVICE CREW: Mattal Young, Melson					
AUTHORIZED BY:	JOB TYPE: CW 5 1/2 LS						

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
19959	2010		45min				12-5-12	AM	16:20
37216							12-5-12	AM	16:30
27463			45min				12-5-12	AM	17:15
						RELEASED	12-5-12	AM	18:00
						MILES FROM STATION TO WELL			20

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 agree 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 105	AA2 cement	SK	125		2,125 00
CP 103	60/40 P&Z	SK	50		600 00
CC 105	C-41F Defoamer	lb	30		120 00
CC 111	Salt	lb	579		289 80
CC 112	Friction Reducer	lb	36		216 00
CC 129	Fluid Loss	lb	59		442 50
CC 201	Gilsonite	lb	625		418 75
CF 607	Latch Down Plug	eg	1		480 00
CF 1051	Cementing Walker shoe	eg	1		2,900 00
CF 1651	Tribo-lizer	eg	4		440 00
CC 151	Mud Flush	gal	820		430 00
E 100	Pickup Mileage	mi	80		85 00
E 101	Heavy Mileage	mi	40		280 00
E 113	Bulk Delivery	TM	161		257 60
CE 205	Depth Charge	hr	1		2,520 00
CE 240	Mixing Charge	SK	175		245 00
CE 504	Plug on Taper	JOB	1		250 00
S 003	Supervisor	ea	1		175 00

SUB TOTAL  
PLS 9,070 76

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. \_\_\_\_\_

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  
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

April 28, 2013

Dennis Kahle  
Demco Oil and Gas Company  
1335 S. 6TH ST  
BLACKWELL, OK 74631

Re: ACO1  
API 15-151-22400-00-00  
SEWELL 1  
SE/4 Sec.23-29S-15W  
Pratt 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,  
Dennis Kahle

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  
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

April 29, 2013

Dennis Kahle  
Demco Oil and Gas Company  
1335 S. 6TH ST  
BLACKWELL, OK 74631

Re: ACO-1  
API 15-151-22400-00-00  
SEWELL 1  
SE/4 Sec.23-29S-15W  
Pratt County, Kansas

Dear Dennis Kahle:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 11/28/2012 and the ACO-1 was received on April 28, 2013 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department





## DRILL STEM TEST REPORT

Prepared For: **Demco Oil and Gas Co**

1335 S 6th ST  
Blackwell OK 74631

ATTN: Dennis E Kahle

### **Sewell #1**

#### **23-29s-15w Pratt,KS**

Start Date: 2012.12.03 @ 07:38:06

End Date: 2012.12.03 @ 18:31:51

Job Ticket #: 49510                      DST #: 1

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

Printed: 2012.12.06 @ 09:31:42



**TRILOBITE TESTING, INC.**

# DRILL STEM TEST REPORT

Demco Oil and Gas Co

**23-29s-15w Pratt, KS**

1335 S 6th ST  
Blackwell OK 74631

**Sewell #1**

Job Ticket: 49510

**DST#: 1**

ATTN: Dennis E Kahle

Test Start: 2012.12.03 @ 07:38:06

## GENERAL INFORMATION:

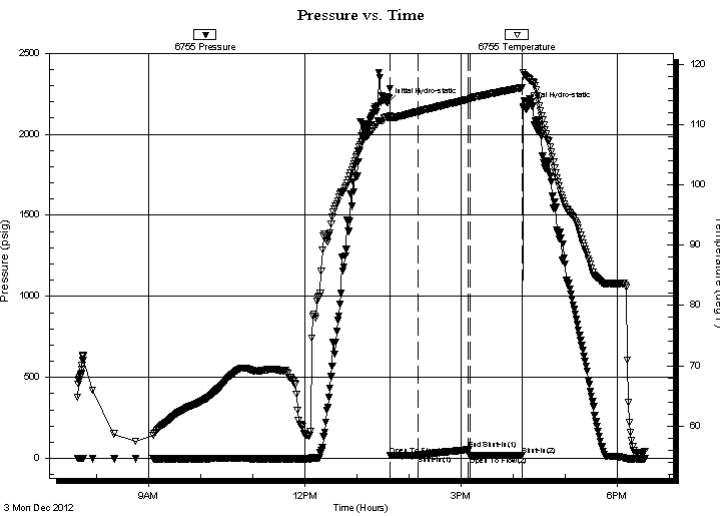
Formation: **Miss**  
 Deviated: No Whipstock: ft (KB)  
 Time Tool Opened: 13:38:36  
 Time Test Ended: 18:31:51  
 Interval: **4563.00 ft (KB) To 4600.00 ft (KB) (TVD)**  
 Total Depth: 4600.00 ft (KB) (TVD)  
 Hole Diameter: 7.88 inches Hole Condition: Fair  
 Test Type: Conventional Bottom Hole (Initial)  
 Tester: Chris Staats  
 Unit No: 47  
 Reference Elevations: 2008.00 ft (KB)  
 1998.00 ft (CF)  
 KB to GR/CF: 10.00 ft

## Serial #: 6755

Inside

Press@RunDepth: 21.66 psig @ 4564.00 ft (KB) Capacity: 8000.00 psig  
 Start Date: 2012.12.03 End Date: 2012.12.03 Last Calib.: 2012.12.03  
 Start Time: 07:38:11 End Time: 18:31:51 Time On Btm: 2012.12.03 @ 13:35:36  
 Time Off Btm: 2012.12.03 @ 16:11:21

TEST COMMENT: IF: Weak blow !"  
 IS: No blow back  
 FF: Weak blow blow died



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2194.84	111.20	Initial Hydro-static
3	19.39	111.06	Open To Flow (1)
36	21.66	112.12	Shut-In(1)
93	54.58	114.12	End Shut-In(1)
95	15.53	114.25	Open To Flow (2)
155	19.77	116.08	Shut-In(2)
156	2167.93	118.61	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
10.00	Mud with oil spots 1% oil 99% mud	0.14

## Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)





**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

**TOOL DIAGRAM**

Demco Oil and Gas Co

**23-29s-15w Pratt, KS**

1335 S 6th ST  
Blackwell OK 74631

**Sewell #1**

Job Ticket: 49510

**DST#: 1**

ATTN: Dennis E Kahle

Test Start: 2012.12.03 @ 07:38:06

## Tool Information

Drill Pipe:	Length: 4551.00 ft	Diameter: 3.80 inches	Volume: 63.84 bbl	Tool Weight: 2200.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 80000.00 lb
			<u>Total Volume: 63.84 bbl</u>	Tool Chased 2.00 ft
Drill Pipe Above KB:	16.00 ft			String Weight: Initial 72000.00 lb
Depth to Top Packer:	4563.00 ft			Final 72000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	37.00 ft			
Tool Length:	65.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
------------------	-------------	------------	----------	------------	----------------

Change Over Sub	1.00			4536.00	
Shut In Tool	5.00			4541.00	
Hydraulic tool	5.00			4546.00	
Jars	5.00			4551.00	
Safety Joint	3.00			4554.00	
Packer	5.00			4559.00	28.00 Bottom Of Top Packer
Packer	4.00			4563.00	
Stubb	1.00			4564.00	
Recorder	0.00	6773	Outside	4564.00	
Recorder	0.00	6755	Inside	4564.00	
Perforations	33.00			4597.00	
Bullnose	3.00			4600.00	37.00 Bottom Packers & Anchor

**Total Tool Length: 65.00**



**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Demco Oil and Gas Co

**23-29s-15w Pratt,KS**

1335 S 6th ST  
Blackwell OK 74631

**Sewell #1**

Job Ticket: 49510

**DST#: 1**

ATTN: Dennis E Kahle

Test Start: 2012.12.03 @ 07:38:06

## 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:

bbbl

Water Loss: 9.39 in<sup>3</sup>

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 5500.00 ppm

Filter Cake: 0.02 inches

## Recovery Information

Recovery Table

Length ft	Description	Volume bbl
10.00	Mud with oil spots 1% oil 99% mud	0.140

Total Length: 10.00 ft      Total Volume: 0.140 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

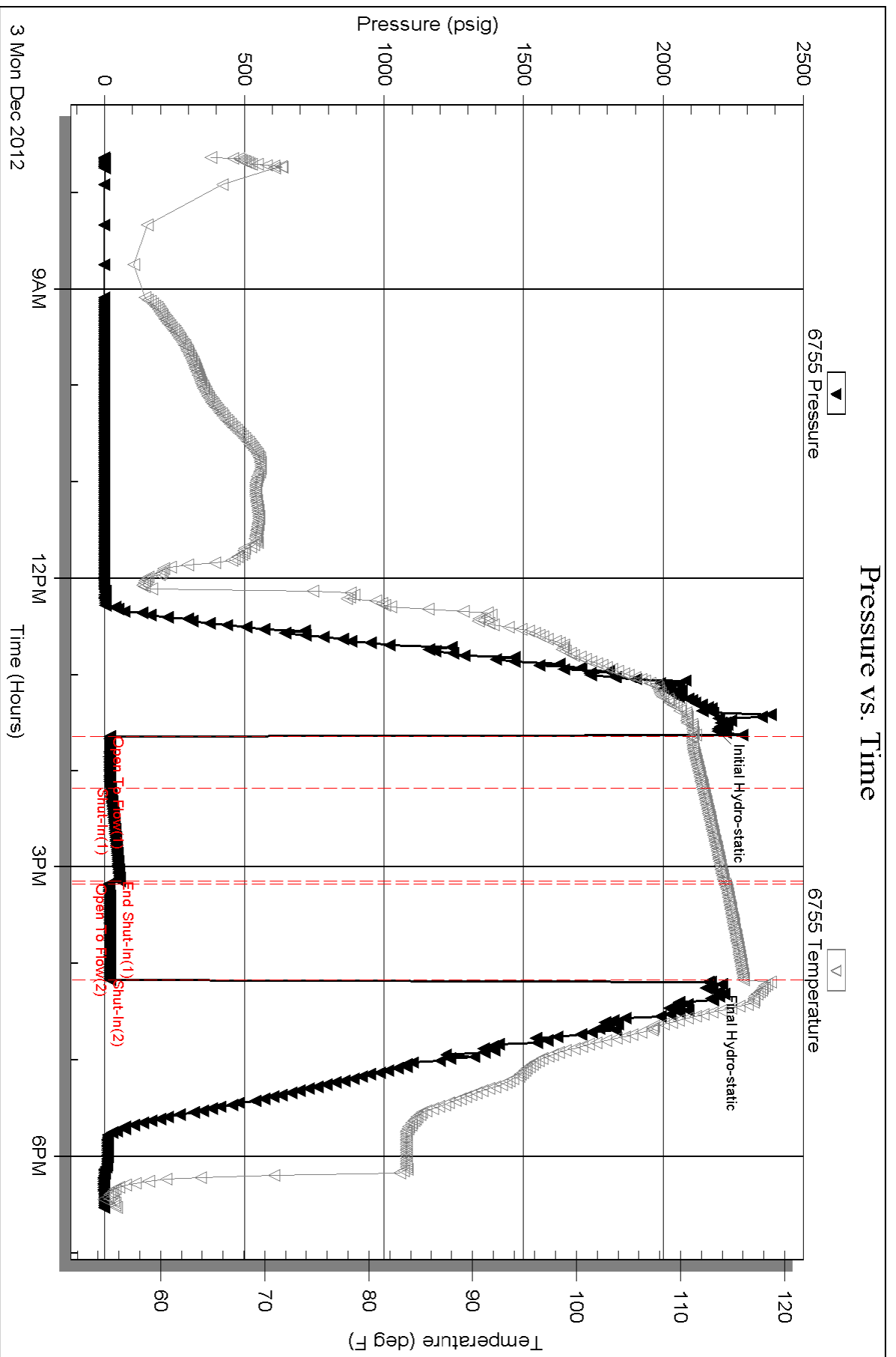
Serial #: 6755

Inside

Demco Oil and Gas Co

Sew ell #1

DST Test Number: 1



Triobite Testing, Inc

Ref. No: 49510

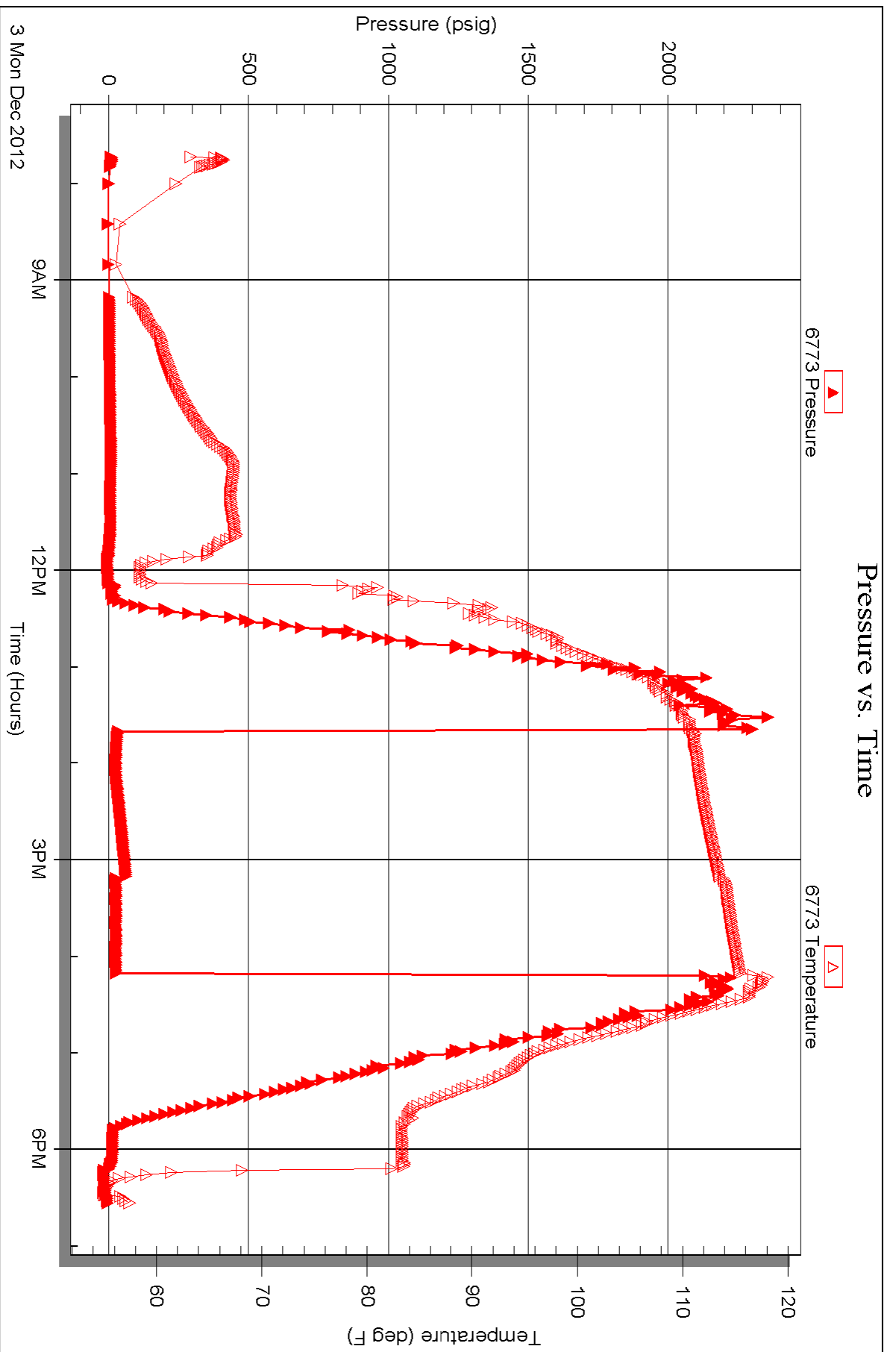
Printed: 2012.12.06 @ 09:31:46

Serial #: 6773

Outside Demco Oil and Gas Co

Sewer #1

DST Test Number: 1



Triobite Testing, Inc

Ref. No: 49510

Printed: 2012.12.06 @ 09:31:47



# TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

## Test Ticket

NO. 49510

4/10

Well Name & No. Sewell #1 Test No. 1 Date 12-3-12  
 Company Demco Oil and Gas CO Elevation 2008 KB 1998 GL  
 Address 1335 S. 6th ST Blackwell OK 74631  
 Co. Rep / Geo. DENNIS F Kahle Rig val #5  
 Location: Sec. 23 Twp. 29 Rge. 15 Co. Pratt State KS

Interval Tested 4563 - 4600 Zone Tested MISS  
 Anchor Length 37' Drill Pipe Run 4551 Mud Wt. 9.0  
 Top Packer Depth 4558 Drill Collars Run 0 Vis 47  
 Bottom Packer Depth 4563 Wt. Pipe Run 0 WL 9.4  
 Total Depth 4600 Chlorides 5500 ppm System LCM 0  
 Blow Description IF: weak blow 1"  
ISI: NO blow back  
FF: weak blow blow died  
FST:

Rec	Feet of	%gas	%oil	%water	%mud
<u>10'</u>	<u>MOD with oil spots</u>	<u>1</u>		<u>99</u>	
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 10' BHT 115 Gravity - API RW - @ - ° F Chlorides 5500 ppm

(A) Initial Hydrostatic <u>2194</u>	<input checked="" type="checkbox"/> Test 1250	T-On Location <u>7:15</u>
(B) First Initial Flow <u>19</u>	<input checked="" type="checkbox"/> Jars 250	T-Started <u>7:38</u>
(C) First Final Flow <u>21</u>	<input checked="" type="checkbox"/> Safety Joint 75	T-Open <u>13:38</u>
(D) Initial Shut-In <u>54</u>	<input type="checkbox"/> Circ Sub	T-Pulled <u>16:10</u>
(E) Second Initial Flow <u>15</u>	<input type="checkbox"/> Hourly Standby	T-Out <u>18:30</u>
(F) Second Final Flow <u>19</u>	<input checked="" type="checkbox"/> Mileage <u>60 miles</u> 93	Comments _____
(G) Final Shut-In _____	<input type="checkbox"/> Sampler _____	_____
(H) Final Hydrostatic <u>2167</u>	<input type="checkbox"/> Straddle _____	<input type="checkbox"/> Ruined Shale Packer _____
Initial Open <u>30</u>	<input type="checkbox"/> Shale Packer _____	<input type="checkbox"/> Ruined Packer _____
Initial Shut-In <u>60</u>	<input type="checkbox"/> Extra Packer _____	<input type="checkbox"/> Extra Copies _____
Final Flow <u>60</u>	<input type="checkbox"/> Extra Recorder _____	Sub Total <u>0</u>
Final Shut-In <u>pull</u>	<input type="checkbox"/> Day Standby _____	Total <u>1668</u>
	<input type="checkbox"/> Accessibility _____	MP/DST Disc't _____
	Sub Total <u>1668</u>	

Approved By Dennis F Kahle Our Representative Ch. [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.