



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1134659
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: _____



1134659

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Vincent Oil Corporation
Well Name	Peters 1-24
Doc ID	1134659

All Electric Logs Run

Dual Induction
Density - Neutron
Micro-log
Sonic

Form	ACO1 - Well Completion
Operator	Vincent Oil Corporation
Well Name	Peters 1-24
Doc ID	1134659

Tops

Name	Top	Datum
Heebner Shale	4141	(-1672)
Brown Limestone	4250	(-1781)
Lansing	4259	(-1790)
Stark Shale	4586	(-2117)
Pawnee	4799	(-2330)
Cherokee Shale	4846	(-2377)
Base Penn Limestone	4944	(-2475)
Mississippian	4986	(-2517)
LTD	5198	(-2729)

QUALITY WELL SERVICE, INC.

5791

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410
Office / Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	12-22-12	Sec.	24	Twsp.	27	Range	24	County	Ford	State	Ks	On Location		Finish	10:30am	
Lease	Peters		Well No.	1-24		Location	Ford + Saddle rd. 8W 2 1/2 N									
Contractor	Val 5				Owner	E into										
Type Job	Surface				To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.											
Hole Size	12 1/4		T.D.	570												
Csg.	8 5/8		Depth	561.50												
Tbg. Size			Depth													
Tool			Depth													
Cement Left in Csg.			Shoe Joint													
Meas Line			Displace	33.08		Cement Amount Ordered	300ss Common									
EQUIPMENT				2% Gel 3% CC 1/4 C.F.												
Pumptrk	8	No.	Cody		Common	300										
Bulktrk	7	No.	Mike		Poz. Mix											
Bulktrk		No.	David		Gel.	6										
Pickup		No.			Calcium	11										
JOB SERVICES & REMARKS				Hulls												
Rat Hole			Salt													
Mouse Hole			Flowseal 75													
Centralizers			Kol-Seal													
Baskets			Mud CLR 48													
D/V or Port Collar			CFL-117 or CD110 CAF 38													
			Sand													
			Handling 317													
			Mileage 50													
	Ran 13jts 8 5/8 csg				FLOAT EQUIPMENT											
	Established circulation with Mud Pump.				Guide Shoe											
					Centralizer											
	Mixed and pumped 300ss Common				Baskets											
	2% Gel 3% CC 1/4 C.F.				AFU Inserts											
	Displaced with 33.08 bbls H ₂ O				Float Shoe											
					Latch Down											
	Cement did circulate to surface.				8 5/8 Baffle Plate											
					8 5/8 wooden Plug											
					Pumptrk Charge Surface											
					Mileage 50											
					Tax											
					Discount											
					Total Charge											
X Signature	Brady Smith															

ALLIED CEMENTING CO., LLC. 038114

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Medicine Lodge

DATE <u>1-8-13</u>	SEC. <u>24</u>	TWP. <u>27S</u>	RANGE <u>24W</u>	CALLED OUT <u>11:00 AM</u>	ON LOCATION <u>1:00 PM</u>	JOB START <u>5:30</u>	JOB FINISH <u>6:45</u>
LEASE <u>Peters</u>	WELL # <u>1-24</u>	LOCATION <u>Ford Co, N to Saddle Rd,</u>			COUNTY <u>Ford</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one) <u>NEW</u>		LOCATION <u>W to Rd 117, 3 N, E into</u>			<u>1.02</u>	<u>7.95</u>	

CONTRACTOR Val #5

TYPE OF JOB Production

HOLE SIZE 7 7/8 I.D. 5200

CASING SIZE 4 1/2 DEPTH 5200

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 1300 MINIMUM _____

MEAS. LINE _____ SHOE JOINT 41

CEMENT LEFT IN CSG. 41

PERFS. _____

DISPLACEMENT 81 Bbls

OWNER Vincent Oil

CEMENT AMOUNT ORDERED 50sy 601.46:4% gel

1753x "A" ASC. 1.5" Kalscal 1.5%

FI-160

COMMON Class "A"	30 @	17.90	537.00
POZMIX	20 @	9.35	187.00
GEL	2 @	23.40	46.80
CHLORIDE	@		
ASC	175 @	20.90	3657.50
ASF	12 @	58.70	704.40
Claypro	8 @	27.40	219.20
Kalscal	875 @	.98	857.50
FI-160	82 @	18.90	1549.80

EQUIPMENT

PUMP TRUCK CEMENTER Ron Gilley

471-302 HELPER David Felia

BULK TRUCK

421-252 DRIVER Justin Bowen

BULK TRUCK

_____ DRIVER _____

HANDLING 272.94 @ 2.48 689.79

MILEAGE 12.05 x 50 x 2.160 156.30

TOTAL 10068.59

REMARKS:
See Cement Log

SERVICE

DEPTH OF JOB 5200'

PUMP TRUCK CHARGE _____ 3,099.25

EXTRA FOOTAGE @ _____

MILEAGE 50 @ 7.70 385.00

MANIFOLD # Head @ _____ 275.00

Light Veh: 50 @ 4.40 220.00

CHARGE TO: Vincent Oil

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 3979.25

4 1/2 PLUG & FLOAT EQUIPMENT

1- Rubber Plug	@	83.07
1- Guide Shoe	@	224.64
1- AFU Insect	@	291.33
1- Basket	@	35.90
1- Part Callav	@	290.745
6- Centralizers	@	56.96
TOTAL		<u>4159.35</u>

To: Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) 951.93

TOTAL CHARGES 418206.99

DISCOUNT 20% 3641.40 IF PAID IN 30 DAYS

PRINTED NAME X ERIC HAGANS

SIGNATURE [Signature]

Net \$14565.59

ALLIED CEMENTING CO., LLC. 32719

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Medicine Lodge, KS

DATE <i>01-21-13</i>	SEC <i>24</i>	TWP <i>27s</i>	RANGE <i>24w</i>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <i>Peters</i>	WELL # <i>1-24</i>	LOCATION <i>Fond KS, 1/4 N, West to 117, 3 N, E/S</i>			COUNTY <i>Fond</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one)						<i>1.95</i>	

CONTRACTOR <i>H-D</i>	OWNER <i>Vincent</i>
TYPE OF JOB <i>Pont Callan</i>	
HOLE SIZE _____ T.D. _____	CEMENT
CASING SIZE <i>4 1/2</i>	AMOUNT ORDERED <i>450sx 65:35:6% gel + 1/4 #</i>
TUBING SIZE <i>2 3/4</i>	<i>Flo Seal (used 300sx)</i>
DRILL PIPE _____ DEPTH _____	
TOOL <i>Pont Callan</i> DEPTH <i>1584'</i>	
PRES. MAX _____ MINIMUM _____	COMMON _____ @ <i>1'</i>
MEAS. LINE _____ SHOE JOINT <i>NA</i>	POZMIX _____ @ _____
CEMENT LBFT IN CSG. _____	GEL _____ @ _____
PERFS. _____	CHLORIDE _____ @ _____
DISPLACEMENT <i>5 1/2 Fresh H²O</i>	ASC _____ @ _____
EQUIPMENT	<i>1 1/2 weight 300sx @ 16.50 = 4950.00</i>

PUMP TRUCK CEMENTER <i>D. Edin / Patrick (GB)</i>	<i>Flo Seal 15# @ 2.97 = 222.15</i>
# <i>548-545</i> HELPER <i>S. Heard</i>	
BULK TRUCK	
# <i>421-252</i> DRIVER <i>J. Bowen</i>	
BULK TRUCK	
# _____ DRIVER	

HANDLING <i>331.1 ft³</i>	@ <i>2.41</i>	<i>821.13</i>
MILEAGE <i>50 miles @ 13.87 + tax 2.60</i>		<i>1803.10</i>
<i>693.50</i>		TOTAL <i>7796.98</i>

REMARKS:

See Job log

Mixed 300sx 65:35 cement, Did Circulate

Reversed Clean

THX ☺

SERVICE

DEPTH OF JOB <i>1584</i>	
PUMP TRUCK CHARGE	<i>2249.84</i>
EXTRA FOOTAGE _____ @ _____	
MILEAGE <i>50 @ 7.70</i>	<i>385.00</i>
MANIFOLD <i>Squeeze</i>	@ _____
<i>Light + Vehicle 50 @ 4.40</i>	<i>220.00</i>
TOTAL <i>3154.84</i>	

CHARGE TO: *Vincent*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<i>None</i>	@ _____	
	@ _____	
	@ _____	
	@ _____	
	@ _____	
TOTAL _____		

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) *411.23*

TOTAL CHARGES *10 951.82*

DISCOUNT *2190.36* IF PAID IN 30 DAYS

Net. 8761.46

PRINTED NAME *ERIK HAGANS*

SIGNATURE *Erik Hagans*



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Vincent Oil Corp.
155 N. Market Ste. 700
Wichita, KS 67202-1821
ATTN: Ken LeBlanc

24-27s.-24w. Ford. Co. KS

Peters 1-24

Job Ticket: 49713

DST#: 1

Test Start: 2013.01.04 @ 08:43:15

GENERAL INFORMATION:

Formation: **Pawnee**

Deviated: No Whipstock: 0.00 ft (KB)

Time Tool Opened: 11:09:15

Time Test Ended: 18:26:15

Test Type: Conventional Bottom Hole (Initial)

Tester: Ryan Reynolds

Unit No: 63

Interval: 4790.00 ft (KB) To 4812.00 ft (KB) (TVD)

Reference Elevations: 2469.00 ft (KB)

Total Depth: 4812.00 ft (KB) (TVD)

2459.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 10.00 ft

Serial #: 8790 Inside

Press @ Run Depth: 82.69 psig @ 4791.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.01.04

End Date:

2013.01.04

Last Calib.:

2013.01.04

Start Time: 08:43:20

End Time:

18:26:15

Time On Btm:

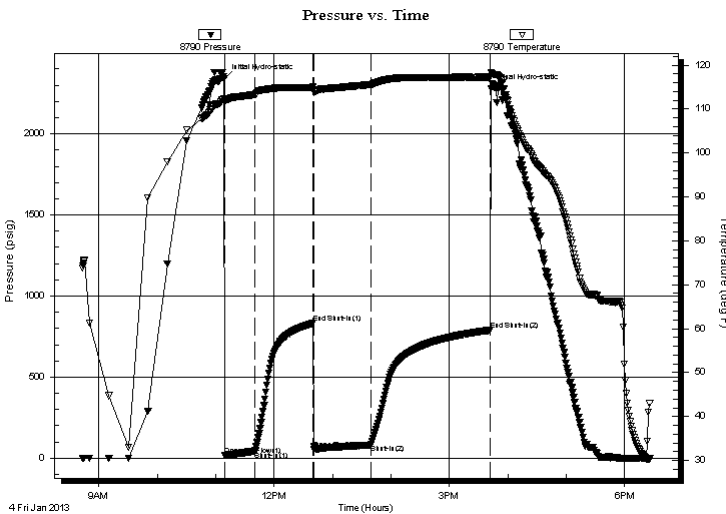
2013.01.04 @ 11:08:45

Time Off Btm:

2013.01.04 @ 15:42:30

TEST COMMENT: IF: Strong blow . BOB 4 1/2min. No GTS.
IS: Weak blow . 3/4" - 1/2"
FF: Strong blow . BOB immed. No GTS
FS: No blow

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2341.76	112.22	Initial Hydro-static
1	18.90	111.53	Open To Flow (1)
32	42.73	113.26	Shut-In(1)
92	832.76	114.96	End Shut-In(1)
93	53.11	113.85	Open To Flow (2)
151	82.69	115.54	Shut-In(2)
273	789.65	117.25	End Shut-In(2)
274	2278.22	118.33	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
60.00	Clean gassy oil 50%gas, 50%oil	0.84
60.00	WCGOM 10%w tr, 15%gas, 30%oil, 45%0.84	
50.00	GOCM 2%gas, 4%oil, 96%mud	0.70

Gas Rates

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



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Vincent Oil Corp.

24-27s.-24w. Ford. Co. KS

155 N. Market Ste. 700
Wichita, KS 67202-1821

Peters 1-24

Job Ticket: 49713

DST#: 1

ATTN: Ken LeBlanc

Test Start: 2013.01.04 @ 08:43:15

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

36 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

4200 ppm

Viscosity: 64.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 9.19 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4200.00 ppm

Filter Cake: 0.02 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
60.00	Clean gassy oil 50%gas, 50%oil	0.842
60.00	WCGOM 10%w tr, 15%gas, 30%oil, 45%mud	0.842
50.00	GOCM 2%gas, 4%oil, 96%mud	0.701

Total Length: 170.00 ft

Total Volume: 2.385 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:

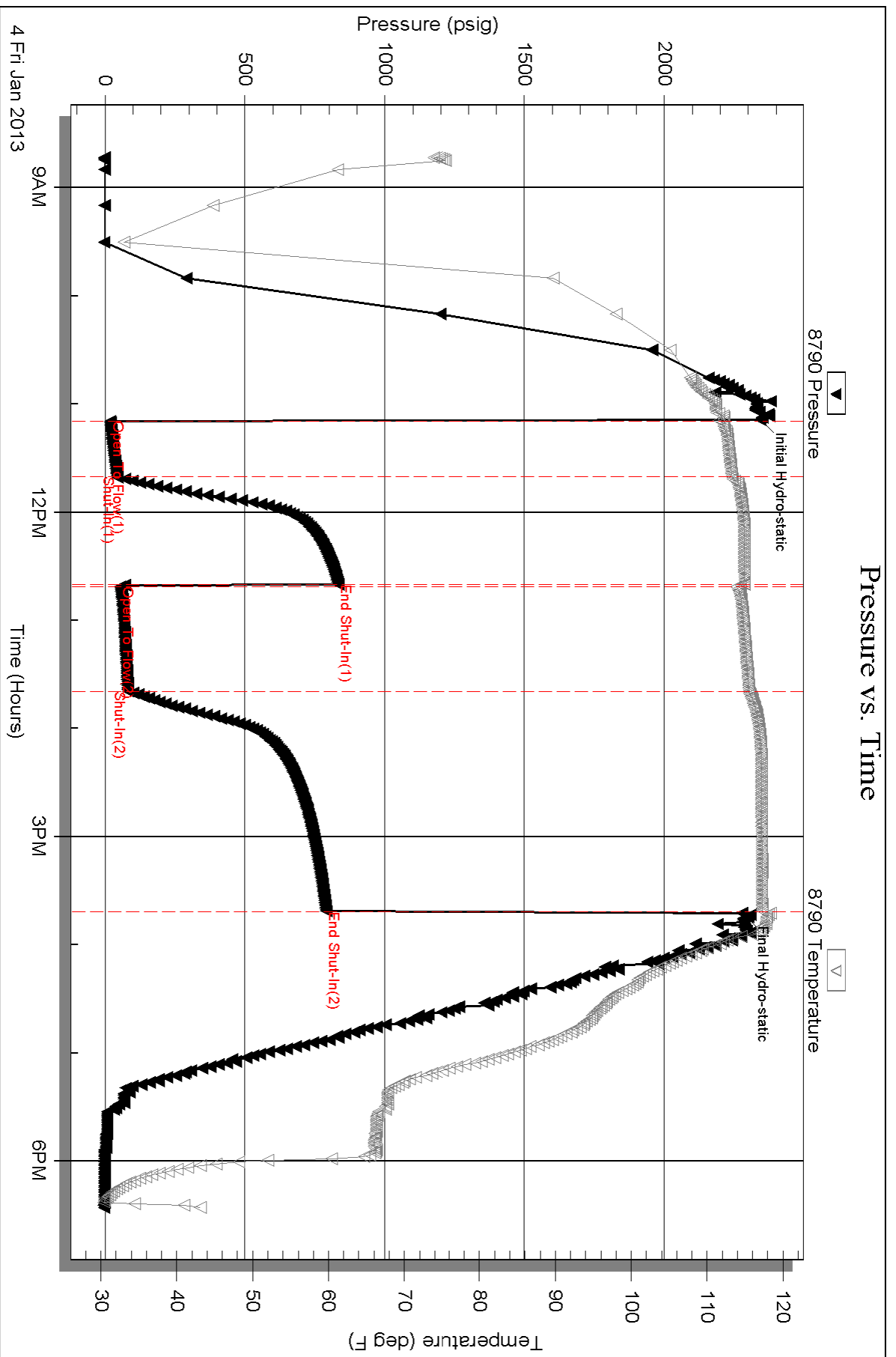
Serial #: 8790

Inside

Vincent Oil Corp.

Peters 1-24

DST Test Number: 1

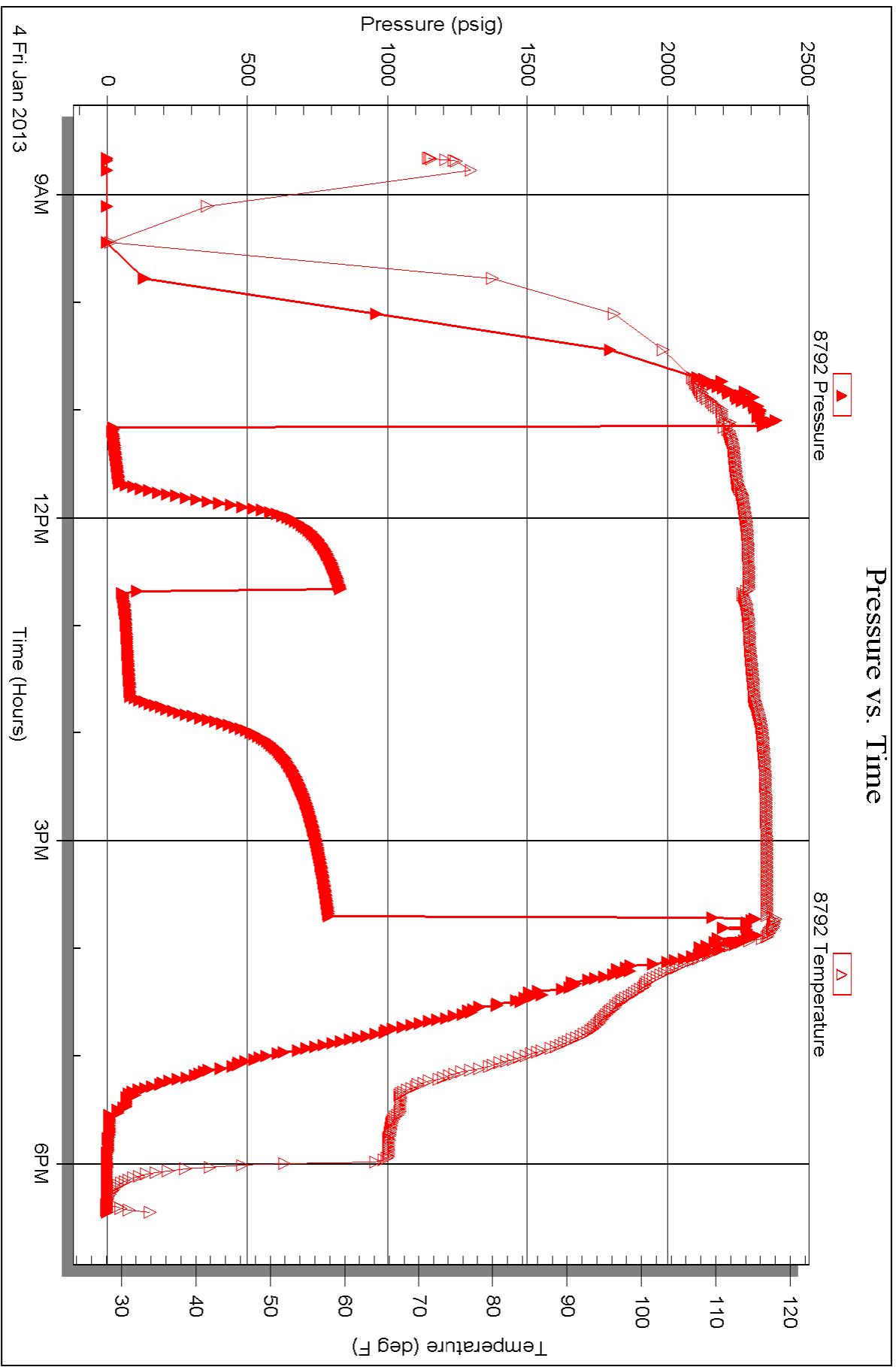


Serial #: 8792

Outside Vincent Oil Corp.

Peters 1-24

DST Test Number: 1





TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Vincent Oil Corp.
 155 N. Market Ste. 700
 Wichita, KS 67202-1821
 ATTN: Ken LeBlanc

24-27s.-24w. Ford. Co. KS
Peters 1-24
 Job Ticket: 49714 **DST#: 2**
 Test Start: 2013.01.05 @ 20:14:39

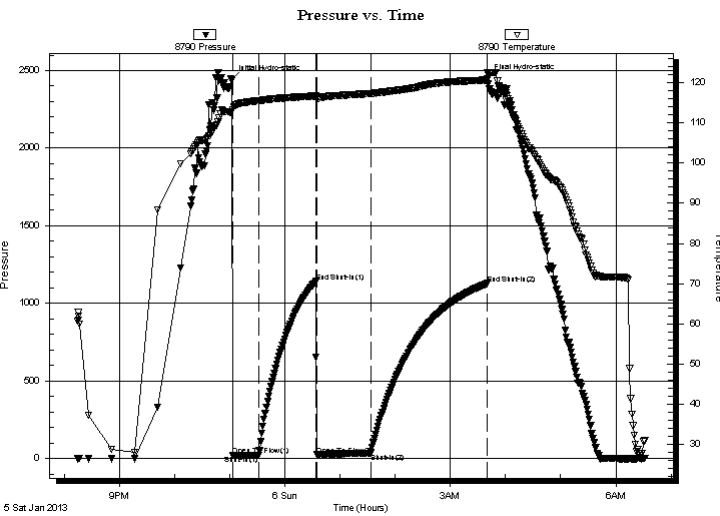
GENERAL INFORMATION:

Formation: **BSL Penn Congl.**
 Deviated: No Whipstock: 0.00 ft (KB)
 Time Tool Opened: 23:03:39
 Time Test Ended: 06:31:54
 Interval: **4950.00 ft (KB) To 4990.00 ft (KB) (TVD)**
 Total Depth: 4990.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole (Reset)
 Tester: Ryan Reynolds
 Unit No: 63
 Reference Elevations: 2469.00 ft (KB)
 2459.00 ft (CF)
 KB to GR/CF: 10.00 ft

Serial #: 8790

Press @ RunDepth: 32.30 psig @ ft (KB) Capacity: 8000.00 psig
 Start Date: 2013.01.05 End Date: 2013.01.06 Last Calib.: 2013.01.06
 Start Time: 20:14:44 End Time: 06:31:54 Time On Btm: 2013.01.05 @ 23:02:09
 Time Off Btm: 2013.01.06 @ 03:40:24

TEST COMMENT: IF: Strong blow . BOB 15sec. No GTS
 IS: No blow
 FF: Strong blow . BOB immed. GTS @ 4min. Guaged gas throughout
 FS: No blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2440.29	112.79	Initial Hydro-static
2	21.66	113.35	Open To Flow (1)
30	20.05	115.54	Shut-In(1)
92	1139.78	116.75	End Shut-In(1)
93	22.58	116.47	Open To Flow (2)
152	32.30	117.35	Shut-In(2)
278	1126.76	120.70	End Shut-In(2)
279	2447.54	122.53	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
1.00	Clean oil 100%oil	0.01
49.00	Drig mud 100%mud	0.69

* Recovery from multiple tests

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
First Gas Rate	0.13	3.00	6.51
Last Gas Rate	0.13	6.00	7.64
Max. Gas Rate	0.13	6.00	7.64



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Vincent Oil Corp.

24-27s.-24w. Ford. Co. KS

155 N. Market Ste. 700
Wichita, KS 67202-1821

Peters 1-24

Job Ticket: 49714

DST#: 2

ATTN: Ken LeBlanc

Test Start: 2013.01.05 @ 20:14:39

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:

5900 ppm

Viscosity: 48.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.79 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 5900.00 ppm

Filter Cake: 0.02 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
1.00	Clean oil 100%oil	0.014
49.00	Drig mud 100%mud	0.687

Total Length: 50.00 ft

Total Volume: 0.701 bbl

Num Fluid Samples: 1

Num Gas Bombs: 1

Serial #: RR-1

Laboratory Name: Caraway

Laboratory Location: Liberal, KS

Recovery Comments:



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

GAS RATES

Vincent Oil Corp.
155 N. Market Ste. 700
Wichita, KS 67202-1821
ATTN: Ken LeBlanc

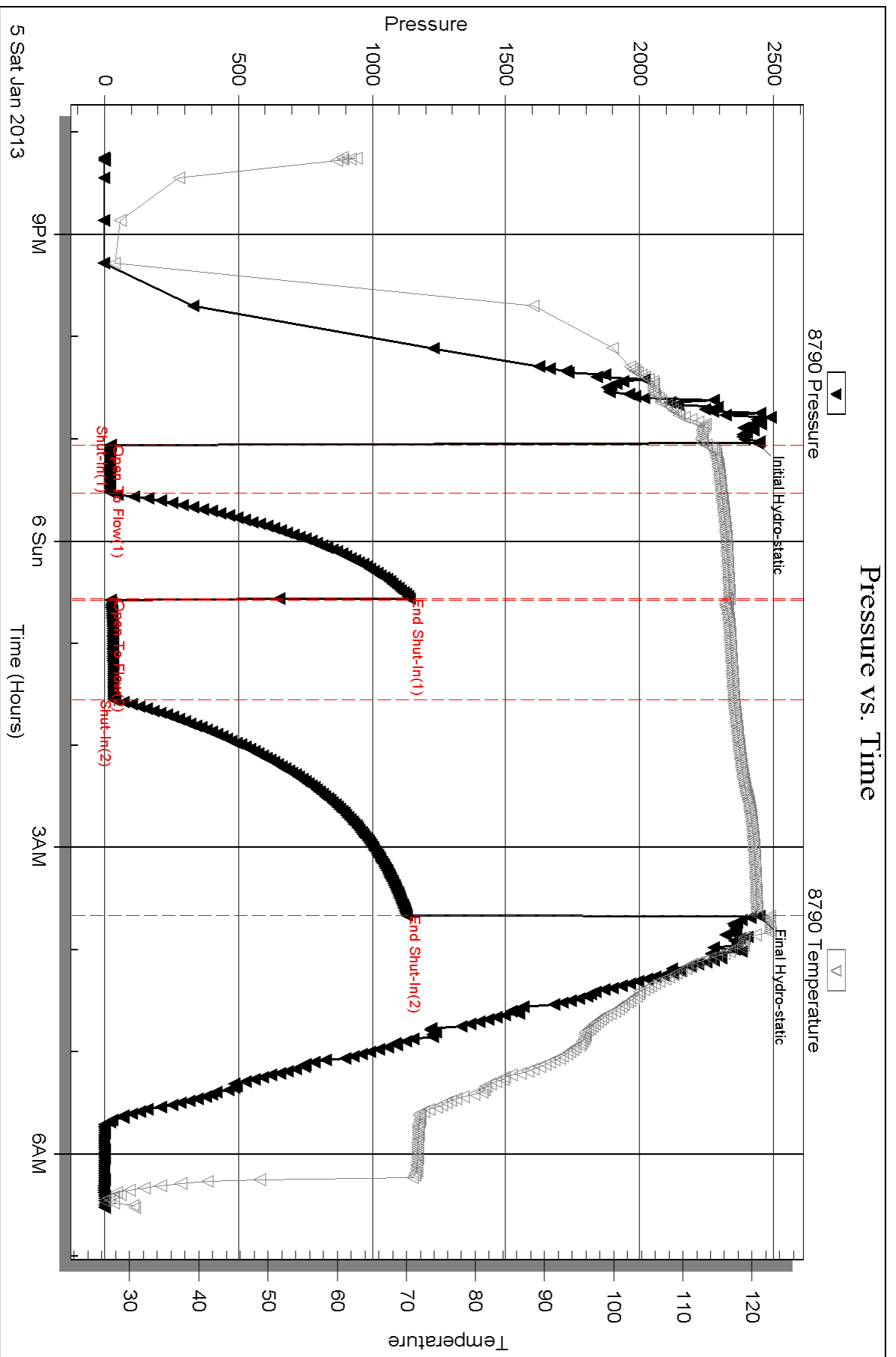
24-27s.-24w. Ford. Co. KS
Peters 1-24
Job Ticket: 49714 **DST#: 2**
Test Start: 2013.01.05 @ 20:14:39

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)
2	10	0.13	3.00	6.51
2	10	0.13	3.00	6.51
2	20	0.13	4.50	7.07
2	30	0.13	5.00	7.26
2	40	0.13	6.00	7.64
2	50	0.13	6.00	7.64





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Vincent Oil Corp.
155 N. Market Ste. 700
Wichita, KS 67202-1821
ATTN: Ken LeBlanc

24-27s.-24w. Ford. Co. KS
Peters 1-24
Job Ticket: 49715 **DST#: 3**
Test Start: 2013.01.06 @ 16:32:11

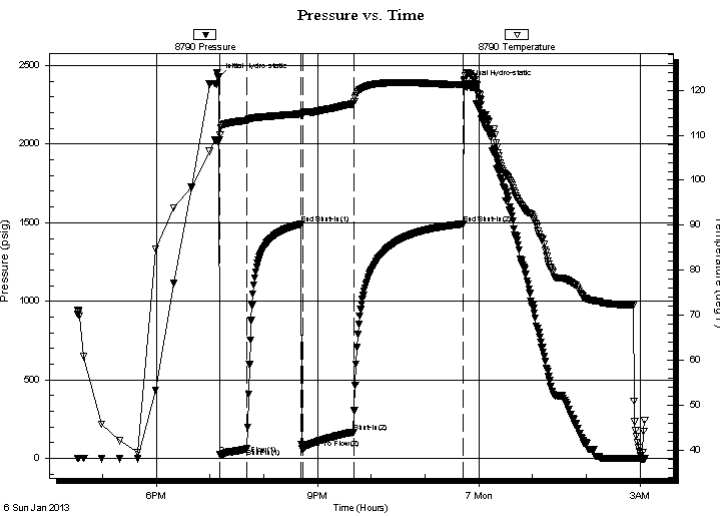
GENERAL INFORMATION:

Formation: **Mississippi**
Deviated: No Whipstock: 0.00 ft (KB)
Time Tool Opened: 19:11:11
Time Test Ended: 03:05:26
Interval: **4990.00 ft (KB) To 5030.00 ft (KB) (TVD)**
Total Depth: 5030.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Fair
Test Type: Conventional Bottom Hole (Reset)
Tester: Ryan Reynolds
Unit No: 63
Reference Elevations: 2469.00 ft (KB)
2459.00 ft (CF)
KB to GR/CF: 10.00 ft

Serial #: 8790

Press @ Run Depth: 165.68 psig @ ft (KB) Capacity: 8000.00 psig
Start Date: 2013.01.06 End Date: 2013.01.07 Last Calib.: 2013.01.07
Start Time: 16:32:16 End Time: 03:05:26 Time On Btm: 2013.01.06 @ 19:09:56
Time Off Btm: 2013.01.06 @ 23:43:41

TEST COMMENT: IF: Strong blow . BOB 1min. GTS @ 22min. Guaged gas
IS: Weak surf. blow . Dead @ 15min.
FF: Strong blow . BOB immed. Guaged gas
FS: Strong blow . BOB 3min. (after thorough bleed-off)



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2425.88	108.74	Initial Hydro-static
2	25.46	110.08	Open To Flow (1)
31	61.88	113.27	Shut-In(1)
92	1490.94	114.75	End Shut-In(1)
94	61.61	114.68	Open To Flow (2)
150	165.68	116.95	Shut-In(2)
273	1492.76	121.17	End Shut-In(2)
274	2377.57	122.15	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
20.00	GMCW 3%gas, 7% mud, 90%w tr	0.28
115.00	WOCGM 5%w tr, 15%oil, 20%gas, 60%w tr	1.61
105.00	SLI OWCGM 3%oil, 5%w tr, 22%gas, 70%w tr	1.47

* Recovery from multiple tests

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
First Gas Rate	0.13	8.00	8.38
Last Gas Rate	0.13	56.00	26.35
Max. Gas Rate	0.13	56.00	26.35



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Vincent Oil Corp.

24-27s.-24w. Ford. Co. KS

155 N. Market Ste. 700
Wichita, KS 67202-1821

Peters 1-24

Job Ticket: 49715

DST#: 3

ATTN: Ken LeBlanc

Test Start: 2013.01.06 @ 16:32:11

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:

60000 ppm

Viscosity: 95.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 11.99 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 8700.00 ppm

Filter Cake: 0.02 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
20.00	GMCW 3%gas, 7%mud, 90%w tr	0.281
115.00	WOCGM 5%w tr, 15%oil, 20%gas, 60%mud	1.613
105.00	SLI OWCGM 3%oil, 5%w tr, 22%gas, 70% muc	1.473

Total Length: 240.00 ft

Total Volume: 3.367 bbl

Num Fluid Samples: 1

Num Gas Bombs: 1

Serial #: RR-2

Laboratory Name: Caraway

Laboratory Location: Liberal, KS

Recovery Comments:



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

GAS RATES

Vincent Oil Corp.
155 N. Market Ste. 700
Wichita, KS 67202-1821
ATTN: Ken LeBlanc

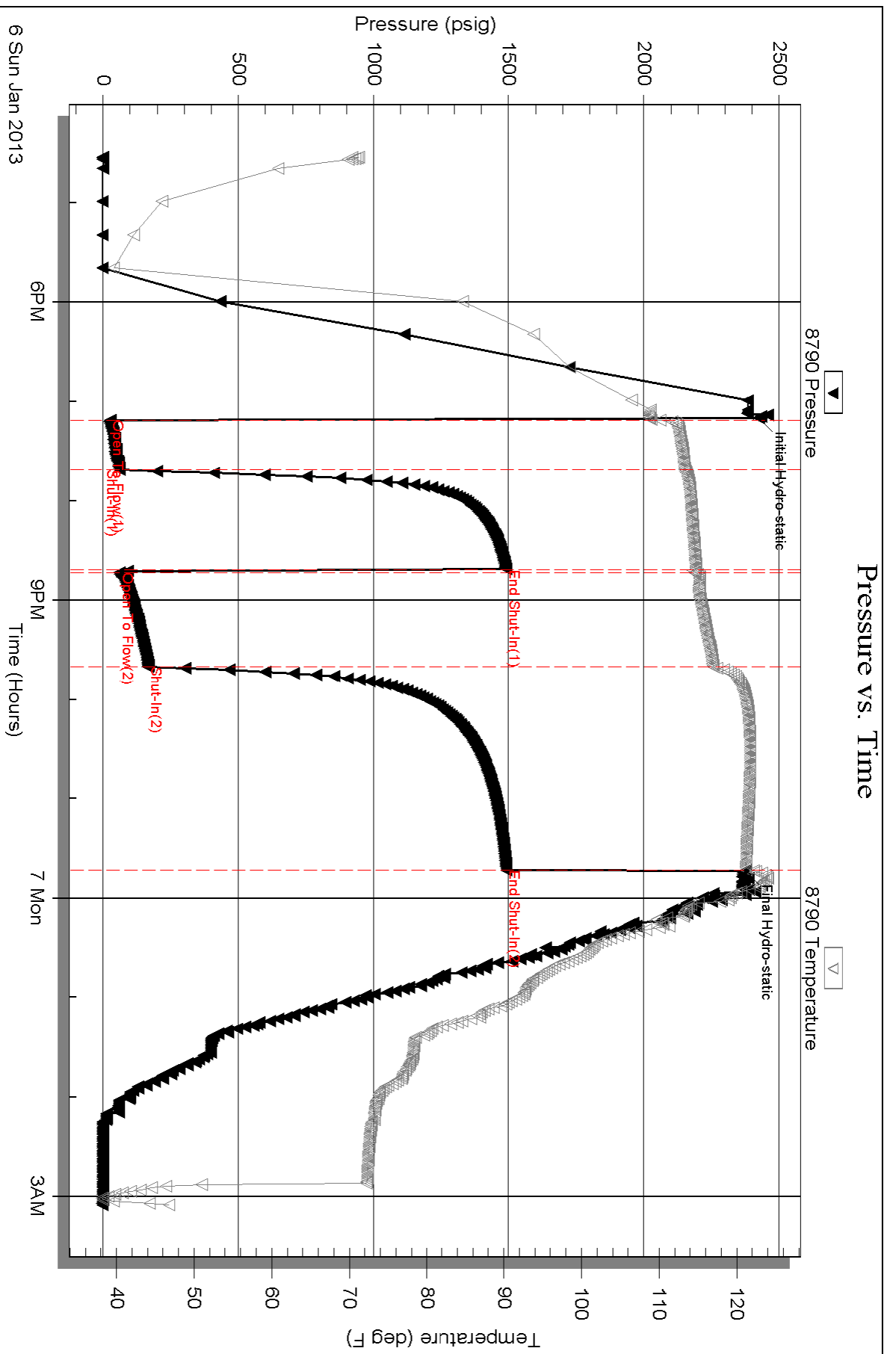
24-27s.-24w. Ford. Co. KS
Peters 1-24
Job Ticket: 49715 **DST#: 3**
Test Start: 2013.01.06 @ 16:32:11

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	30	0.13	8.00	8.38
1	30	0.13	8.00	8.38
2	10	0.13	16.00	11.38
2	20	0.13	28.00	15.87
2	30	0.13	35.00	18.49
2	40	0.13	43.00	21.48
2	50	0.13	50.00	24.10
2	60	0.13	56.00	26.35



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 19, 2013

M.L. Korphage
Vincent Oil Corporation
155 N MARKET STE 700
WICHITA, KS 67202-1821

Re: ACO1
API 15-057-20868-00-00
Peters 1-24
NW/4 Sec.24-27S-24W
Ford 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,
M.L. Korphage