



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

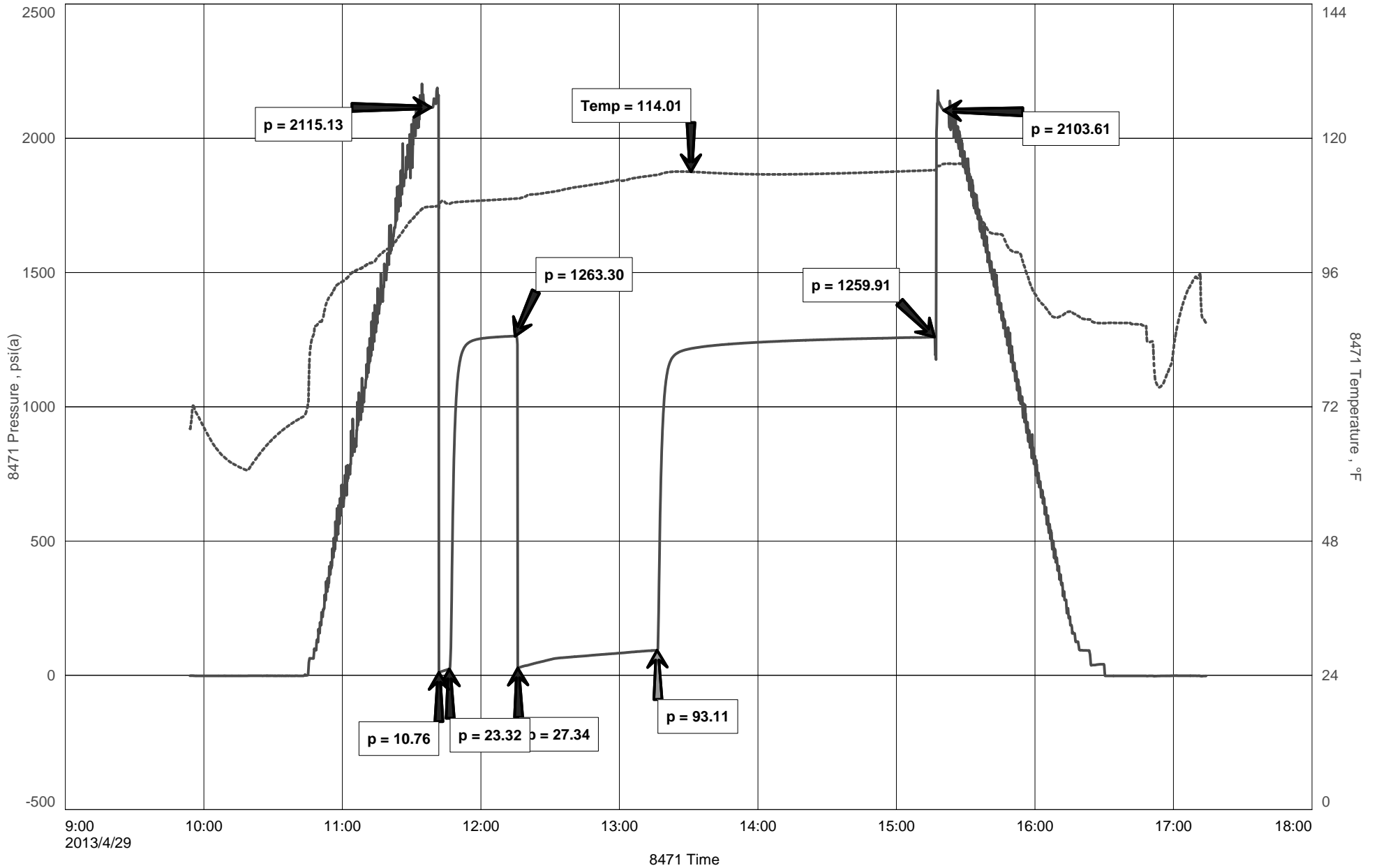
Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... 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 COMPANY INC.
DST # 2 CHER.SAND 4350-4450
Start Test Date: 2013/04/29
Final Test Date: 2013/04/29

BEAMER #2 - 8
Formation: DST # 2 CHER.SAND 4350-4450
Pool: WILDCAT
Job Number: SO321

BEAMER #2 - 8





**DIAMOND TESTING
ROGER D. FRIEDLY - TESTER
CELL 620-793-2043**

Company Name MULL DRILLING COMPANY INC.
Contact MARK SHREVE
Well Name BEAMER #2 - 8
Unique Well ID DST # 2 CHER.SAND 4350-4450
Surface Location SEC. 8-16S-23W NESS COUNTY
Field BEAMER

Job Number SO321
Test Unit 3
Representative ROBERT HAMEL
Well Operator MULL DRILLING COMPANY INC.
Report Date 2013/04/29

Test Information

Test Type Drill Stem Test Prepared By ROBERT HAMEL
Formation DST # 2 CHER.SAND 4350-4450 Qualified By KEVIN KESSLER
Test Purpose Initial Test
Well Fluid Type 01 Oil
H2S

Start Test Date 2013/04/29 Start Test Time 09:54:00
Final Test Date 2013/04/29 Final Test Time 17:14:00

Remarks

RECOVERY:

25' CO 100% O GRAVITY: 33.5 @ 60 DEGREES F
180' HOCM 35% O 66% M
205' TOTAL FLUID

TOOL SAMPLE:

34% O 66% M