



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1136707
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: _____



1136707

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: 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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Anderson Energy, Inc.
Well Name	Pelton A 1
Doc ID	1136707

Tops

Name	Top	Datum
Anhydrite	1467	+670
Topeka	3083	-946
Heebner	3300	-1163
Toronto	3321	-1184
Lansing	3340	-1203
BKC	3550	-1413
Conglomerate	3603	-1466
Arbuckle	3664	-1527
LTD	3738	-1601

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

Bill Anderson
Anderson Energy, Inc.
300 W DOUGLAS AVE, STE 410
WICHITA, KS 67202

Re: ACO1
API 15-163-24095-00-00
Pelton A 1
SW/4 Sec.23-10S-19W
Rooks 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,
Bill Anderson

ALLIED OIL & GAS SERVICES, LLC 056074

Federal Tax I.D.# 20-5975804

Well file

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

SERVICE POINT:

Russell, KS

DATE	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
12-8-12	23	10	17				
EASE <u>Belton A</u>	WELL # <u>1</u>	LOCATION <u>Hays, KS</u>			COUNTY <u>Rebo</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)	<u>4.5W 2.0 1.5W 2.5N east into</u>						

CONTRACTOR Southwind Drilling OWNER 2-01

TYPE OF JOB Surface
 HOLE SIZE 13.41 T.D. 281'
 CASING SIZE 8.50 DEPTH 279.13'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 RES. MAX _____ MINIMUM _____
 WEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT 16.82 bbl
 EQUIPMENT _____

CEMENT AMOUNT ORDERED 170sk Class A -
3% cc 2% gel

PUMP TRUCK CEMENTER Tony P.
409 HELPER Kevin Bann
 BULK TRUCK DRIVER WALTER KERR
 BULK TRUCK DRIVER Walter D.

COMMON	<u>170sk</u>	@ <u>17.90</u>	<u>\$3,043.00</u>
POZMIX		@	
GEL	<u>3sk</u>	@ <u>23.40</u>	<u>\$70.20</u>
CHLORIDE	<u>6sk</u>	@ <u>64.00</u>	<u>\$384.00</u>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>183.51</u>	@ <u>2.48</u>	<u>\$455.11</u>
MILEAGE	<u>209.50</u>	<u>1/10</u>	<u>2.60</u>
			<u>\$544.70</u>
			TOTAL <u>\$4,497.01</u>

REMARKS:

* Circulate mud to surface.
 * Pump out (2) 40.57 bbl
170 sk Class A.
 * Displace out @ 16.82 bbl
to surface.
 * Shut in @ 200 psi. 11/12/12

SERVICE

DEPTH OF JOB	<u>279.13'</u>		
PUMP TRUCK CHARGE			<u>\$1,512.25</u>
EXTRA FOOTAGE		@	
MILEAGE Heavy 25mils	@ <u>7.70</u>		<u>\$192.50</u>
MANIFOLD Light 25mils	@ <u>4.40</u>		<u>\$110.00</u>
		@	
		@	
			TOTAL <u>\$1,814.75</u>

CHARGE TO: Anderson Energy
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
			TOTAL _____

To: Allied Oil & Gas Services, 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.

PRINTED NAME Derby Reever
 SIGNATURE Derby Reever

SALES TAX (If Any)	<u>220.32</u>		
TOTAL CHARGES	<u>\$6,311.76</u>		
DISCOUNT	<u>\$1,729.42</u>	IF PAID IN 30 DAYS	
			<u>Net 4582.34 B/S 12-10</u>
			<u>before tax</u>



ALLIED OIL & GAS SERVICES, LLC 056079

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell, Ks

DATE <u>12-18-12</u>	SEC. <u>23</u>	TWP. <u>10</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>4:30 AM</u>	JOB FINISH <u>6:00 AM</u>
LEASE <u>Patton A</u>	WELL # <u>1</u>	LOCATION <u>Hayes, Ks</u>			COUNTY <u>Books</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one)		North to surface of 4.5w 2.1.5w 2.5w each into					

CONTRACTOR <u>Southern Drilling</u>	OWNER
TYPE OF JOB <u>Plug</u>	
HOLE SIZE <u>7 7/8"</u>	T.D. <u>3643'</u>
CASING SIZE	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE <u>4 1/2"</u>	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	

EQUIPMENT	
PUMP TRUCK	CEMENTER <u>Tommy P. Bob Sr.</u>
# <u>409</u>	HELPER <u>Kevin R</u> 3
BULK TRUCK	
# <u>410</u>	DRIVER <u>Debrahn T.</u> 3
BULK TRUCK	
#	DRIVER

REMARKS:

* PL1 = 3643' @ 25 sks - Dis 5.45 ^{5/12} mud

* PL2 = 1780' @ 25 sks - Dis 19.40 ^{5/12} mud

* PL3 = 860' @ 100 sks - Dis 5.6 ^{5/12} mud

* PL4 = 332' @ 100 sks - Dis 2 ^{5/12} mud

* PL5 = 10 sks @ 40' - wooden plug

cut to surface -

* RATHOLE = 30sk

* MUD HOLE = 15sk

CHARGE TO: Anderson Energy Inc.

STREET _____

CITY _____ STATE _____ ZIP _____

To: Allied Oil & Gas Services, 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.

PRINTED NAME Derby Reeves

SIGNATURE [Signature]

CEMENT	
AMOUNT ORDERED	<u>245sk 60/10</u>
	<u>4% gel 1/4 # 40-50</u>
COMMON	<u>147sk @ 17.90 \$2,631.30</u>
POZMIX	<u>98sk @ 9.35 \$916.30</u>
GEL	<u>9sk @ 23.40 \$210.60</u>
CHLORIDE	@
ASC	<u>Flt - Seal @</u>
	<u>3 bags @ 2.54 = 7.62 @ 2.97 \$222.75</u>
	@
	@
	@
	@
	@
	@
HANDLING	<u>265 ^{5/12} @ 2.48 \$657.20</u>
MILEAGE	<u>286.585 ^{1/10} @ 2.60 \$745.12</u>
TOTAL	<u>\$5,383.27</u>

SERVICE	
DEPTH OF JOB	<u>3643'</u>
PUMP TRUCK CHARGE	<u>\$2,600.47</u>
EXTRA FOOTAGE	@
MILEAGE	<u>Heavy 26 miles @ 7.70 \$200.20</u>
MANIFOLD	<u>Light 16 miles @ 4.40 \$114.40</u>
	@
	@
TOTAL	<u>\$2,915.07</u>

PLUG & FLOAT EQUIPMENT	
1 wooden plug	@ \$107.64
	@
	@
	@
	@
TOTAL	<u>\$107.64</u>

SALES TAX (If Any) 529.57

TOTAL CHARGES \$8,405.98

DISCOUNT \$2,775.92

IF PAID IN 30 DAYS
BS 12-19
5632.01

before tax

Anderson Energy, Inc.
DST Report
Pelton A #1

DST #1 3100-22' Topeka 30' Zone. 30-45-60-60. IF: BOB in 25#. FF: BOB in 30#. No blowback. Recovered 25' GIP, 88' Slightly Oily Mud Cut Water (3% O, 22% M & 75% W), and 126' Very Slightly Oil and Mud Cut Water (2% O, 8% M & 90% W). IFP 9-46# FFP 49-115# ISIP 829# FSIP 809#.

3400' DST #2 3296-3408' Lansing B, C, & D. 30-45-60-60 BOB in 1-1/2" 1st open, BOB in 2-1/2" 2nd open. Recovered 30' Mud, 126' SLOCWM (7% O 21% W 72% M), 441' GSLOCWM (9% G 10% O 39% W 42% M) & 693' OSGMW (5% G 2% O 73% W 20% M) IFP 81-334# FFP 361-624# ISIP 842# FSIP 837#

DST #3 3420-33' Lansing F. 30-45-60-60 IF BOB in 1.25". FF BOB in 1.75". Recovered 262' SLOCMW (1% O 26% M 73% W) & 1575' SLMCW (5% M 95% W) IFP 80-661# FFP 667-905# ISIP 914# FSIP 925#.

DST #4 3453-3552' Lansing H, I, J & K 30-45-60-60 IF: 1/2" blow building to 8". ISI: No blowback. FF: 1/4" blow building to 10-1/2". Recovered 102' WM (22% W 78% M) & 63' SOSMW (1% O 56% W 43% M) IFP 26-40# FFP 43-88# ISIP 957# FSIP 913#.

DST #5 3542-3624' Conglomerate 30-45-30-45 IF: 3/4" blow built to 2-1/4" in 30 min. FF: No blow. Recovered 30" Mud w/oil specks. IFP 12-18# FFP 21-21# ISIP 834# FSIP 520#.
DST #6 3542-3669' 30-45-60-60. Arbuckle IF 2-1/2" built to BOB in 30 Min. FF: 3/4" built to BOB in 52 min. Recovered 157' SLOCM (5% O 95% M) & 63' SLWHOCM (32% O 8% W 60% M) IFP 21-59# FFP 66-121# ISIP 1063# FSIP 994#.

DST #7 3669-81' Arbuckle 30-45-60-60 IF: 4" blow building to BOB in 1 min. FF: 4" blow building to BOB in 1-1/4 min. Recovered 361' MCW (69% W 31% M) & 2205' SIMCW (97% W 3% M) IFP 110-867# FFP 875-1148# ISIP 1150# FSIP 1156#.



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.

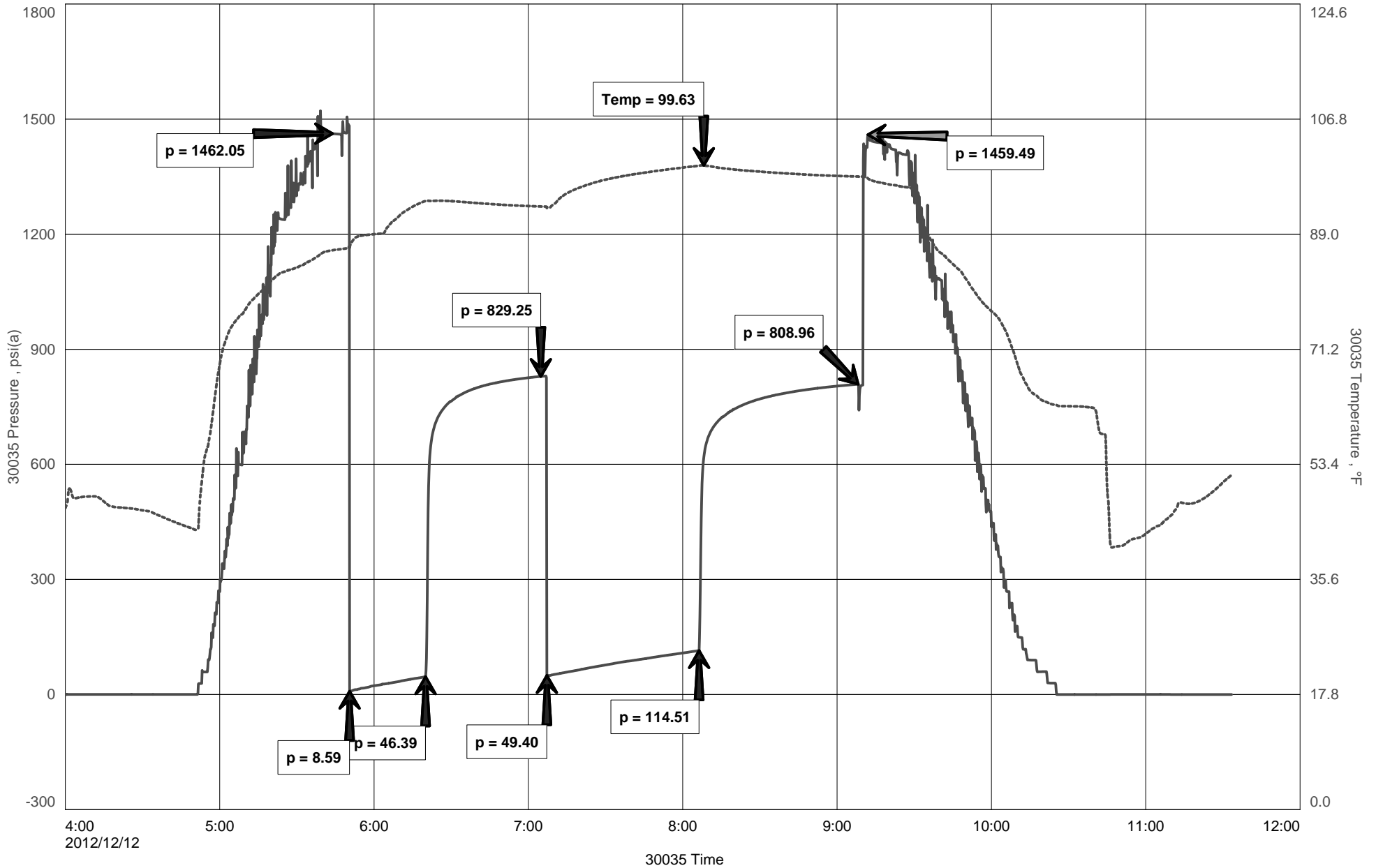
Blow: 1st Open: _____
2nd Open: _____

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.

Pelton "A" #1



Diamond Testing

General information Report

General Information

Company Name Anderson Energy Inc.

Contact	Bill Anderson	Job Number	S0254
Well Name	Pelton "A" #1	Representative	Jacob McCallie
Unique Well ID	DST #1 Topeka 3100-3122'	Well Operator	Anderson Energy Inc.
Surface Location	SEC 23-10S-19W Rooks County	Report Date	2012/12/12
Well License Number		Prepared By	Jacob McCallie
Field	Wildcat		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #1 Topeka 3100-3122'		
Well Fluid Type	06 Water	Start Test Time	04:00:00
		Final Test Time	11:34:00
Start Test Date	2012/12/12		
Final Test Date	2012/12/12		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

25'	GIP			
10'	CO	100% CO		GRAVITY: 32 @ 60 degrees F
88'	OSMCW	3% O 75% W 22% M		
126'	OSSLMCW	2% O 90%W 8% M		
224'	TOTAL FLUID			

PH: 7

RW: .1 @ 45 degrees F

Chlorides: 150,000 ppm

TOOL SAMPLE:

2% O 97% W 1% 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.



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.

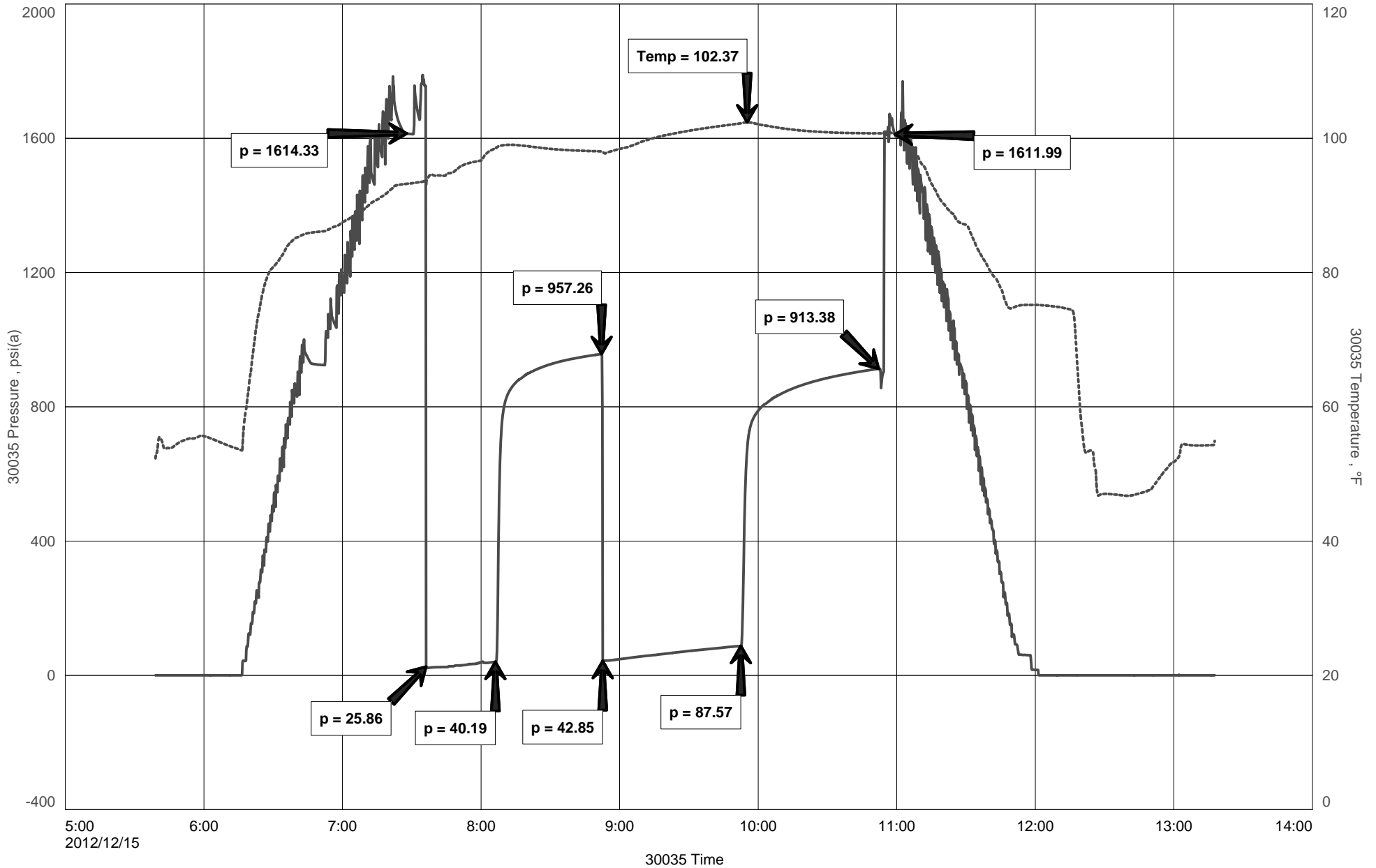
Blow: 1st Open: _____
2nd Open: _____

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.

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Pelton "A" #1



Diamond Testing

General information Report

General Information

Company Name Anderson Energy Inc.

Contact	Bill Anderson	Job Number	S0257
Well Name	Pelton "A" #1	Representative	Jacob McCallie
Unique Well ID	DST #4 Lansing H-K 3453-3552'	Well Operator	Anderson Energy Inc.
Surface Location	SEC 23-10S-19W Rooks County	Report Date	2012/12/15
Well License Number		Prepared By	Jacob McCallie
Field	Wildcat		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #4 Lansing H-K 3453-3552'		
Well Fluid Type	06 Water	Start Test Time	05:39:00
		Final Test Time	13:18:00
Start Test Date	2012/12/15		
Final Test Date	2012/12/15		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

102'	WM	22% W 78% M
63'	SOSMW	1% O 56% W 44% M
165'	TOTAL FLUID	

PH: 7

RW: .13 @ 50 degrees F

Chlorides: 82,000 ppm

TOOL SAMPLE:

1% O 46% W 53% 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: _____	

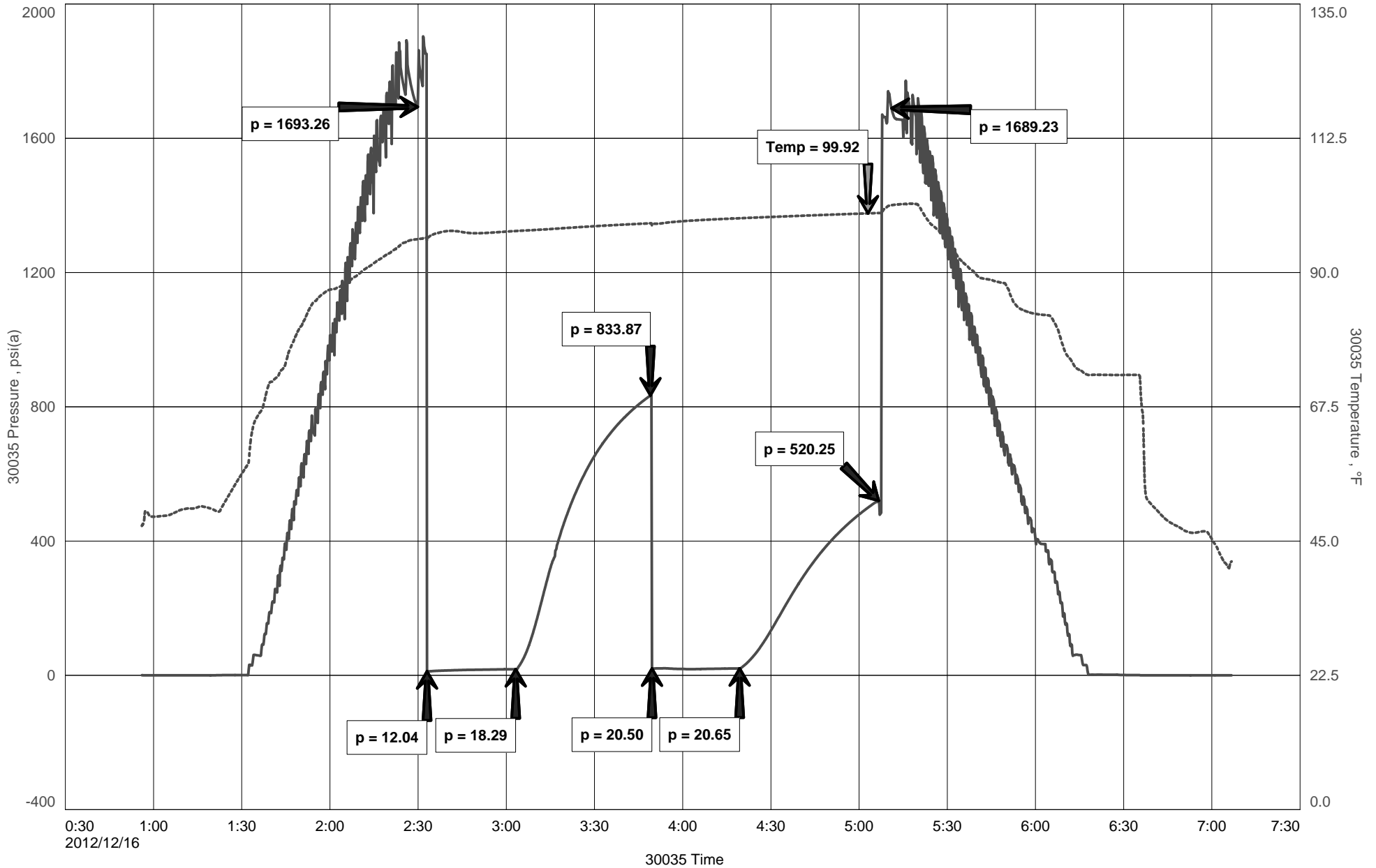
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

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Anderson Energy Inc.
DST #5 Cong. 3542-3624'
Start Test Date: 2012/12/16
Final Test Date: 2012/12/16

Pelton "A" #1
Formation: DST #5 Cong. 3542-3624'
Pool: Wildcat
Job Number: S0258

Pelton "A" #1



Diamond Testing

General information Report

General Information

Company Name Anderson Energy Inc.

Contact	Bill Anderson	Job Number	S0258
Well Name	Pelton "A" #1	Representative	Jacob McCallie
Unique Well ID	DST #5 Cong. 3542-3624'	Well Operator	Anderson Energy Inc.
Surface Location	SEC 23-10S-19W Rooks County	Report Date	2012/12/16
Well License Number		Prepared By	Jacob McCallie
Field	Wildcat		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #5 Cong. 3542-3624'		
Well Fluid Type	01 Oil	Start Test Time	00:56:00
		Final Test Time	07:08:00
Start Test Date	2012/12/16		
Final Test Date	2012/12/16		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:
30' Mud 100% Mud (few oil specks)

TOOL SAMPLE:
100% Mud (few oil specks)



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

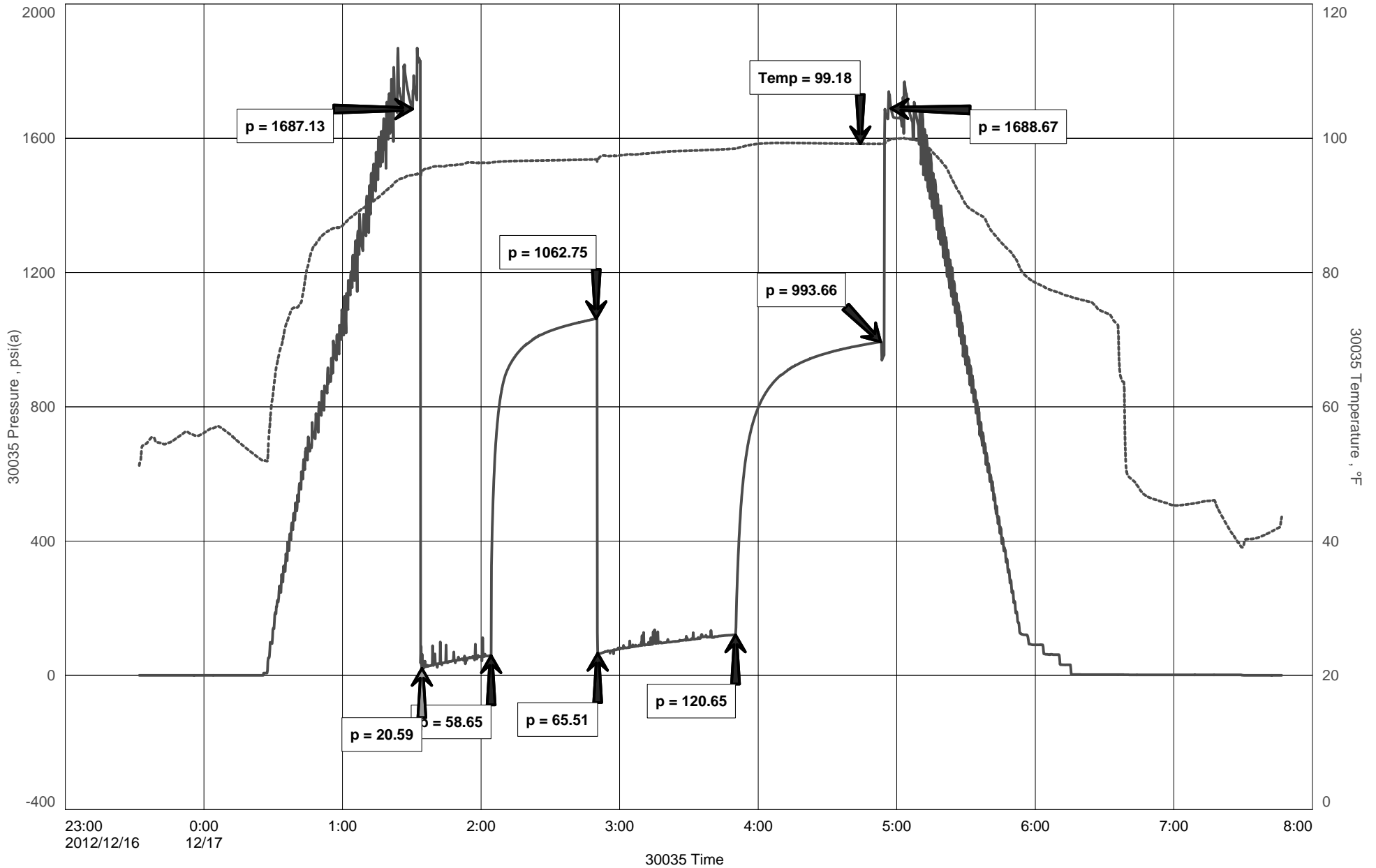
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

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Anderson Energy Inc.
DST #6 Arbuckle 3542-3669'
Start Test Date: 2012/12/16
Final Test Date: 2012/12/17

Pelton "A" #1
Formation: DST #6 Arbuckle 3542-3669'
Pool: Wildcat
Job Number: S0259

Pelton "A" #1



Diamond Testing

General information Report

General Information

Company Name Anderson Energy Inc.

Contact	Bill Anderson	Job Number	S0259
Well Name	Pelton "A" #1	Representative	Jacob McCallie
Unique Well ID	DST #6 Arbuckle 3542-3669'	Well Operator	Anderson Energy Inc.
Surface Location	SEC 23-10S-19W Rooks County	Report Date	2012/12/17
Well License Number		Prepared By	Jacob McCallie
Field	Wildcat		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #6 Arbuckle 3542-3669'		
Well Fluid Type	01 Oil	Start Test Time	23:32:00
		Final Test Time	07:47:00
Start Test Date	2012/12/16		
Final Test Date	2012/12/17		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

157'	SLOCM	5% O 95% M
63'	SLWHOCM	32% O 8% W 60% M
220'	TOTAL FLUID	

TOOL SAMPLE:

12% G 29% O 10% W 49% 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.

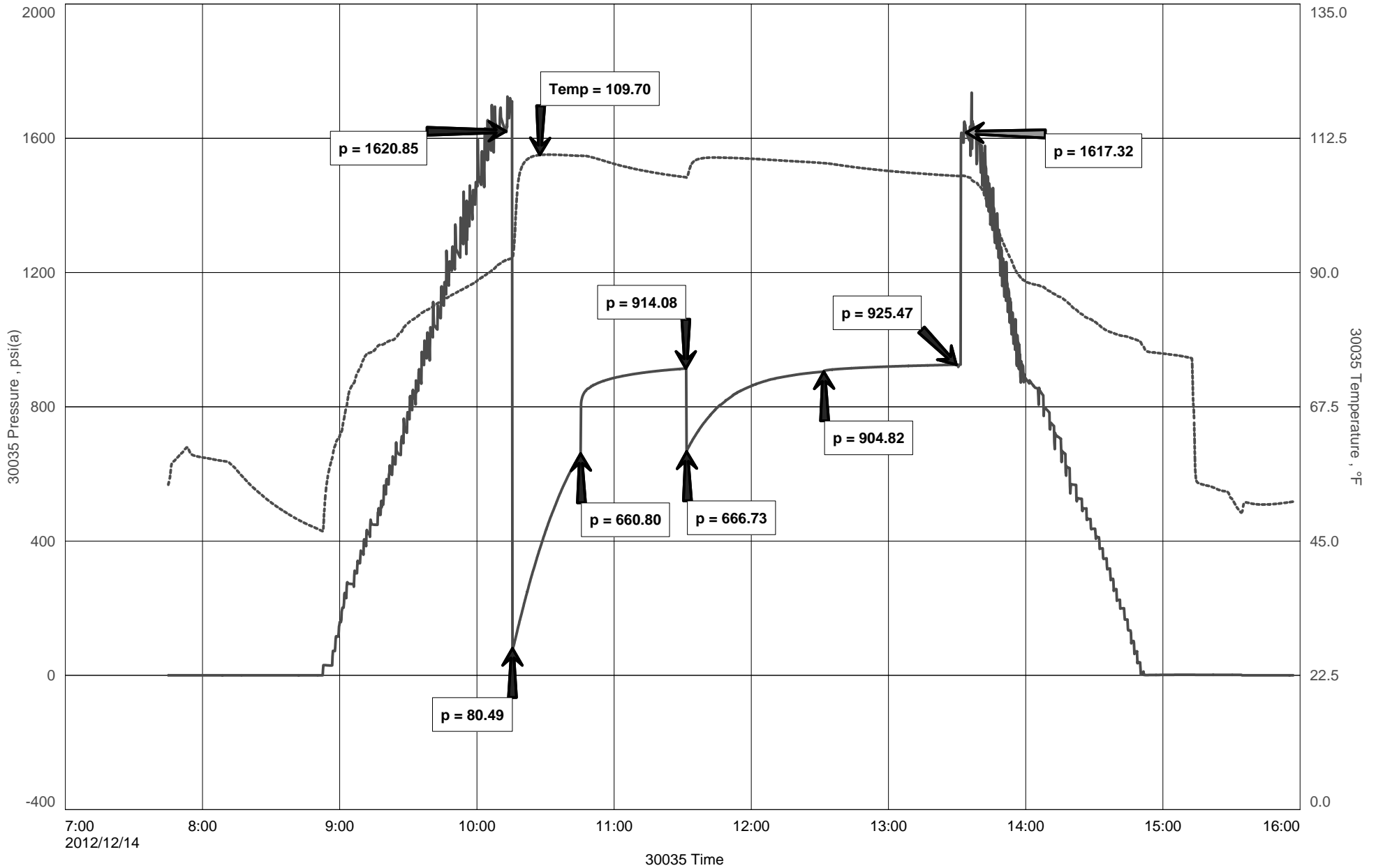
Blow: 1st Open: _____
 2nd Open: _____

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.

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Pelton "A" #1



Diamond Testing

General information Report

General Information

Company Name Anderson Energy Inc.

Contact	Bill Anderson	Job Number	S0256
Well Name	Pelton "A" #1	Representative	Jacob McCallie
Unique Well ID	DST #3 Lansing E-F 3420-3433'	Well Operator	Anderson Energy Inc.
Surface Location	SEC 23-10S-19W Rooks County	Report Date	2012/12/14
Well License Number		Prepared By	Jacob McCallie
Field	Wildcat		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #3 Lansing E-F 3420-3433'		
Well Fluid Type	01 Oil	Start Test Time	07:45:00
		Final Test Time	15:58:00
Start Test Date	2012/12/14		
Final Test Date	2012/12/14		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

262'	SLOSMW	1% O 73% W 26% M
1575'	SLMCW	95% W 5% M
1837'	TOTAL FLUID	

PH: 7

RW: .08 @ 52 degrees F

Chlorides: 150,000 ppm

TOOL SAMPLE:

99% W 1% 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: _____	

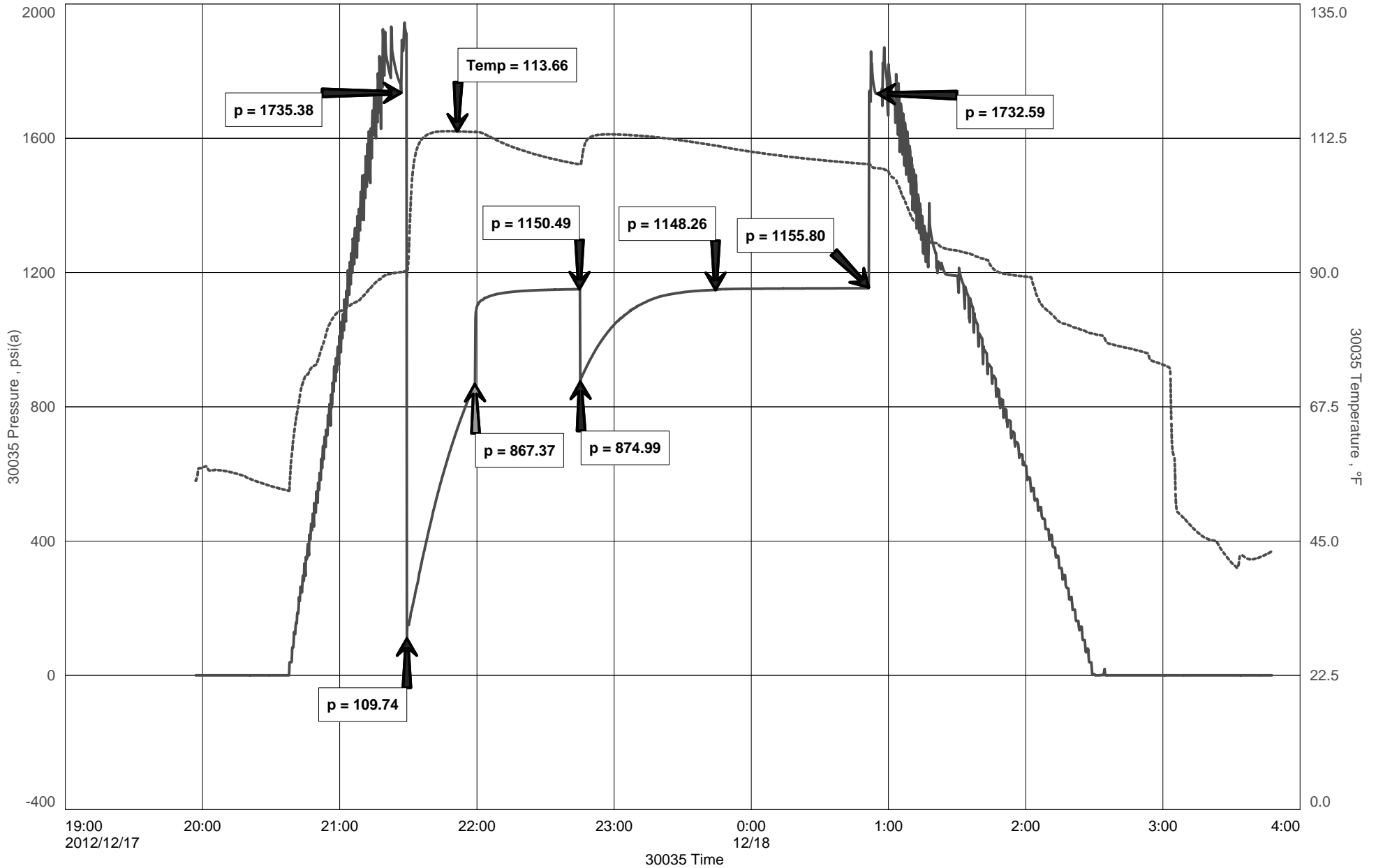
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

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Anderson Energy Inc.
DST #7 Arbuckle 3669-3681'
Start Test Date: 2012/12/17
Final Test Date: 2012/12/18

Pelton "A" #1
Formation: DST #7 Arbuckle 3669-3681'
Pool: Wildcat
Job Number: S0260

Pelton "A" #1



Diamond Testing

General information Report

General Information

Company Name Anderson Energy Inc.

Contact	Bill Anderson	Job Number	S0260
Well Name	Pelton "A" #1	Representative	Jacob McCallie
Unique Well ID	DST #7 Arbuckle 3669-3681'	Well Operator	Anderson Energy Inc.
Surface Location	SEC 23-10S-19W Rooks County	Report Date	2012/12/18
Well License Number		Prepared By	Jacob McCallie
Field	Wildcat		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #7 Arbuckle 3669-3681'		
Well Fluid Type	06 Water	Start Test Time	19:57:00
		Final Test Time	03:49:00
Start Test Date	2012/12/17		
Final Test Date	2012/12/18		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

361'	MCW	69% W 31% M (trace oil)
2205'	SLMCW	97% W 3% M
2566'	TOTAL FLUID	

PH: 7
RW: .38 @ 50 degrees F
Chlorides: 23,000 ppm

TOOL SAMPLE:
99% W 1% M (trace oil)