



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1172060
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: _____



1172060

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
--	---

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
----------------	-------	---------	------------	---

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	Chieftain Oil Co., Inc.
Well Name	Lorraine B 1
Doc ID	1172060

All Electric Logs Run

Geologist Log
Sonic Cement Bond Log
Compensated Neutron Microresistivity Log
Array Induction Shallow Focused Electric Log

Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Lorraine B 1
Doc ID	1172060

Tops

Name	Top	Datum
Heebner	3633	-2171
Kansas City	3817	-2355
Cherokee	4501	-3039
Mississippian	4515	-3053
Kinderhook	4724	-3262
Chattanooga	4805	-3343
Viola	4856	-3394
Simpson	4954	-3492
Arbuckle	5094	-3632
Total Depth	5111	-3649



PAGE 1 of 1	CU NO 1000719	INVOICE DATE 10/07/2013
INVOICE NUMBER 1718 - 91303632		

Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Lorraine B 1
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40648501	19843		Net - 30 days	11/06/2013

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 10/02/2013 to 10/02/2013</i>				
0040648501				
171808905A Cement-New Well Casing/Pi 10/02/2013				
Cement 13 3/8" Conductor				
60/40 POZ	350.00	EA	9.00	3,150.14 T
Celloflake	88.00	EA	2.78	244.21 T
Calcium Chloride	903.00	EA	0.79	711.14 T
"Unit Mileage Chg (PU, cars one way)"	45.00	MI	3.19	143.44
Heavy Equipment Mileage	90.00	MI	5.25	472.52
"Proppant & Bulk Del. Chgs., per ton mil	677.00	EA	1.20	812.44
Depth Charge; 0-500'	1.00	EA	750.03	750.03
Blending & Mixing Service Charge	350.00	BAG	1.05	367.52
"Service Supervisor, first 8 hrs on loc.	1.00	EA	131.26	131.26

ENTERED
 OCT 09 2013
 9121 BC

PLEASE REMIT TO:..	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	6,782.70
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	293.54
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	7,076.24
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 08905 A

DATE _____ TICKET NO. _____

DATE OF JOB: 10-2-2013		DISTRICT _____		NEW WELL <input checked="checked" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.: _____	
CUSTOMER: CHIEFTAIN OIL CO., INC.				LEASE: LORRAINE 'B'				WELL NO.: 1		
ADDRESS _____				COUNTY: BARBER		STATE: Ks.				
CITY _____ STATE _____				SERVICE CREW: LESLEY, MARQUEZ, HAMBY						
AUTHORIZED BY _____				JOB TYPE: CNW-13 3/8" L.P.						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED: 10-1-13		DATE	ARR PM	TIME
37586	2					ARRIVED AT JOB			ARR PM	7:00
19889-19843	2					START OPERATION		10-2-13AM	ARR PM	12:00
19960-21010	2					FINISH OPERATION			ARR PM	1:30
						RELEASED			ARR PM	2:00
						MILES FROM STATION TO WELL _____				

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: *Shirley Matthews*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 103	60/40 POZ	SK	350		4,200.00
CC 102	CELLFLAKE	lb	88		325.60
CC 109	CALCIUM CHLORIDE	lb	903		948.15
E 100	PICKUP MILEAGE	MI	45		191.25
E 101	HEAVY EQUIPMENT MILEAGE	MI	90		630.00
E 113	BULK DELIVERY	TM	677		1,083.60
CE 200	DEPTH CHARGE; 0-500'	HR	1-4		1,000.00
CE 240	BLENDING SERVICE	SK	350		490.00
S 003	SERVICE SUPERVISOR	EA	1		175.00

SUB TOTAL *6,782.70*

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: *Lesley*
FIELD SERVICE ORDER NO. _____
THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Shirley Matthews*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer CHIEFTAIN OIL CO., INC.		Lease No.	Date 10-1-2013	
Lease LORRAINE 'B'		Well # 1		
Field Order # 08405	Station PRATT, KS.	Casing 3 3/8"	Depth	County BARBER State Ks.
Type Job CNW-13 3/8" C.P.	Formation TD=353'	Legal Description 27-33-11		

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 13 3/8" x 48	Tubing Size	Shots/Ft CMT-	Acid 350SKS. 60/40 P02	RATE	PRESS	ISIP		
Depth 308.26	Depth 713	From	To	Pre Pad @ 1.2 CUFT	Max	5 Min.		
Volume 52.5 BBL	Volume	From	To	Pad	Min 50 = 20'	10 Min.		
Max Press 300	Max Press	From	To	Frac	Avg	15 Min.		
Well Connection SPU	Annulus Vol.	From	To		HHP Used	Annulus Pressure		
Plug Depth 325	Packer Depth	From	To	Flush 50.5 BBL	Gas Volume	Total Load		

Customer Representative R. MOLZ	Station Manager K. GORTLEY	Treater K. LESLEY
Service Units 37586 19889 19843 19960 21010		
Driver Names LESLEY MARQUEZ — HAMBY —		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
7:00 PM					ON LOCATION - SAFETY MEETING
9:00 PM					RUN 8 STS. 13 3/8" x 48# CSG.
12:00 AM					CSG. ON BOTTOM
12:30 AM					HOO UP TO CSG. / BREAK CIRC. W/ RIG
12:50 AM	150		5	6	HOO AHEAD
12:53 AM	75		75.5	6	MIX 350 SKS. 60/40 P02 @ 14.8 PPG
1:06 AM	0		0	6	START DISPLACEMENT
1:13 AM	200		45	3	SLOW RATE
1:15 AM	200		50.5	2	CMT. @ DESIRED DEPTH
					CIRC. THRO JOB
					CIRC. 10 BBL TO PIT
					JOB COMPLETE,
					THANKS -
					<i>KEVEN LESLEY</i>



PAGE	CR NO	INVOICE DATE
1 of 1	1000719	10/22/2013
INVOICE NUMBER		
1718 - 91315438		

Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

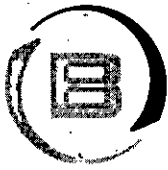
J LEASE NAME Lorraine B 1
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40653556	19905		Net - 30 days	11/21/2013

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 10/21/2013 to 10/21/2013				
0040653556				
171809379A Cement-New Well Casing/Pi 10/21/2013				
Cement 5 1/2 Longstring				
A Serv Lite	175.00	EA	9.10	1,592.41 T
AA2 Cement	125.00	EA	11.90	1,487.42 T
Celloflake	75.00	EA	2.59	194.24 T
C-41P	24.00	EA	2.80	67.20 T
Salt	685.00	EA	0.35	239.74 T
Gypsum	590.00	EA	0.52	309.73 T
C-44	118.00	EA	3.60	425.37 T
FLA-322	95.00	EA	5.25	498.72 T
Gilsonite	625.00	EA	0.47	293.11 T
"Latch Down Plug & Baffle, 5 1/2" (Blu	1.00	EA	279.98	279.98
"Auto Fill Float Shoe 5 1/2" (Blue)"	1.00	EA	251.99	251.99
"Turbolizer, 5 1/2" (Blue)"	7.00	EA	77.00	538.97
"5 1/2" Basket (Blue)"	3.00	EA	202.99	608.97
Claymax KCL Substitute	5.00	EA	24.50	122.49 T
"Unit Mileage Chg (PU, cars one way)"	30.00	MI	2.98	89.25
Heavy Equipment Mileage	60.00	MI	4.90	293.98
"Proppant & Bulk Del. Chgs., per ton mil	407.00	EA	1.12	455.82
Depth Charge; 4001'-5000'	1.00	EA	1,763.90	1,763.90
Blending & Mixing Service Charge	300.00	BAG	0.98	293.98
Plug Container Util. Chg.	1.00	EA	174.99	174.99
"Service Supervisor, first 8 hrs on loc.	1.00	EA	122.49	122.49

NOV 08 2013
 9121 BC

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	10,104.75
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	373.98
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	10,478.73
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 09379 A

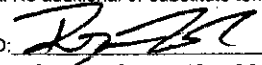
27-335-11W

DATE _____ TICKET NO. _____

DATE OF JOB: 10-21-13		DISTRICT: Pratt, Kansas		NEW WELL <input checked="" type="checkbox"/>		OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/>		INJ <input type="checkbox"/>		WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER: Chieftain Oil Company, Inc.				LEASE: Lorraine "B"				WELL NO. 1							
ADDRESS:				COUNTY: Barber				STATE: Kansas							
CITY:				STATE:				SERVICE CREW: C. Messick, M. McGraw, D. Phye							
AUTHORIZED BY:				JOB TYPE: C.N.W. - Longstring											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
37216	1.25						10-20-13			9:00					
						ARRIVED AT JOB	10-21-13			5:15					
						START OPERATION				1:15					
77686-19905	1.25					FINISH OPERATION				2:30					
70959-19918	1.25					RELEASED	10-21-13			2:45					
						MILES FROM STATION TO WELL	30								

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: 
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
P CP106	A Serv Lite Blend Cement	sh	125		\$ 1,625 00
P CP105	A A2 Blend Cement	sh	125		\$ 2,125 00
P CP106	A Serv Lite Blend Cement	sh	50		\$ 650 00
P CE102	Cellflake	Lb	75		\$ 277 50
P CC105	Deframer	Lb	24		\$ 96 00
P CC111	Salt	Lb	685		\$ 342 50
P CC113	Gypsum	Lb	590		\$ 442 50
P CC115	Gas Blot	Lb	118		\$ 607 70
P CC129	Fluid Loss	Lb	95		\$ 712 50
P CC201	Gilsonite	Lb	625		\$ 418 75
P CF607	Latch Down Plug and Baffle, 5 1/2"	ea	1		\$ 400 00
P CF1251	AutoFill Float Shoe, 5 1/2"	ea	1		\$ 360 00
P CF1651	Turbolizer, 5 1/2"	ea	7		\$ 770 00
P CF1901	Basket, 5 1/2"	ea	3		\$ 870 00
P C704	Claymax	Gal	5		\$ 175 00

SUB TOTAL

CHEMICAL / ACID DATA:			

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

TOTAL

KG

SERVICE REPRESENTATIVE: 	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: 
--	---

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 ~~09380~~ A

Continuation

27-335-11W

DATE TICKET NO. 9,379

DATE OF JOB 10-21-13	DISTRICT Pratt, Kansas	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:		
CUSTOMER	LEASE Lorraine "B"						WELL NO. 1		
ADDRESS	COUNTY Barber	STATE Kansas							
CITY	STATE	SERVICE CREW C. Messick, M. McGraw, D. Phye							
AUTHORIZED BY	JOB TYPE C.N.W. - Longstring								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM PM	TIME
						ARRIVED AT JOB		AM PM	
						START OPERATION		AM PM	
						FINISH OPERATION		AM PM	
						RELEASED		AM PM	
						MILES FROM STATION TO WELL			

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

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SIGNED:
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
P E 100	Pickup Mileage	mi	30	\$	127 50
P E 101	Heavy Equipment Mileage	mi	60	\$	420 00
P E 113	Bulk Delivery	tm	407	\$	650 40
P CE 205	Cement Pump: 4,000 Feet To 5,000 Feet	hrs	4	\$	2,520 00
P CE 240	Blending and Mixing Service	slt	300	\$	420 00
P CE 504	Plug Container	Job	1	\$	250 00
P S003	Service Supervisor	hrs	8	\$	175 00

CHEMICAL / ACID DATA:			

SUB TOTAL		KG \$ 10,104 75
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE 	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
----------------------------	---

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

BASIC

energy services, L.P.

TREATMENT REPORT

Customer Chieftain Oil Company, Inc.	Lease No.	Date 10-21-13
Lease Lorraine "B"	Well # 1	
Field Order # 9379	Station Pratt, Kansas	Casing 5 7/8 15.5 Lb.
Type Job C. N. W. - Longstring	Formation	Depth 4,940 ft.
		County Barber
		State Kansas
		Legal Description 27-33S-11W

PIPE DATA		PERFORATING DATA		CEMENT USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft	125 sacks	A-Serv Lite	RATE	PRESS	ISIP	
5 7/8 15.5 Lb/ft	3 1/2 12.5 Lb/ft	From 125	sacks AA2	with .88	Fluid	Max	28	Defad
Depth 4,940 Feet	Depth	From 108	Stret.	.25	Lb./stk. cell	Min	10	Mer. 19 Gas Blot,
Volume 117.6 Bbl.	Volume	From 14.8	100 Gal.	.6	55 Gal./stk.	Avg	1.54	CU. F T/1st.
Max Press 1,500 P.S.I.	Max Press	From 50	sacks A-Serv Lite	to Plug Rat	(30	HHP Used	5	and Mouse (20
Well Connection Plug Cont.	Annulus Vol. Liner	From 50	sacks A-Serv Lite	to Plug Rat	(30	sacks)	and	Mouse (20
Plug Depth 4,915.4 Feet	Packer Depth	From		To	Flush	117.6 Bbl.	28	TCCL
						Gas Volume		Total Load

Customer Representative Ryan Molz	Station Manager Kevin Gordley	Treater Clarence R. Messick
Service Units 37,216	77,686	19,905
Driver Names Messick	McGraw	Phye

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
5:15					Trucks on location and safety meeting.
9:00					Fossil Drilling start to run Auto Fill Float shoe, shoe joint with latch Down Baffle screwed into collar and a total of 118 joints new 15.5 Lb/ft. 5 7/8" A Basher was installed above collars # 5, 12 and # 13. A Turbolizer was installed on collars
12:15					# 4, 6, 7, 8, 9, 10, and # 11.
12:15					Casing in well. Circulate for 1 hour.
1:20		2000			Shut in well. Pressure Test. Open well.
1:24	300			6	Start mixing 125 sacks A-Serv Lite cement.
	300		38	6	Start mixing 125 sacks AA2 Blend cement.
			72		Stop pumping. Shut in well. Wash pump and lines. Release Latch Down Plug. Open well.
1:38	150			6.5	Start 28 TCCL Displacement.
			80	5	Start to lift cement.
1:58	600		117		Plug down.
	1,500				Pressure up.
					Release pressure. Float shoe held.
			7-5	3	Plug Rat and Mouse holes.
					Wash up pump truck.
3:00					Job Complete.
					Thank You.
					Clarence, Mike, Dale



PAGE	CURT NO	INVOICE DATE
1 of 1	1000719	10/15/2013
INVOICE NUMBER		
1718 - 91310409		

Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Lorraine B 1
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
40651286	19843		Net - 30 days	11/14/2013	
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 10/11/2013 to 10/11/2013</i>					
0040651286					
171809125A Cement-New Well Casing/Pi 10/11/2013					
Cement 5 1/2" Longstring					
AA2 Cement		275.00	EA	11.90	3,272.34 T
C-41P		52.00	EA	2.80	145.59 T
Salt		1,364.00	EA	0.35	477.38 T
C-44		259.00	EA	3.60	933.65 T
FLA-322		208.00	EA	5.25	1,091.95 T
Gilsonite		1,375.00	EA	0.47	644.85 T
"Latch Down, Plug & Baffle, 5 1/2" (Blu		1.00	EA	279.99	279.99
"Auto Fill Float Shoe 5 1/2" (Blue)"		1.00	EA	251.99	251.99
"Turbolizer, 5 1/2" (Blue)"		7.00	EA	77.00	538.98
"5 1/2" Basket (Blue)"		2.00	EA	202.99	405.98
Claymax KCL Substitute		5.00	EA	24.50	122.49 T
Mud Flush		500.00	EA	0.60	300.99 T
Super Flush II		500.00	EA	1.07	535.48 T
"Unit Mileage Chg (PU, cars one way)"		30.00	MI	2.98	89.25
Heavy Equipment Mileage		60.00	MI	4.90	293.99
"Proppant & Bulk Del. Chgs., per ton mil		389.00	EA	1.12	435.66
Depth Charge; 5001-6000'		1.00	EA	2,015.91	2,015.91
Blending & Mixing Service Charge		275.00	BAG	0.98	269.49
Plug Container Util. Chg.		1.00	EA	174.99	174.99
"Service Supervisor, first 8 hrs on loc.		1.00	EA	122.49	122.49

ENTERED
 OCT 17 2013
 9304 BC

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	12,403.44
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	538.02
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	12,941.46
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		





BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 09125 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>10-11-12</u> DISTRICT <u>PRA TT KS</u>		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:								
CUSTOMER <u>Chick-tan Oil</u>		LEASE <u>LORRAINE B</u> WELL NO. <u>1</u>								
ADDRESS		COUNTY <u>BARBER</u> STATE <u>KS</u>								
CITY STATE		SERVICE CREW <u>Sullivan, Young, Phie</u>								
AUTHORIZED BY		JOB TYPE: <u>CNW 5 1/2 hole</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>19887-19883</u>	<u>40</u>						<u>10-11-12</u>			<u>3:30</u>
<u>20959-19918</u>	<u>40</u>					ARRIVED AT JOB				<u>5:00</u>
<u>37900</u>						START OPERATION				<u>11:35</u>
						FINISH OPERATION				<u>12:15</u>
						RELEASED				<u>1:00</u>
						MILES FROM STATION TO WELL				<u>30</u>

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA-2 cmt	SK	275		7,825 00
CP 105	AA-2 cmt	SK	50		250 00
CC 105	C-41	lb	52		208 00
CC 111	SALT	lb	1364		682 00
CC 115	L-44	lb	259		1,333 25
CC 129	FLA-322 Fluo Glass	lb	208		1,560 00
CC 201	g. bromide	lb	1375		921 25
CF 1007	Latch down, Plug Bottle 5 1/2	SA	1		400 00
CF 1251	nut, 7/11 Fluo 1/2 shoe	SA	1		360 00
CF 1651	Cent.	SA	7		770 00
CC 1001	BASKET	SA	2		580 00
C 904	CLAY MAX	gal	5		175 00
CC 151	MUD FLUID	gal	500		430 00
CC 155	Super Fluid	gal	500		765 00

CHEMICAL / ACID DATA:			

SUB TOTAL		<u>16</u>
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		<u>[Signature]</u>

SERVICE REPRESENTATIVE [Signature]
FIELD SERVICE ORDER NO. _____

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



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 ~~0000~~ A
Continuation of

DATE TICKET NO. 9125A

DATE OF JOB <u>10-11-13</u>	DISTRICT <u>PRA 7 KS</u>	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:		
CUSTOMER <u>Chickadee Oil</u>		LEASE <u>Lorraine B</u>		WELL NO. <u>1</u>					
ADDRESS		COUNTY <u>Harbel</u>		STATE <u>KS</u>					
CITY STATE		SERVICE CREW <u>Sullivan, Young, Phye</u>							
AUTHORIZED BY		JOB TYPE: <u>CNW 5 1/2 Log Skin</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
							<u>10-11-13</u>		<u>3:30</u>
						ARRIVED AT JOB			<u>5:00</u>
						START OPERATION			<u>11:35</u>
						FINISH OPERATION			<u>12:15</u>
						RELEASED			<u>1:00</u>
						MILES FROM STATION TO WELL			<u>30</u>

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<u>E 100</u>	<u>Pecked</u>	<u>m'</u>	<u>30</u>		<u>127 50</u>
<u>E 101</u>	<u>Wood, 2x4</u>	<u>m'</u>	<u>60</u>		<u>420 00</u>
<u>E 113</u>	<u>Bullhead Bolting</u>	<u>TM</u>	<u>389</u>		<u>621 60</u>
<u>CE 206</u>	<u>Depth change 5000' - 6000'</u>	<u>EA</u>	<u>1</u>		<u>2880 00</u>
<u>CE 240</u>	<u>Blending - mixing</u>	<u>SK</u>	<u>275</u>		<u>395 00</u>
<u>CE 304</u>	<u>Play Contractor Painted</u>	<u>SA</u>	<u>1</u>		<u>250 00</u>
<u>S 003</u>	<u>Schumers Sup</u>	<u>SA</u>	<u>1</u>		<u>175 00</u>

CHEMICAL / ACID DATA:			

SUB TOTAL		<u>12,403 44</u>
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		<u>[Signature]</u>

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

FIELD SERVICE ORDER NO.

BASIC

energy services, L.P.

TREATMENT REPORT

Customer <i>CHITAW OIL</i>	Lease No.	Date <i>10-11-13</i>	
Lease <i>LORRAINE B</i>	Well # <i>1</i>		
Field Order # <i>91258</i>	Station <i>PRATT</i>	Casing <i>5 1/2</i>	Depth <i>5104</i>
		County <i>BARBER</i>	State <i>KS</i>
Type Job <i>CNW 5 1/2 long string</i>	Formation	Legal Description <i>27-33-11</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>5 1/2</i>							5 Min.	
Depth <i>5104</i>	Depth	From	To	Pre Pad	Max			
Volume <i>121</i>	Volume	From	To	Pad	Min		10 Min.	
Max Press <i>2,000</i>	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection <i>P.C.</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <i>5080'</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Sullivan</i>
-------------------------	--------------------------------------	-----------------------------------

Service Units	<i>37900</i>	<i>19889</i>	<i>19843</i>	<i>20759</i>	<i>19918</i>				
Driver Names	<i>Sullivan</i>	<i>Young</i>		<i>Phye</i>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>5:30</i>					<i>ON LOC SETTY MEET</i>
					<i>RUN 127.5TS 5 1/2 15.5 csg</i>
					<i>circ csg 1/2 way 30 min</i>
<i>10:20</i>					<i>CASING ON BOTTOM</i>
<i>10:30</i>					<i>HOOK RIG circ csg.</i>
<i>11:35</i>	<i>200</i>		<i>12</i>	<i>3.5</i>	<i>STARTED FLUSH</i>
			<i>3</i>		<i>SPACER</i>
			<i>12</i>		<i>MIX SUPER FLUSH</i>
			<i>3</i>		<i>SPACER</i>
				<i>4.5</i>	<i>MIX CONT 2253K AA-2 @ 15.0ppg.</i>
			<i>58</i>		<i>cont mixed shot down. WASH, LING, PAD</i>
					<i>Release Plug</i>
	<i>400</i>		<i>80</i>	<i>6</i>	<i>ST DISP</i>
	<i>600</i>			<i>4</i>	<i>LIFT PSI</i>
					<i>Slow Rate</i>
<i>12:15</i>	<i>1,800</i>		<i>121</i>		<i>Plug down</i>
			<i>7</i>		<i>Plug RH w/ 30k AA-2</i>
			<i>5</i>		<i>plug m.H w/ 10 ch. AA-2</i>
					<i>50K complete</i>
					<i>Thank you</i>



DRILL STEM TEST REPORT

Prepared For: **Chieftain Oil Co. Inc.**

101 S. 5th St.
Kiowa, KS 67070-1912

ATTN: Arden Ratzlaff / Ron

Lorraine B #1

27-33s.-11w. Barber,KS

Start Date: 2013.10.08 @ 16:46:18

End Date: 2013.10.09 @ 01:33:18

Job Ticket #: 52461 DST #: 1

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

Printed: 2013.10.10 @ 08:50:49



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Chieftain Oil Co. Inc.

27-33s.-11w. Barber, KS

101 S. 5th St.
Kiowa, KS 67070-1912

Lorraine B #1

Job Ticket: 52461

DST#: 1

ATTN: Arden Ratzlaff / Ron

Test Start: 2013.10.08 @ 16:46:18

GENERAL INFORMATION:

Formation: **Miss.**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 19:21:18

Time Test Ended: 01:33:18

Test Type: Conventional Bottom Hole (Initial)

Tester: Ryan Reynolds

Unit No: 48

Interval: 4823.00 ft (KB) To 4850.00 ft (KB) (TVD)

Reference Elevations: 1461.00 ft (KB)

Total Depth: 4850.00 ft (KB) (TVD)

1449.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 12.00 ft

Serial #: 8790 Inside

Press @ Run Depth: 102.78 psig @ 4824.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.10.08

End Date:

2013.10.09

Last Calib.:

2013.10.09

Start Time: 16:46:23

End Time:

01:33:18

Time On Btm:

2013.10.08 @ 19:20:18

Time Off Btm:

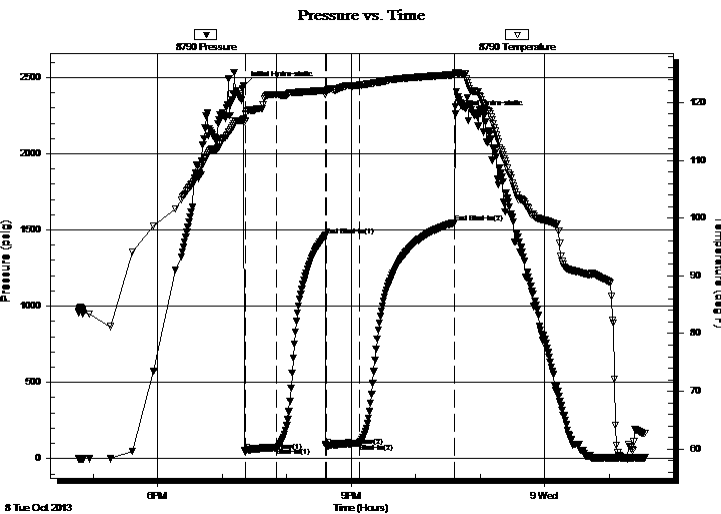
2013.10.08 @ 22:36:48

TEST COMMENT: IF: Fair blow . 1/2" - 4"

IS: No blow

FF: Weak blow . 1/2" - dead @ 27min.

FS: No blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2447.67	117.19	Initial Hydro-static
1	48.05	116.92	Open To Flow (1)
31	72.55	121.36	Shut-In(1)
76	1463.48	122.13	End Shut-In(1)
77	82.89	121.96	Open To Flow (2)
108	102.78	123.01	Shut-In(2)
196	1548.69	124.83	End Shut-In(2)
197	2259.27	125.17	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
60.00	O sptd MW trc%oil, 40%mud, 60%w tr	0.30
150.00	VSLI OCGM trc%oil, 10%gas, 90%mud	0.74

Gas Rates

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



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Chieftain Oil Co. Inc.

27-33s.-11w. Barber, KS

101 S. 5th St.
Kiowa, KS 67070-1912

Lorraine B #1

Job Ticket: 52461

DST#: 1

ATTN: Arden Ratzlaff / Ron

Test Start: 2013.10.08 @ 16:46:18

GENERAL INFORMATION:

Formation: **Miss.**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 19:21:18

Time Test Ended: 01:33:18

Test Type: Conventional Bottom Hole (Initial)

Tester: Ryan Reynolds

Unit No: 48

Interval: 4823.00 ft (KB) To 4850.00 ft (KB) (TVD)

Reference Elevations: 1461.00 ft (KB)

Total Depth: 4850.00 ft (KB) (TVD)

1449.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 12.00 ft

Serial #: 8792 Outside

Press @ Run Depth: psig @ 4824.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.10.08

End Date: 2013.10.09

Last Calib.: 2013.10.09

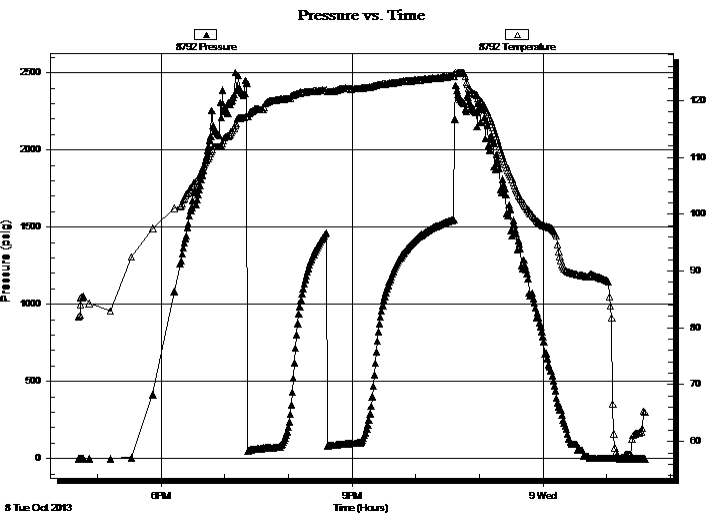
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End Time: 01:35:57

Time On Btm:

Time Off Btm:

TEST COMMENT: IF: Fair blow . 1/2" - 4"
IS: No blow
FF: Weak blow . 1/2" - dead @ 27min.
FS: No blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

Recovery

Length (ft)	Description	Volume (bbl)
60.00	O sptd MW trc%oil, 40%mud, 60%w tr	0.30
150.00	VSLI OCGM trc%oil, 10%gas, 90%mud	0.74

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Chieftain Oil Co. Inc.

27-33s.-11w. Barber,KS

101 S. 5th St.
Kiowa, KS 67070-1912

Lorraine B #1

Job Ticket: 52461

DST#: 1

ATTN: Arden Ratzlaff / Ron

Test Start: 2013.10.08 @ 16:46:18

Tool Information

Drill Pipe:	Length: 4621.00 ft	Diameter: 3.80 inches	Volume: 64.82 bbl	Tool Weight: 2400.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 212.00 ft	Diameter: 2.25 inches	Volume: 1.04 bbl	Weight to Pull Loose: 80000.00 lb
			<u>Total Volume: 65.86 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	32.00 ft			String Weight: Initial 66000.00 lb
Depth to Top Packer:	4823.00 ft			Final 67000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	27.00 ft			
Tool Length:	49.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Shut In Tool	5.00			4806.00	
Hydraulic tool	5.00			4811.00	
Safety Joint	2.00			4813.00	
Packer	5.00			4818.00	22.00 Bottom Of Top Packer
Packer	5.00			4823.00	
Stubb	1.00			4824.00	
Recorder	0.00	8790	Inside	4824.00	
Recorder	0.00	8792	Outside	4824.00	
Perforations	23.00			4847.00	
Bullnose	3.00			4850.00	27.00 Bottom Packers & Anchor
Total Tool Length:	49.00				



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Chieftain Oil Co. Inc.

27-33s.-11w. Barber, KS

101 S. 5th St.
Kiowa, KS 67070-1912

Lorraine B #1

Job Ticket: 52461

DST#: 1

ATTN: Arden Ratzlaff / Ron

Test Start: 2013.10.08 @ 16:46:18

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:

98000 ppm

Viscosity: 71.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.99 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4900.00 ppm

Filter Cake: 0.02 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
60.00	O sptd MW trc%oil, 40%mud, 60%w tr	0.295
150.00	VSLI OCGM trc%oil, 10%gas, 90%mud	0.738

Total Length: 210.00 ft

Total Volume: 1.033 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:

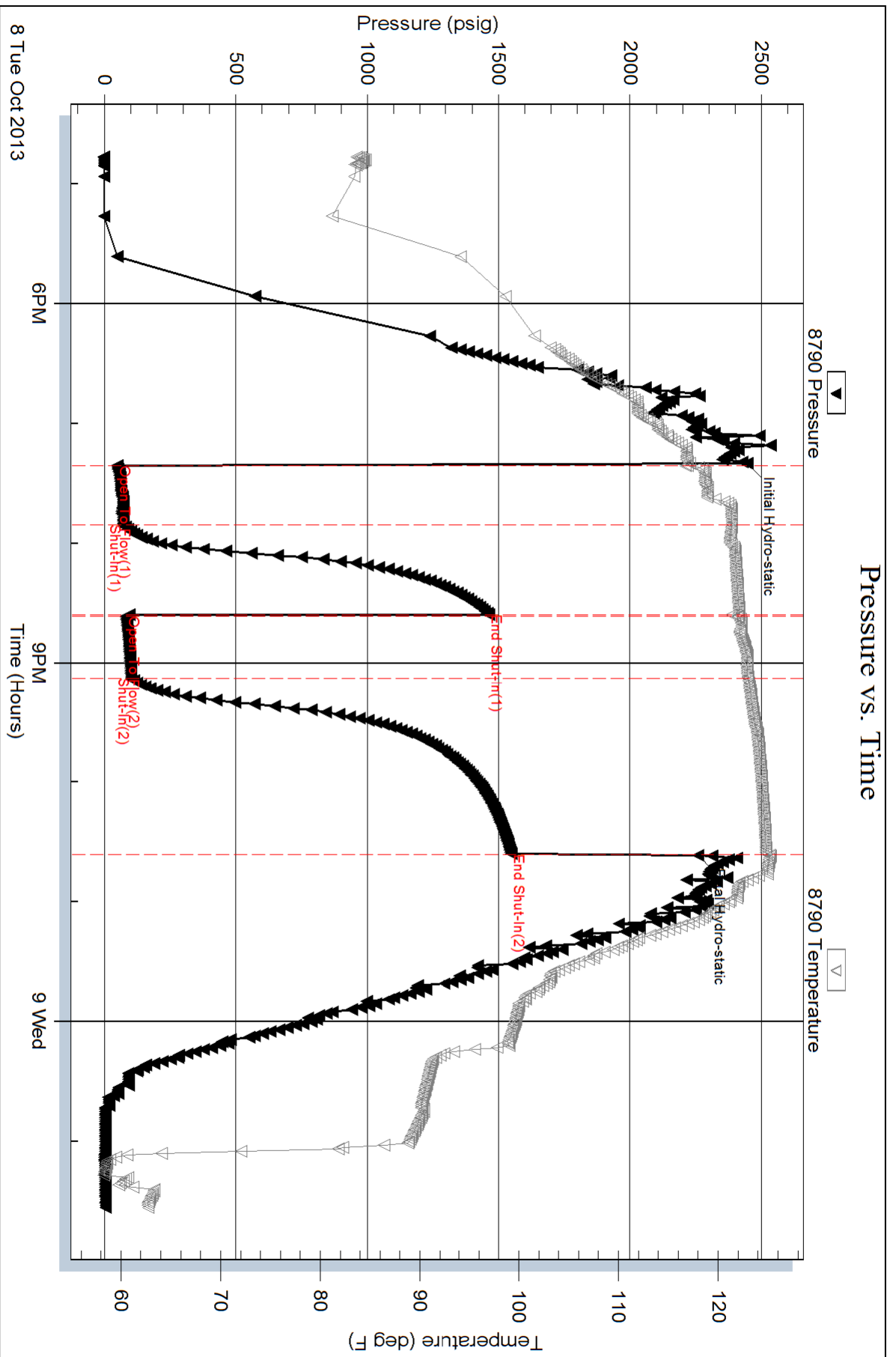
Serial #: 8790

Inside

Chieftain Oil Co. Inc.

Lorraine B #1

DST Test Number: 1

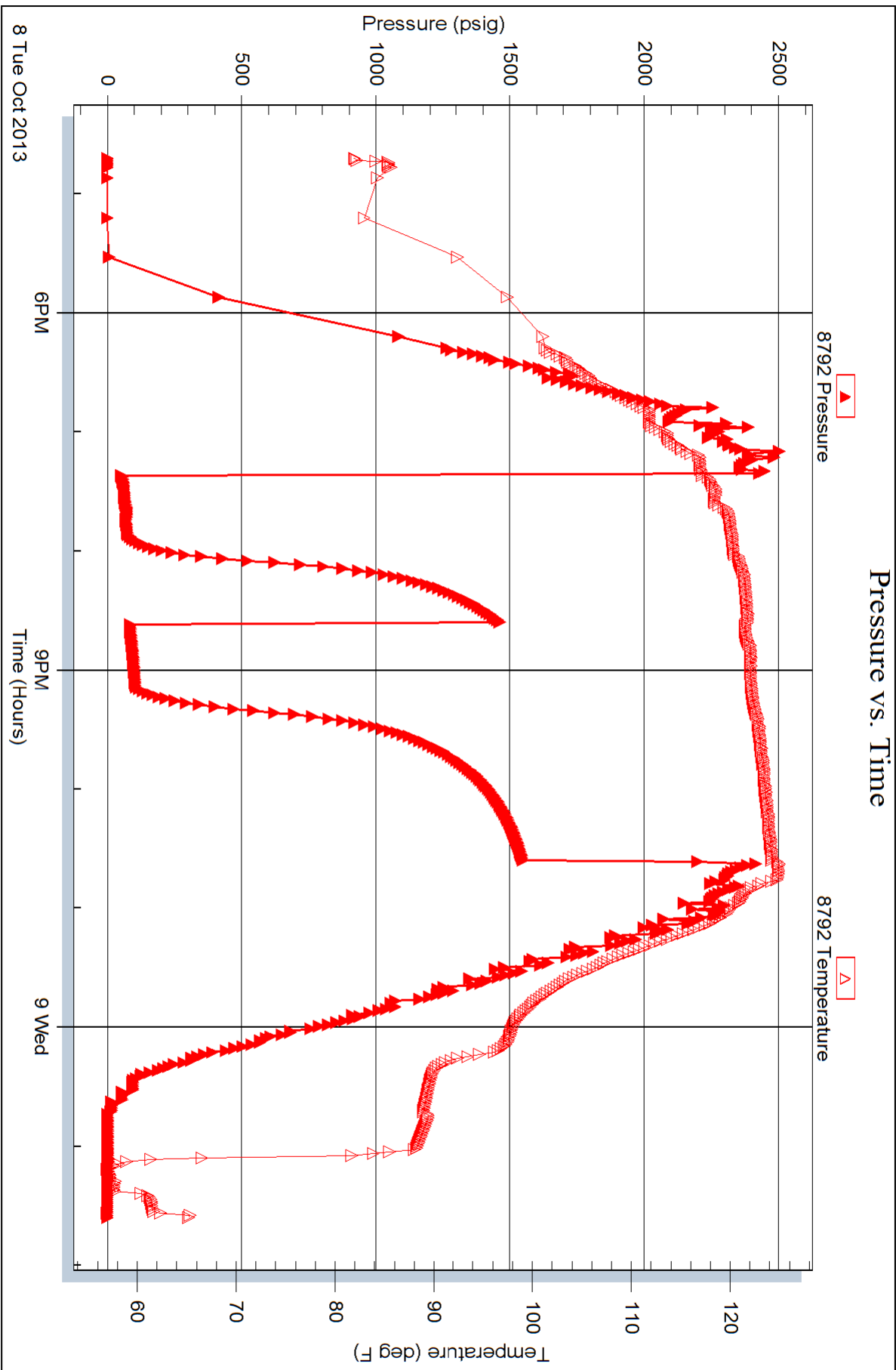


Serial #: 8792

Outside Chieftain Oil Co. Inc.

Lorraine B #1

DST Test Number: 1





TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 52461

Well Name & No. Lorraine "B" # 1 Test No. 1 Date 10-8-13
 Company Chieftain Oil Co. Inc. Elevation 1461 KB 1449 GL
 Address 101 S. 5th St. Kiowa, KS 67070-1912
 Co. Rep / Geo. Ron Molz / Arden Ratzlaff Rig Fossil #3
 Location: Sec. 27 Twp. 33s. Rge. 11w. Co. Barber State KS

Interval Tested 4823 - 4850 Zone Tested Miss.
 Anchor Length 27' Drill Pipe Run 4621 Mud Wt. 9.3
 Top Packer Depth 4818 Drill Collars Run 212 Vis 71
 Bottom Packer Depth 4823 Wt. Pipe Run Ø WL 8.0
 Total Depth 4850 Chlorides 4900 ppm System LCM 3#
 Blow Description IF: Fair blow, 1/2" - 4" ISI: No blow
FF: Weak blow, 1/2" - Dead @ 27 min. FSL: No blow

Rec	Feet of	%gas	%oil	%water	%mud
<u>150</u>	<u>VSLI 0 CGM</u>	<u>10</u>	<u>Trk</u>	<u>90</u>	
<u>60</u>	<u>0 Sptd MW</u>		<u>Trk</u>	<u>60</u>	<u>40</u>

Rec Total 210 BHT 125 Gravity N/C API RW 09 @ 60 °F Chlorides 98000 ppm
 (A) Initial Hydrostatic 2448 Test 1250 T-On Location 1545
 (B) First Initial Flow 48 Jars No jars (DO NOT CHARGE) T-Started 1646
 (C) First Final Flow 73 Safety Joint 75 T-Open 1921
 (D) Initial Shut-In 1464 Circ Sub _____ T-Pulled 2237
 (E) Second Initial Flow 83 Hourly Standby _____ T-Out 0133
 (F) Second Final Flow 103 Mileage 96 148.80
 (G) Final Shut-In 1549 Sampler _____
 (H) Final Hydrostatic 2259 Straddle _____
 Shale Packer _____
 Extra Packer _____
 Extra Recorder _____
 Day Standby _____
 Accessibility _____
 Initial Open 30
 Initial Shut-In 45
 Final Flow 30
 Final Shut-In 90
 Sub Total 1473.80
 Total 1473.80
 MP/DST Disc't _____

Approved By Arden Ratzlaff Our Representative Ryan Reynolds
 TriLOBITE Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.