



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1151439
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: _____



1151439

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	Mull Drilling Company, Inc.
Well Name	Garvey 'C' 1-18
Doc ID	1151439

All Electric Logs Run

CDL/CNI/PE
DIL
Micro
Sonic

Form	ACO1 - Well Completion
Operator	Mull Drilling Company, Inc.
Well Name	Garvey 'C' 1-18
Doc ID	1151439

Tops

Name	Top	Datum
Anhydrite	1890	+ 575
B/Anhydrite	1928	+ 537
Heebner Shale	3688	- 1223
Lansing	3729	- 1264
Stark Shale	3968	- 1503
B/KC	4021	- 1556
Marmaton	4073	- 1608
Pawnee	4169	- 1704
Ft. Scott	4226	- 1761
Cherokee Shale	4252	- 1787
Mississippian	4321	- 1856

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

July 12, 2013

Mark Shreve
Mull Drilling Company, Inc.
1700 N WATERFRONT PKWY
BLDG 1200
WICHITA, KS 67206-6637

Re: ACO1
API 15-063-22097-00-00
Garvey 'C' 1-18
NW/4 Sec.18-15S-26W
Gove 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,
Mark Shreve



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
3/29/2013	24167

BILL TO
Mull Drilling Co. Inc. P. O. Box 504 Ness City, KS 67560-0504

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#1-18	Garvey C	Gove	WW Drilling #10	Oil	Development	Cement 5-1/2" L...	David
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way				45	Miles	6.00	270.00
578D-L	Pump Charge - Long String				1	Job	1,500.00	1,500.00
400-5	5 1/2" Guide Shoe				1	Each	160.00	160.00T
402-5	5 1/2" Centralizer				11	Each	70.00	770.00T
403-5	5 1/2" Cement Basket				1	Each	250.00	250.00T
415-5	5 1/2" Insert Float Collar With Fill-Up				1	Each	400.00	400.00T
404-5	5 1/2" Port Collar				1	Each	2,400.00	2,400.00T
410-5	5 1/2" Top Plug				1	Each	100.00	100.00T
419-5	5 1/2" Rotating Head Rental				1	Each	200.00	200.00T
413-5	5 1/2" Roto Wall Scratcher				15	Each	40.00	600.00T
327	50/50 Pozmix (2% Gel)				200	Sacks	10.00	2,000.00T
283	Salt				950	Lb(s)	0.20	190.00T
286	Halad-1 (Halad 9)				100	Lb(s)	7.50	750.00T
276	Flocele				50	Lb(s)	2.00	100.00T
290	D-Air				3	Gallon(s)	35.00	105.00T
280	Flocheck 21				1 000	Gallon(s)	2.50	2,500.00T
221	Liquid KCL (Clayfix)				2	Gallon(s)	25.00	50.00T
581D	Service Charge Cement				200	Sacks	2.00	400.00
583D	Drayage				3 '9.8	Ton Miles	1.00	379.80
	Subtotal							13,124.80
	Sales Tax Gove County						8.05%	851.29

We Appreciate Your Business!

Total

\$13,976.09



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
4/4/2013	24172

BILL TO
Mull Drilling Co. Inc. P. O. Box 504 Ness City, KS 67560-0504

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#1-18	Garvey C	Gove	H-D Oilfield Servi...	Oil	Development	Cement Port Collar	Blaine
PRICE REF.	DESCRIPTION				QT	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way				50	Miles	6.00	300.00
576D-D	Pump Charge - Port Collar				1	Job	1,250.00	1,250.00
330	Swift Multi-Density Standard (MIDCON II)				160	Sacks	16.50	2,640.00T
276	Floce/c				50	Lb(s)	2.00	100.00T
290	D-Air				2	Gallon(s)	35.00	70.00T
581D	Service Charge Cement				:00	Sacks	2.00	400.00
583D	Drayage				49.55	Ton Miles	1.00	497.55
	Subtotal							5,257.55
	Sales Tax Gove Co						8.05%	226.21
We Appreciate Your Business!							Total	\$5,483.76

Invoice



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



DATE	INVOICE #
4/25/2013	24324

BILL TO
Mull Drilling Co. Inc. P. O. Box 504 Ness City, KS 67560-0504

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	*1-18	Garvey C	Gove		Oil	Development	Squeeze Perfs	Don
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way				50	Miles	6.00	300.00
578D-D	Pump Charge - Deep Squeeze (> 1500 Ft.) - 4328 Fet				1	Job	1,500.00	1,500.00
290	D-Air				1	gallon(s)	35.00	35.00
325	Standard Cement				60	bags	13.50	810.00
286	Halad-1 (Halad 9)				25	bags	7.50	187.50
581D	Service Charge Cement				100	bags	2.00	200.00
582D	Minimum Drayage Charge				1	bag	250.00	250.00
	Subtotal							3,282.50
	Sales Tax Gove County						8.05%	83.12
We Appreciate Your Business!							Total	\$3,365.62



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

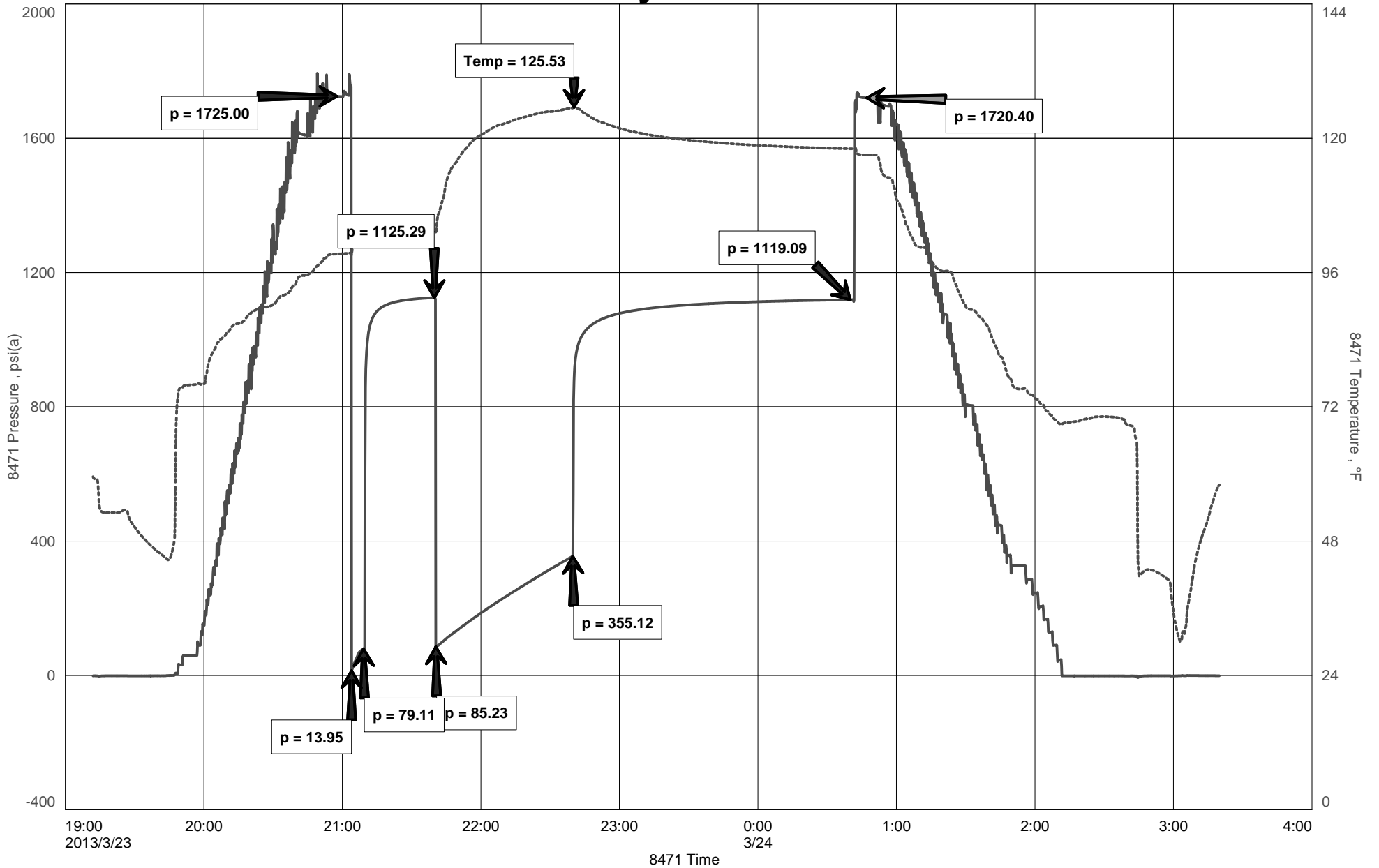
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

Mull Drilling Co. Inc.
DST #1 Lansing "A" 3720-3750'
Start Test Date: 2013/03/23
Final Test Date: 2013/03/24

Garvey "C" #1-18
Formation: DST #1 Lansing "A" 3720-3750'
Pool: Infield
Job Number: S0301

Garvey "C" #1-18



Diamond Testing

General information Report

General Information

Company Name Mull Drilling Co. Inc.

Contact	Mark Shreve	Job Number	S0301
Well Name	Garvey "C" #1-18	Representative	Jacob McCallie
Unique Well ID	DST #1 Lansing "A" 3720-3750'	Well Operator	Mull Drilling Co. Inc.
Surface Location	SEC 18-15S-26W Gove County	Report Date	2013/03/23
Well License Number		Prepared By	Jacob McCallie
Field	Garvey Ranch		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #1 Lansing "A" 3720-3750'		
Well Fluid Type	06 Water	Start Test Time	19:12:00
		Final Test Time	03:20:00
Start Test Date	2013/03/23		
Final Test Date	2013/03/24		
Gauge Name	8471		
Gauge Serial Number			

Test Results

RECOVERED:		
116'	HWCM	47% W 53% M
693'	SLMCW	97% W 3% M
809'	TOTAL FLUID	

PH: 7
RW: .19 @ 60 degrees F
Chlorides: 38,000 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 _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
	Total

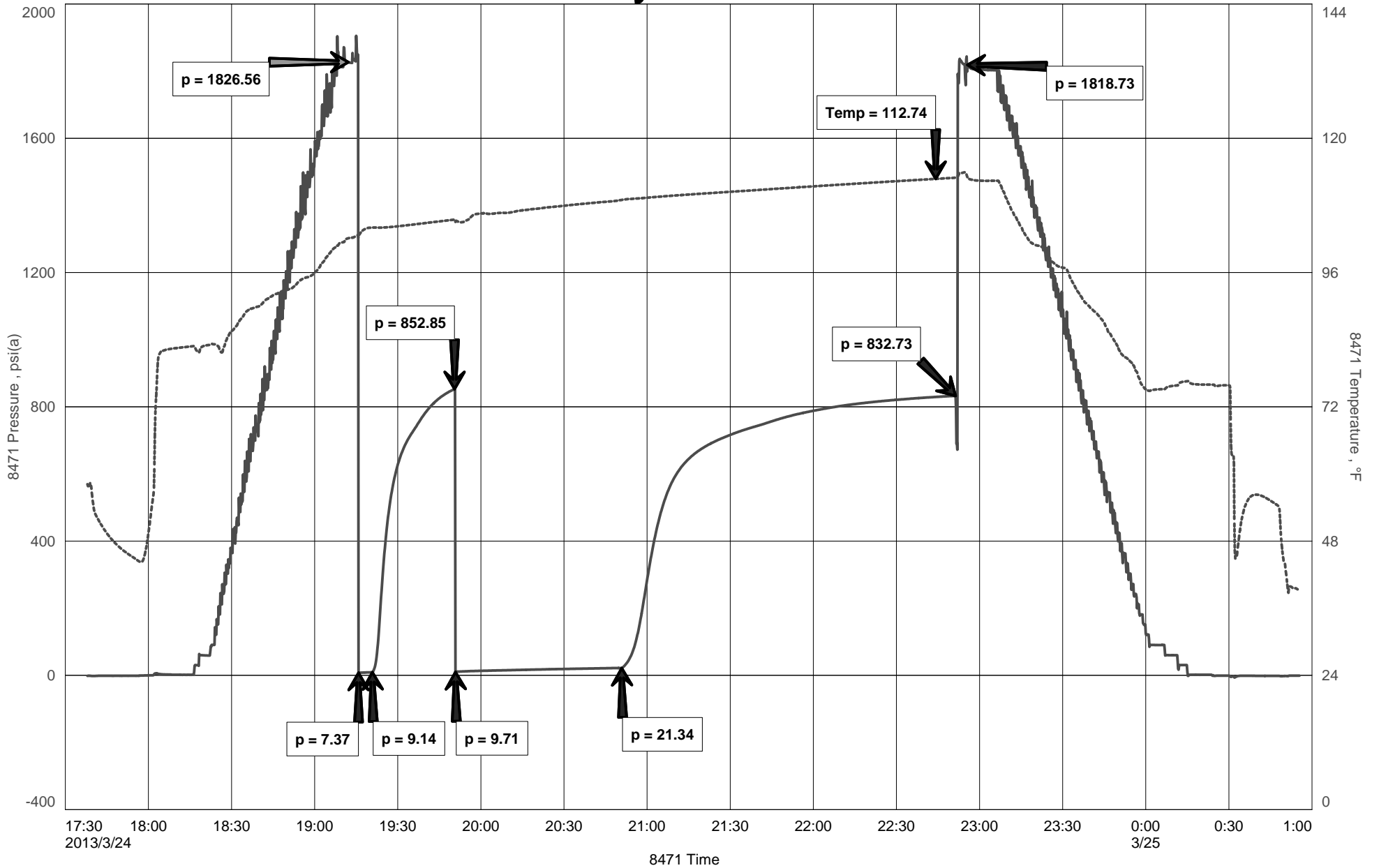
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

Mull Drilling Co. Inc.
DST #2 Lsg "H-I" 3880-3940'
Start Test Date: 2013/03/24
Final Test Date: 2013/03/25

Garvey "C" #1-18
Formation: DST #2 Lsg "H-I" 3880-3940'
Pool: Infield
Job Number: S0302

Garvey "C" #1-18



Diamond Testing

General information Report

General Information

Company Name Mull Drilling Co. Inc.

Contact	Mark Shreve	Job Number	S0302
Well Name	Garvey "C" #1-18	Representative	Jacob McCallie
Unique Well ID	DST #2 Lsg "H-I" 3880-3940'	Well Operator	Mull Drilling Co. Inc.
Surface Location	SEC 18-15S-26W Gove County	Report Date	2013/03/24
Well License Number		Prepared By	Jacob McCallie
Field	Garvey Ranch		
Well Type	Vertical		

Test Type	Drill Stem Test	Start Test Time	17:38:00
Formation	DST #2 Lsg "H-I" 3880-3940'	Final Test Time	00:56:00
Well Fluid Type	01 Oil		
Start Test Date	2013/03/24		
Final Test Date	2013/03/25		
Gauge Name	8471		
Gauge Serial Number			

Test Results

RECOVERED:
20' OSM 1% O 99% M

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: _____	

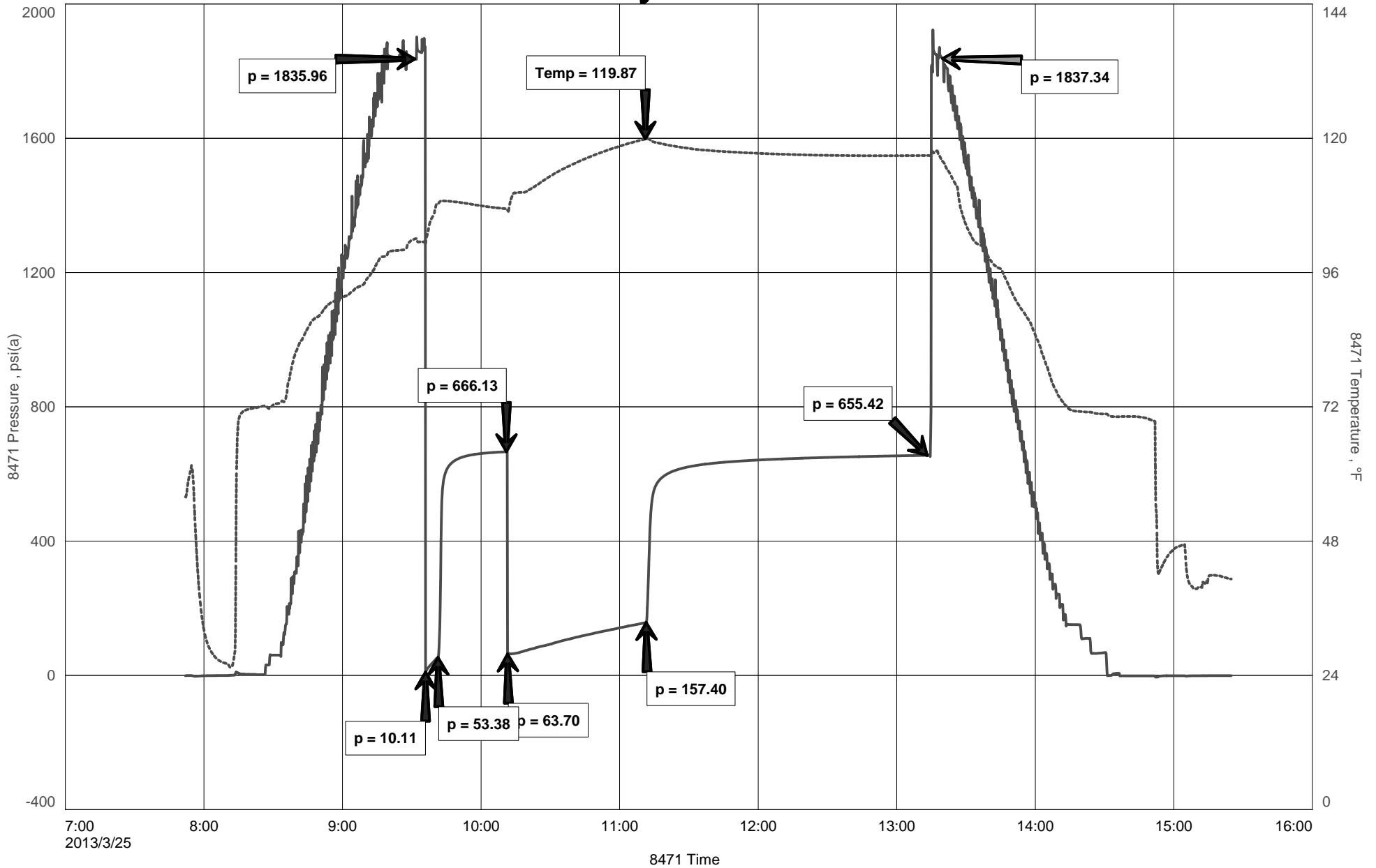
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

Mull Drilling Co. Inc.
DST #3 Lansing "J" 3930-3970'
Start Test Date: 2013/03/25
Final Test Date: 2013/03/25

Garvey "C" #1-18
Formation: DST #3 Lansing "J" 3930-3970'
Pool: Infield
Job Number: S0303

Garvey "C" #1-18



Diamond Testing

General information Report

General Information

Company Name Mull Drilling Co. Inc.

Contact	Mark Shreve	Job Number	S0303
Well Name	Garvey "C" #1-18	Representative	Jacob McCallie
Unique Well ID	DST #3 Lansing "J" 3930-3970'	Well Operator	Mull Drilling Co. Inc.
Surface Location	SEC 18-15S-26W Gove County	Report Date	2013/03/25
Well License Number		Prepared By	Jacob McCallie
Field	Garvey Ranch		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #3 Lansing "J" 3930-3970'		
Well Fluid Type	01 Oil	Start Test Time	07:52:00
		Final Test Time	15:25:00
Start Test Date	2013/03/25		
Final Test Date	2013/03/25		
Gauge Name	8471		
Gauge Serial Number			

Test Results

RECOVERED:

365	GIP	
110	SLWCMGCO	18% G 61% O 9% W 12% M
218	SLGMCW	10% G 68% W 22% M
328	TOTAL FLUID	

PH: 7

RW: .18 @ 50 degrees F

Chlorides: 41,000 ppm

TOOL SAMPLE:

10% G 20% O 32% W 38% 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

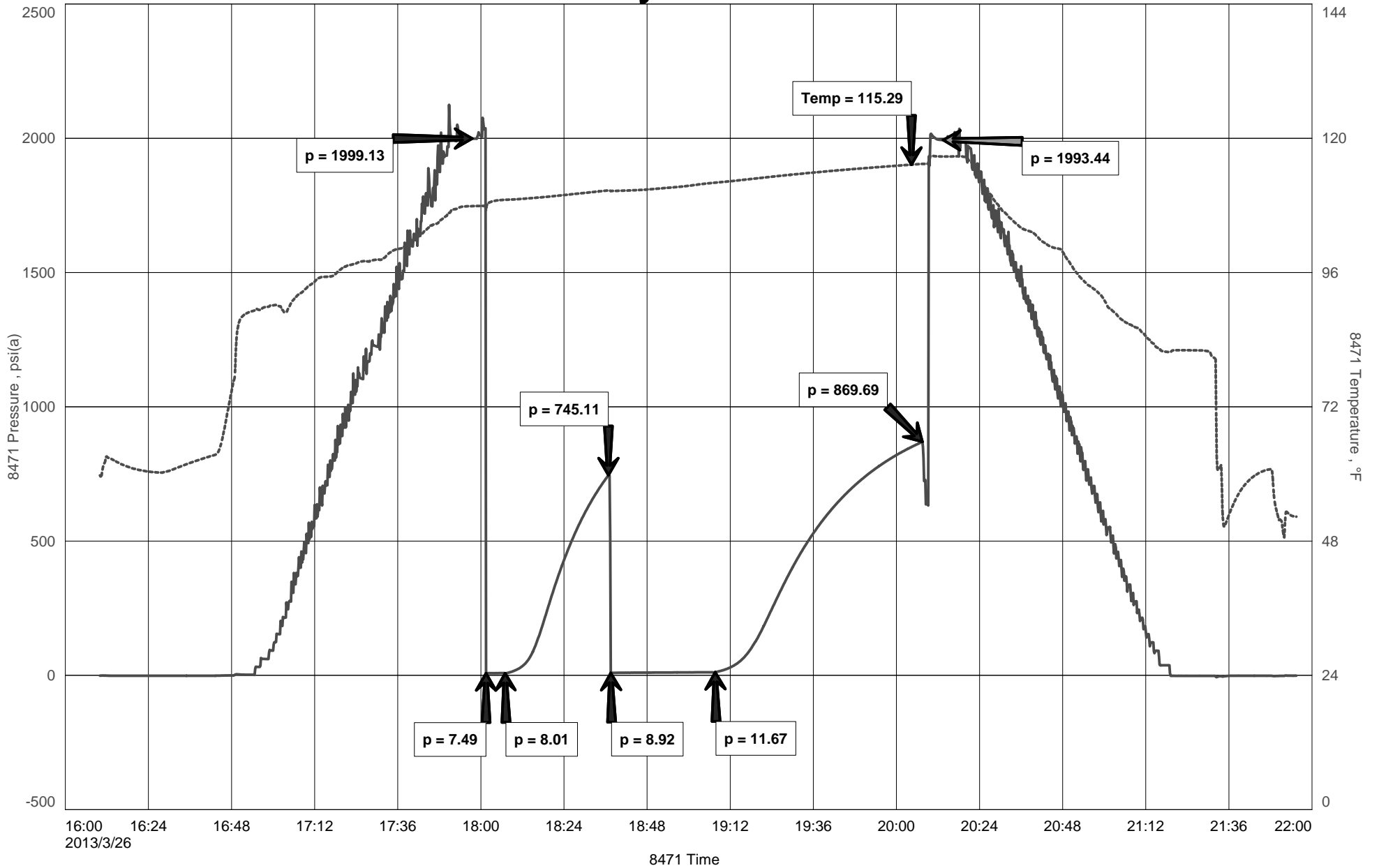
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

Mull Drilling Co. Inc.
DST #4 Ft. Scott 4200-4250'
Start Test Date: 2013/03/26
Final Test Date: 2013/03/26

Garvey "C" #1-18
Formation: DST #4 Ft. Scott 4200-4250'
Pool: Infield
Job Number: S0304

Garvey "C" #1-18



Diamond Testing

General information Report

General Information

Company Name Mull Drilling Co. Inc.

Contact	Mark Shreve	Job Number	S0304
Well Name	Garvey "C" #1-18	Representative	Jacob McCallie
Unique Well ID	DST #4 Ft. Scott 4200-4250'	Well Operator	Mull Drilling Co. Inc.
Surface Location	SEC 18-15S-26W Gove County	Report Date	2013/03/26
Well License Number		Prepared By	Jacob McCallie
Field	Garvey Ranch		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #4 Ft. Scott 4200-4250'		
Well Fluid Type	01 Oil	Start Test Time	16:10:00
		Final Test Time	21:56:00
Start Test Date	2013/03/26		
Final Test Date	2013/03/26		
Gauge Name	8471		
Gauge Serial Number			

Test Results

RECOVERED:
5' MUD 100% M

TOOL SAMPLE:
100% M (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 _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

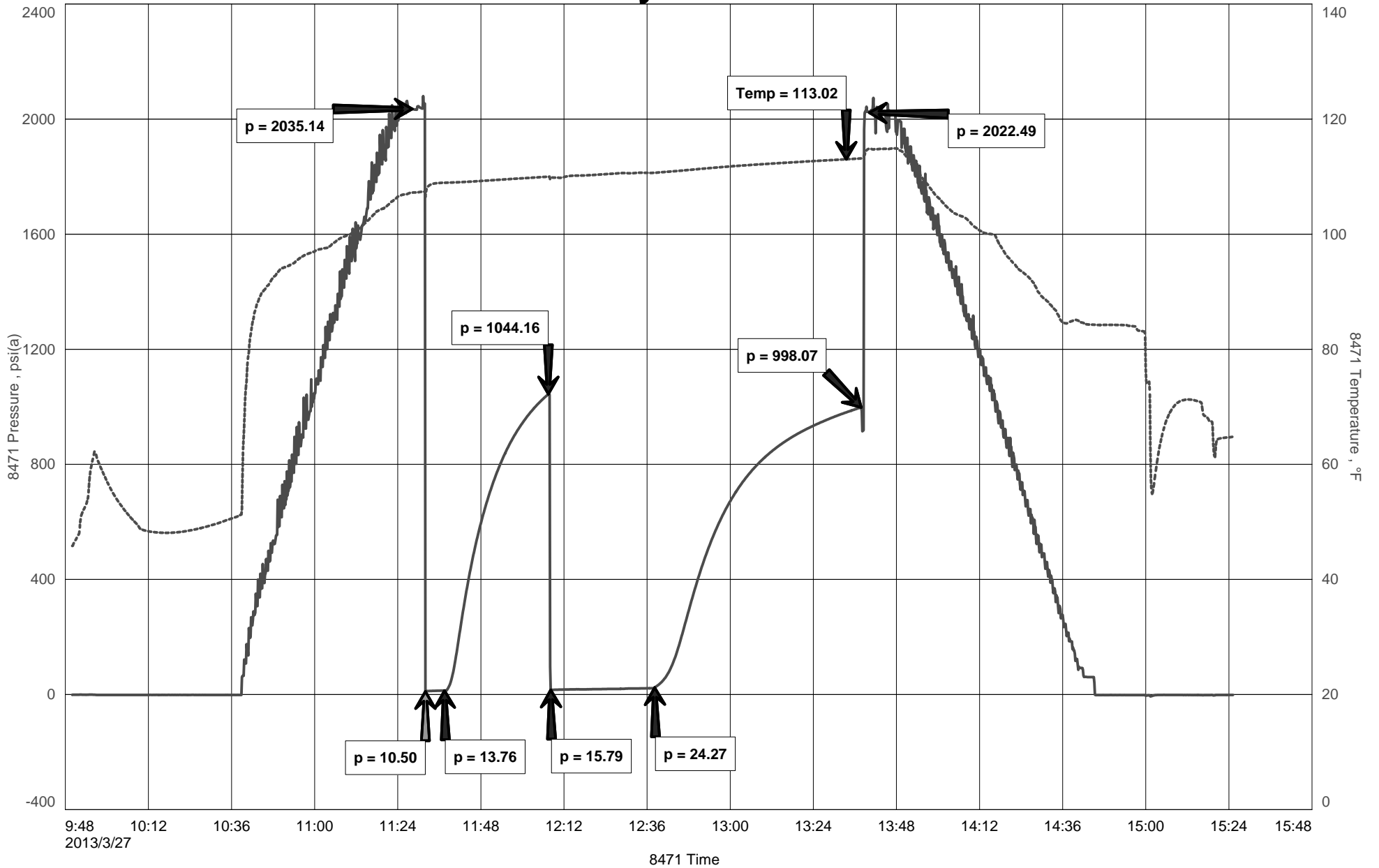
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... 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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Mull Drilling Co. Inc.
DST #5 Miss 4240-4335'
Start Test Date: 2013/03/27
Final Test Date: 2013/03/27

Garvey "C" #1-18
Formation: DST #5 Miss 4240-4335'
Pool: Infield
Job Number: S0305

Garvey "C" #1-18



Diamond Testing

General information Report

General Information

Company Name Mull Drilling Co. Inc.

Contact	Mark Shreve	Job Number	S0305
Well Name	Garvey "C" #1-18	Representative	Jacob McCallie
Unique Well ID	DST #5 Miss 4240-4335'	Well Operator	Mull Drilling Co. Inc.
Surface Location	SEC 18-15S-26W Gove County	Report Date	2013/03/27
Well License Number		Prepared By	Jacob McCallie
Field	Garvey Ranch		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #5 Miss 4240-4335'		
Well Fluid Type	01 Oil	Start Test Time	09:50:00
		Final Test Time	15:26:00
Start Test Date	2013/03/27		
Final Test Date	2013/03/27		
Gauge Name	8471		
Gauge Serial Number			

Test Results

RECOVERED:
10' OSM 2% O 98% M

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: _____	

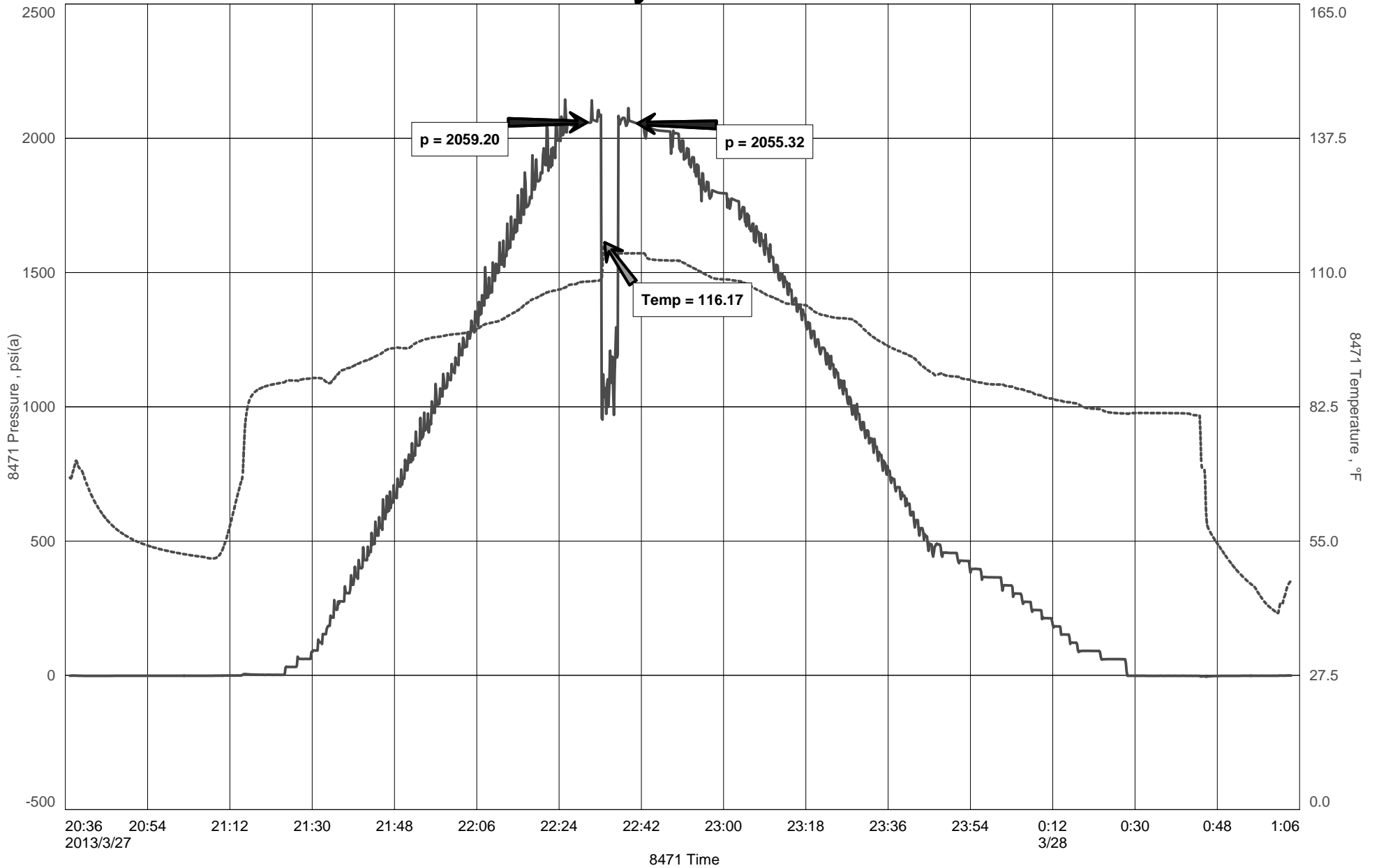
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period.....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

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Mull Drilling Co. Inc.
DST #6 Miss 4320-4340'
Start Test Date: 2013/03/27
Final Test Date: 2013/03/28

Garvey "C" #1-18
Formation: DST #6 Miss 4320-4340'
Pool: Infield
Job Number: S0306

Garvey "C" #1-18



Diamond Testing

General information Report

General Information

Company Name Mull Drilling Co. Inc.

Contact	Mark Shreve	Job Number	S0306
Well Name	Garvey "C" #1-18	Representative	Jacob McCallie
Unique Well ID	DST #6 Miss 4320-4340'	Well Operator	Mull Drilling Co. Inc.
Surface Location	SEC 18-15S-26W Gove County	Report Date	2013/03/27
Well License Number		Prepared By	Jacob McCallie
Field	Garvey Ranch		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #6 Miss 4320-4340'		
Well Fluid Type	01 Oil	Start Test Time	20:37:00
		Final Test Time	01:04:00
Start Test Date	2013/03/27		
Final Test Date	2013/03/28		
Gauge Name	8471		
Gauge Serial Number			

Test Results

RECOVERED:
1008' Mud 100% M

TOOL SAMPLE:
100% 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

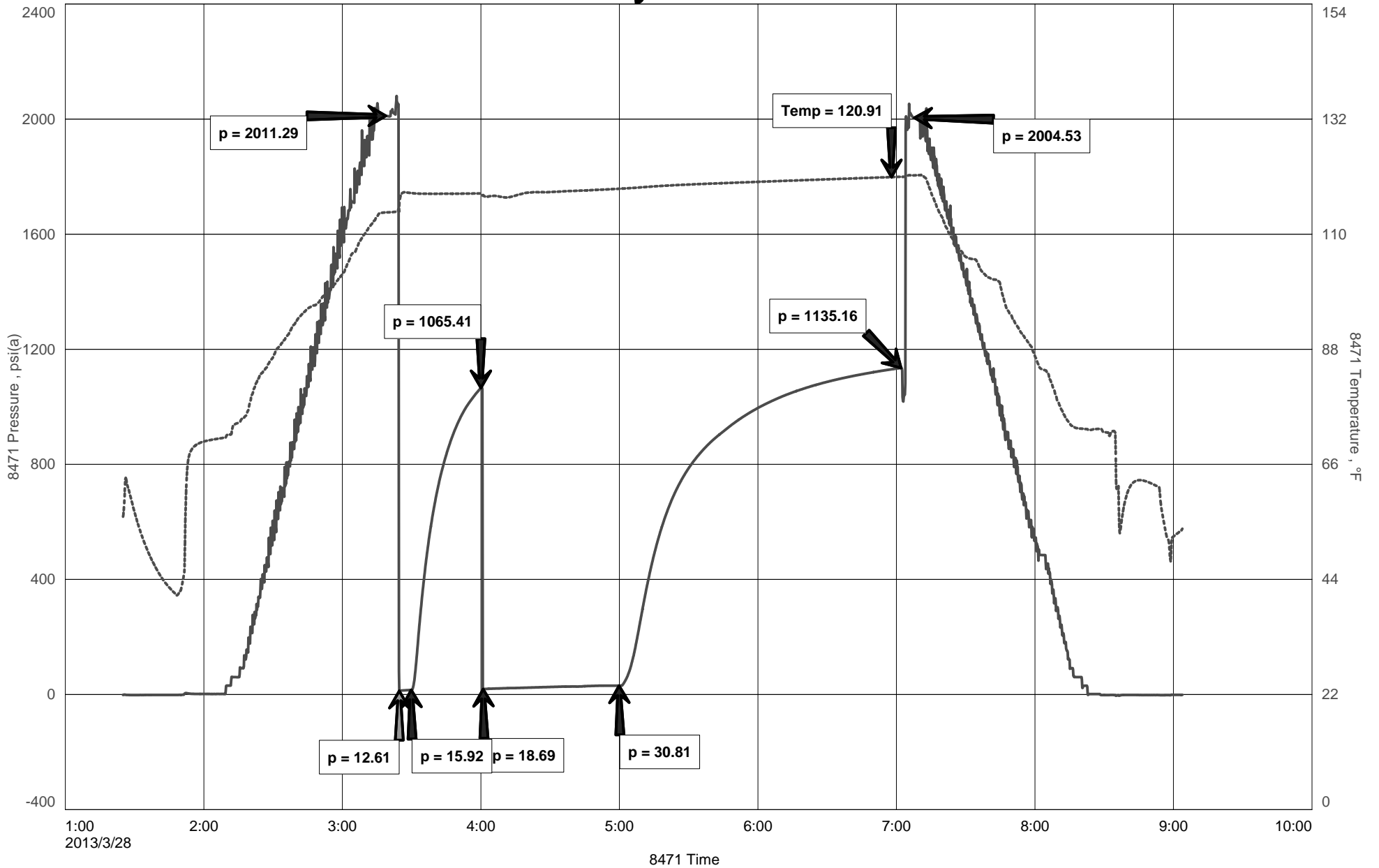
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... 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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Mull Drilling Co. Inc.
DST #7 Miss 4230-4340'
Start Test Date: 2013/03/28
Final Test Date: 2013/03/28

Garvey "C" #1-18
Formation: DST #7 Miss 4230-4340'
Pool: Wildcat
Job Number: S0307

Garvey "C" #1-18



Diamond Testing

General information Report

General Information

Company Name Mull Drilling Co. Inc.

Contact	Mark Shreve	Job Number	S0307
Well Name	Garvey "C" #1-18	Representative	Jacob McCallie
Unique Well ID	DST #7 Miss 4230-4340'	Well Operator	Mull Drilling Co. Inc.
Surface Location	SEC 18-15S-26W Gove County	Report Date	2013/03/28
Well License Number		Prepared By	Jacob McCallie
Field	Garvey Ranch		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #7 Miss 4230-4340'		
Well Fluid Type	01 Oil	Start Test Time	01:25:00
		Final Test Time	09:04:00
Start Test Date	2013/03/28		
Final Test Date	2013/03/28		
Gauge Name	8471		
Gauge Serial Number			

Test Results

RECOVERED:
40' OSM 2% O 98% M

TOOL SAMPLE:
10% O 90% M

KEVIN L. KESSLER
CONSULTING PETROLEUM GEOLOGIST
 (316) 522-7338

OPERATOR : MULL DRILLING COMPANY, INC.
LEASE : GARVEY 'C' WELL # : 1 - 18
LOCATION : 2228' FNL & 2091' FWL
SEC: 18 TWP : 15 S RGE : 26 W
COUNTY : GOVE STATE : KANSAS

ELEVATION
KB : 2465
GL : 2460
MEASUREMENTS FROM
KB

CONTRACTOR : WW DRILLING RIG # 10
COMM : 03 / 20 / 2013 COMP : 03 / 28 / 2013
RTD : 4440 LOG TD : 4440
SAMPLES SAVED FROM : 3500 TO: RTD
GEOLOGICAL SUPERVISION FROM : 3500 TO: RTD
MUD UP : 3400 TYPE MUD : CHEMICAL

CASING RECORD
SURFACE :
8 5/8" @ 221'
PRODUCTION :
5 1/2" @ 4440'

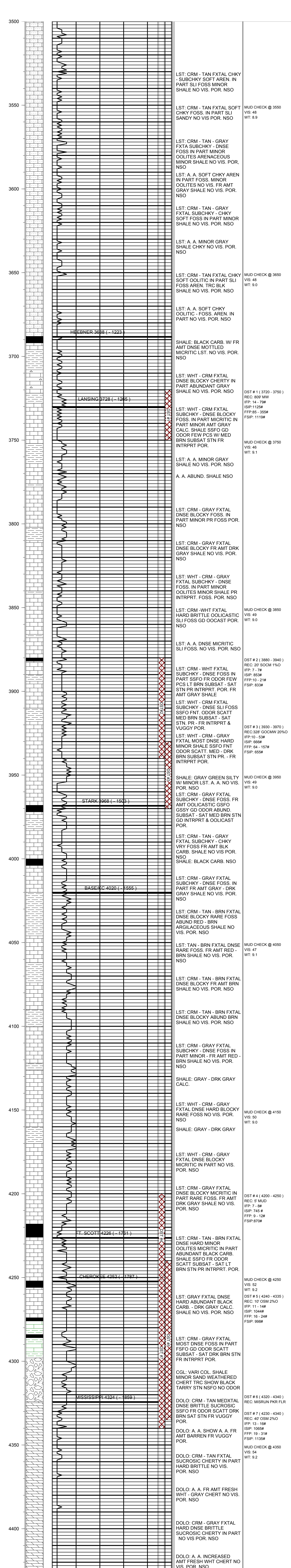
ELECTRICAL SURVEYS:

FORMATION	TOP	LOG	DATUM	TOP	SAMPLE	DATUM	STRUCT. COMP.
HEEBNER	3688		- 1223	3688		- 1223	- 07
LANSING	3728		- 1265	3728		- 1265	- 06
STARK	3968		- 1503	3968		- 1503	- 11
BASE/ KC	4020		- 1555	4020		- 1555	- 08
FORT SCOTT	4226		- 1761	4226		- 1761	- 18
CHEROKEE	4252		- 1787	4252		- 1787	- 19
MISSISSIPPI	4324		- 1859	4324		- 1859	- 23

CDL/CNL
DIL
MICRO
SONIC

REFERENCE WELL FOR STRUCTURAL COMPARISON :

AMERICAN WARRIOR #5 GARVEY 'L' SEC 18 - T 15 S - R 26 W GOVE COUNTY KANSAS



RTD = 4440 LTD = 4440

COMMENTS:

**PRODUCTION CASING WAS SET TO FURTHER
EVALUATE THE POTENTIAL PRODUCTIVITY OF THIS WELL**

KEVIN L. KESSLER



Services, Inc.

CHARGE TO: **Mulh Drilling**
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

TICKET No 24172

PAGE 1 OF 1

1. SERVICE LOCATION: **1800 Hwy KS** WELL/PROJECT NO.: **1-18** LEASE: **Carvey C** COUNTY/PARISH: **Seale** STATE: **KS** CITY: **Utica** DATE: **4/19/13** OWNER: _____
 2. TICKET TYPE: SERVICE SALES CONTRACTOR: _____ RIG NAME/NO.: _____ SHIPPED: DELIVERED TO: _____ ORDER NO.: _____
 3. WELL TYPE: _____ WELL CATEGORY: **H-D** JOB PURPOSE: **Development cement part collar** WELL PERMIT NO.: _____ WELL LOCATION: _____
 4. REFERRAL LOCATION: _____ INVOICE INSTRUCTIONS: _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575					MILEAGE	50	mi			6.00	300.00
576D					Pump Charge	1	ea			1250.00	1250.00
330					SMD cement	160	bk			16.50	2640.00
276					Fluide	50	lb			2.00	100.00
290					D-air	2	gal			35.00	70.00
581					Service charge	200	sk			2.00	400.00
583					Drayage	19902	lb			497.55	797.55

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions. MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS.

DATE SIGNED: _____ TIME SIGNED: A.M. P.M.

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY
 OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?
 WE UNDERSTOOD AND MET YOUR NEEDS?
 OUR SERVICE WAS PERFORMED WITHOUT DELAY?
 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?
 ARE YOU SATISFIED WITH OUR SERVICE?
 CUSTOMER DID NOT WANT TO RESPOND

PAGE TOTAL: **5257.55**
 TAX: **8.05%**
 TOTAL: **5483.76**

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES. The customer hereby designates, requests, receives, and agrees to the material and services listed on this ticket.

SWIFT OPERATOR: _____ APPROVAL: **RCV**

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 4 APR 13 PAGE NO. 1

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
MULL Drilling		1-18		Garvey C		cement post collar		2417a	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
								200 sks SMD w/ 1/2" # Flocube 2 3/4" 52 post collar @ 1917'	
	1015							on loc TRK 114	
	1025					1000	1000	test to 1000psi - held open cut collar	
	1035	3 1/2	2			100		inj rate 3 1/2 bpm @ 100 psi	
	1040	3 1/2				100		Mix SMD cement @ 11.2 pp/g fluid to surface	
		3 1/2	10			100		— cement to surface —	
	1105	3 1/2	87			200		{ 160 sk mixed } 20 to pit }	
	1115							close out collar Run 4 joints	
	1135		25					Reverse hole clean — 2 cement plugs — make fence reverse out Pack up job complete Blaine Doug & TJ	