



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1193788
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: _____

1193788

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	New Gulf Operating LLC
Well Name	Racette 3-10
Doc ID	1193788

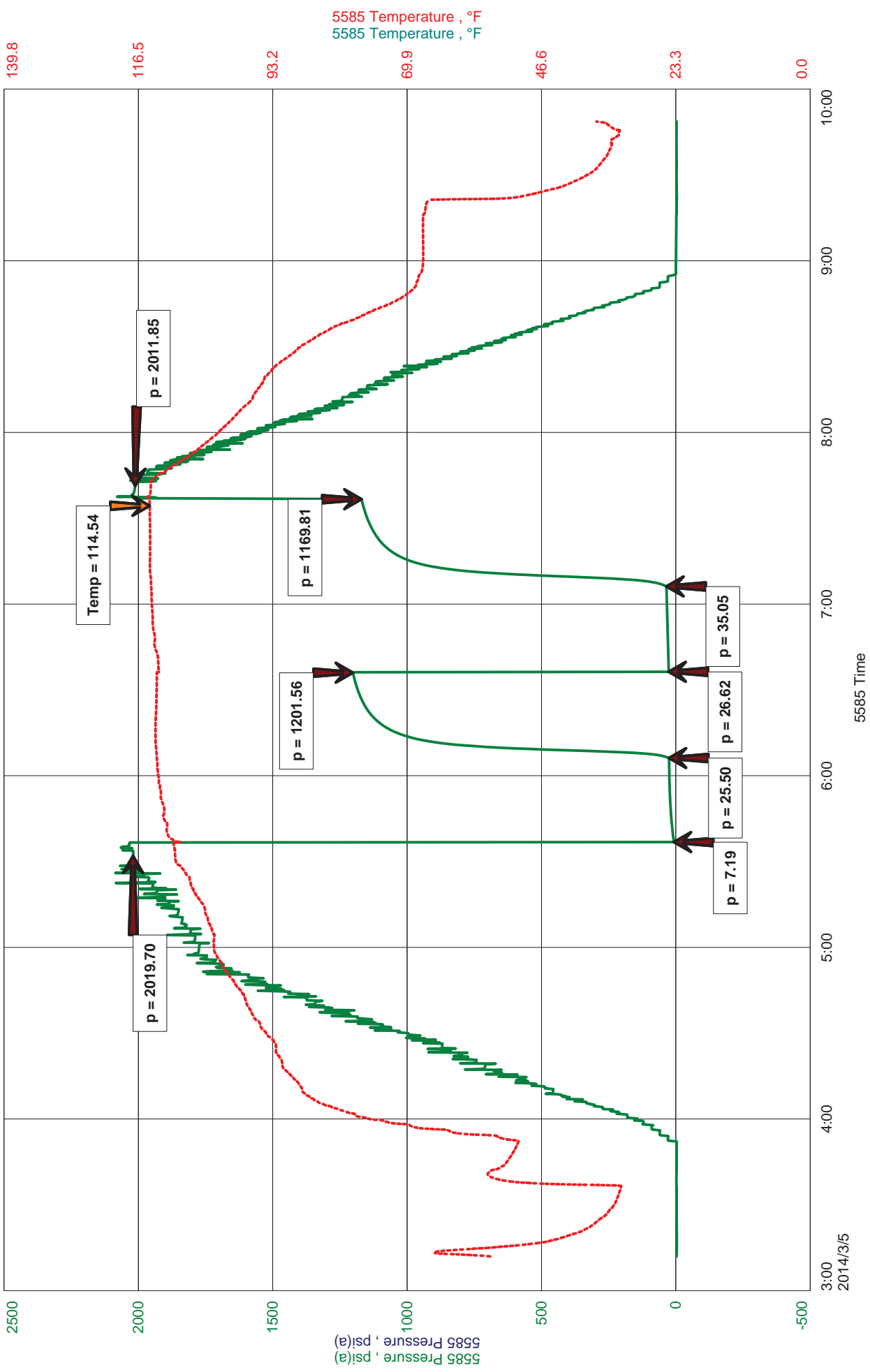
Tops

Name	Top	Datum
Heebner Shale	-974	4010
Lansing	-1017	4053
Muncie Creek Shale	-1154	4190
Stark Shale	-1235	4271
Hushpuckney Shale	-1266	4302
Base of KC	-1290	4326
Marmaton	-1338	4374
Altamont	-1368	4404
Pawnee	-1443	4479
Little Osage Shale	-1466	4502
Excello Shale	-1493	4529
Cherokee Shale	-1523	4559
Johnson Zone	-1564	4600
Morrow	-1590	4642
Mississippian	-1606	5082
Arbuckle	-2046	5158

NEW GULF OPERATING LLC.
DST1 LKC"E-F" 4116-4153
Start Test Date: 2014/03/05
Final Test Date: 2014/03/05

RACETTE 3-10
Formation: DST1 LKC"E-F" 4116-4153
Pool: WILDCAT
Job Number: A022

RACETTE 3-10



DIAMOND TESTING, LLC

TESTER : ANDY CARREIRA
CELL # 620-617-7202

General Information

Company Name	NEW GULF OPERATING LLC.	Contact	JIM HENKLE	Job Number	A022
Well Name	RACETTE 3-10	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/05
Unique Well ID	DST1 LKC"E-F" 4116-4153	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/05
Surface Location	SEC10-12S-32W LOGAN CNTY. KS.	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/05
Well License Number		Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/05
Field	WILDCAT	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/05
Well Type	Vertical	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/05

Test Information

Test Type	CONVENTIONAL
Formation	DST1 LKC"E-F" 4116-4153
Well Fluid Type	01 Oil
Test Purpose	Initial Test

Start Test Date	2014/03/05	Start Test Time	03:12:00
Final Test Date	2014/03/05	Final Test Time	09:48:00

Gauge Name	5585
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Test Results

RECOVERY: 64' OSM

TOOL SAMPLE: 3% OIL, 97% MUD



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: RACETTE 3-10 DST1

TIME ON: 03:12
TIME OFF: 09:48

Company NEW GULF OPERATING LLC. Lease & Well No. RACETTE 3-10
Contractor VAL 4 Charge to NEW GULF OPERATING LLC.
Elevation 3032 KB Formation LKC"E-F" Effective Pay _____ Ft. Ticket No. A022
Date 3-5-14 Sec. 10 Twp. _____ 12 S Range _____ 32 W County LOGAN State KANSAS
Test Approved By JOHN GOLDSMITH Diamond Representative ANDY CARREIRA

Formation Test No. 1 Interval Tested from 4116 ft. to 4153 ft. Total Depth 4153 ft.
Packer Depth 4111 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth 4116 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4097 ft. Recorder Number 5585 Cap. 5,000 P.S.I.
Bottom Recorder Depth (Outside) 4118 ft. Recorder Number 8471 Cap. 10000 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEMICAL Viscosity 50 Drill Collar Length 30 ft. I.D. 2 1/4 in.
Weight 8.8 Water Loss 7.2 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
Chlorides 2000 P.P.M. Drill Pipe Length 4051 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number 1 Test Tool Length 32 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NO Reversed Out NO Anchor Length 37 ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: 1" BLOW (NObb)
2nd Open: 1/2" BLOW (NObb)

Recovered 64 ft. of OSM
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____

Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
TOOL RECOVERY: <u>3% OIL, 97% MUD</u>	Total

Time Set Packer(s) 5:36 AM A.M. P.M. Time Started Off Bottom 7:36 AM A.M. P.M. Maximum Temperature 115

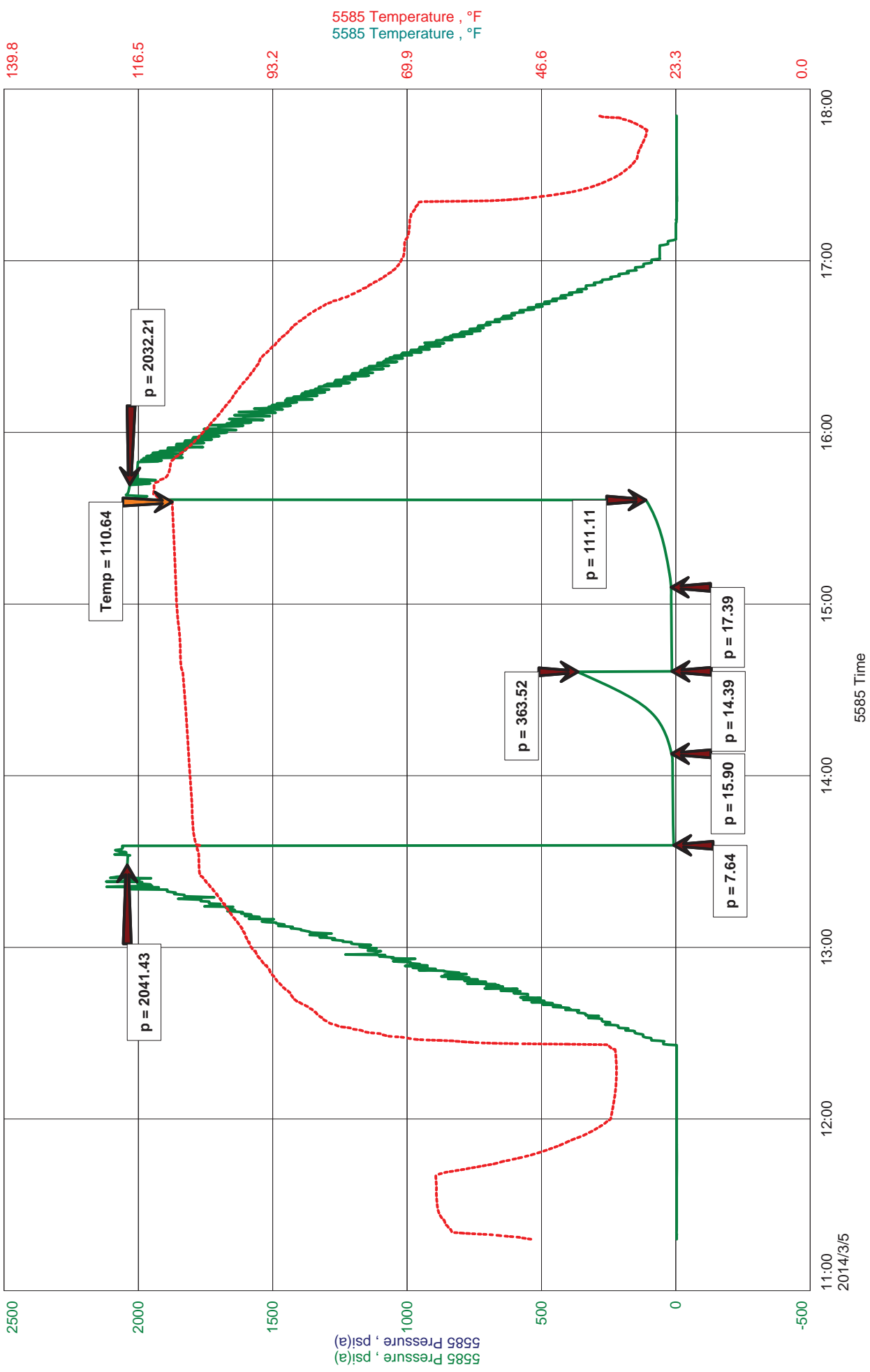
Initial Hydrostatic Pressure..... (A) 2020 P.S.I.
Initial Flow Period..... Minutes 30 (B) 7 P.S.I. to (C) 26 P.S.I.
Initial Closed In Period..... Minutes 30 (D) 1202 P.S.I.
Final Flow Period..... Minutes 30 (E) 27 P.S.I. to (F) 35 P.S.I.
Final Closed In Period..... Minutes 30 (G) 1170 P.S.I.
Final Hydrostatic Pressure..... (H) 2012 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.

NEW GULF OPERATING LLC.
DST2 LKC"H-I" 4186-4252
Start Test Date: 2014/03/05
Final Test Date: 2014/03/06

RACETTE 3-10
Formation: DST2 LKC"H-I" 4186-4252
Pool: WILDCAT
Job Number: A023

RACETTE 3-10



DIAMOND TESTING, LLC

TESTER : ANDY CARREIRA
CELL # 620-617-7202

General Information

Company Name	NEW GULF OPERATING LLC.	Job Number	A023
Contact	JIM HENKLE	Representative	ANDY CARREIRA
Well Name	RACETTE 3-10	Well Operator	NEW GULF OPERATING LLC.
Unique Well ID	DST2 LKC"H-I" 4186-4252	Report Date	2014/03/05
Surface Location	SEC10-12S-32W LOGAN CNTY,KS	Prepared By	ANDY CARREIRA
Well License Number			
Field	WILDCAT		
Well Type	Vertical		

Test Information

Test Type	CONVENTIONAL
Formation	DST2 LKC"H-I" 4186-4252
Well Fluid Type	01 Oil
Test Purpose	Initial Test

Start Test Date	2014/03/05	Start Test Time	11:18:00
Final Test Date	2014/03/06	Final Test Time	05:51:00

Gauge Name	5585
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Test Results

RECOVERY: 10' MUD

TOOL SAMPLE: OIL TRACE, 100% MUD



DIAMOND TESTING
 P.O. Box 157
HOISINGTON, KANSAS 67544
 (800) 542-7313
DRILL-STEM TEST TICKET
 FILE: RACETTE 3-10 DST2

TIME ON: 11:18
 TIME OFF: 05:51

Company NEW GULF OPERATING LLC. Lease & Well No. RACETTE 3-10
 Contractor VAL 4 Charge to NEW GULF OPERATING LLC.
 Elevation 3032 KB Formation LKC"H-I" Effective Pay _____ Ft. Ticket No. A023
 Date 3-5-14 Sec. 10 Twp. _____ 12 S Range _____ 32 W County LOGAN State KANSAS
 Test Approved By JOHN GOLDSMITH Diamond Representative ANDY CARREIRA

Formation Test No. 2 Interval Tested from 4186 ft. to 4252 ft. Total Depth 4252 ft.
 Packer Depth 4181 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
 Packer Depth 4186 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____
 Top Recorder Depth (Inside) 4167 ft. Recorder Number 5585 Cap. 5,000 P.S.I.
 Bottom Recorder Depth (Outside) 4188 ft. Recorder Number 8471 Cap. 10000 P.S.I.
 Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEMICAL Viscosity 50 Drill Collar Length 30 ft. I.D. 2 1/4 in.
 Weight 8.8 Water Loss 7.2 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
 Chlorides 2000 P.P.M. Drill Pipe Length 4124 ft. I.D. 3 1/2 in.
 Jars: Make STERLING Serial Number 1 Test Tool Length 32 ft. Tool Size 3 1/2-IF in.
 Did Well Flow? NO Reversed Out NO Anchor Length 66 ft. Size 4 1/2-FH in.
 Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: 1/2" BLOW, DIED IN 15 MIN. (NObb)
 2nd Open: NO BLOW (NObb)

Recovered 10 ft. of MUD
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____

Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
TOOL RECOVERY: OIL TRACE, 100% MUD	Total

Time Set Packer(s) 1:37 AM A.M. P.M. Time Started Off Bottom 3:37 AM A.M. P.M. Maximum Temperature 111

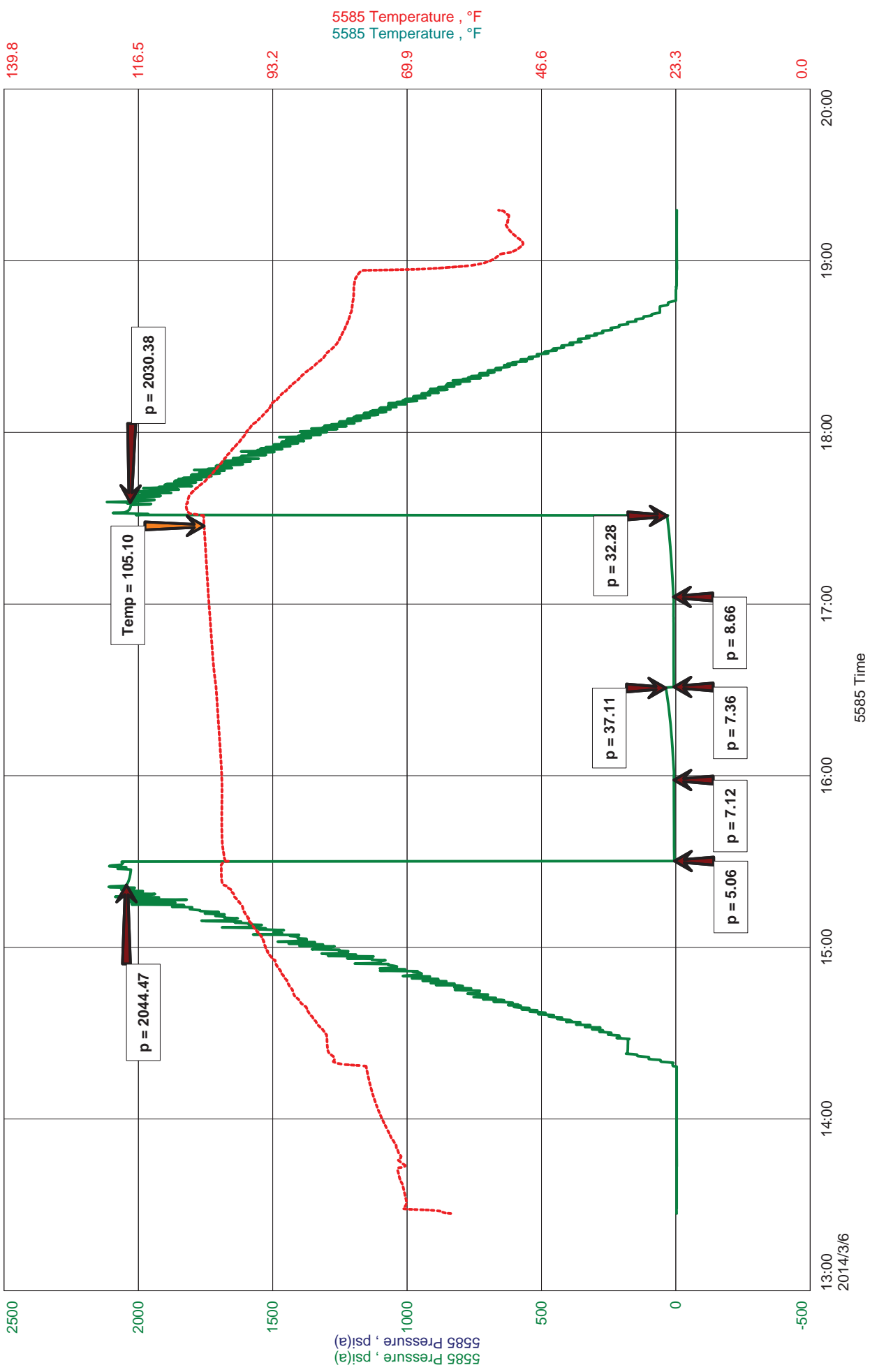
Initial Hydrostatic Pressure..... (A) 2041 P.S.I.
 Initial Flow Period..... Minutes 30 (B) 8 P.S.I. to (C) 16 P.S.I.
 Initial Closed In Period..... Minutes 30 (D) 364 P.S.I.
 Final Flow Period..... Minutes 30 (E) 14 P.S.I. to (F) 17 P.S.I.
 Final Closed In Period..... Minutes 30 (G) 111 P.S.I.
 Final Hydrostatic Pressure..... (H) 2032 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.

NEW GULF OPERATING LLC.
DST3 LKC"J" 4245-4273
Start Test Date: 2014/03/06
Final Test Date: 2014/03/06

RACETTE 3-10
Formation: DST3 LKC"J" 4245-4273
Pool: WILDCAT
Job Number: A024

RACETTE 3-10



DIAMOND TESTING, LLC

TESTER : ANDY CARREIRA
CELL # 620-617-7202

General Information

Company Name	NEW GULF OPERATING LLC.	Job Number	A024
Contact	JIM HENKLE	Representative	ANDY CARREIRA
Well Name	RACETTE 3-10	Well Operator	NEW GULF OPERATING LLC.
Unique Well ID	DST3 LKC"J" 4245-4273	Report Date	2014/03/06
Surface Location	SEC10-12S-32W LOGAN CNTY,KS	Prepared By	ANDY CARREIRA
Well License Number			
Field	WILDCAT		
Well Type	Vertical		

Test Information

Test Type	CONVENTIONAL
Formation	DST3 LKC"J" 4245-4273
Well Fluid Type	01 Oil
Test Purpose	Initial Test

Start Test Date	2014/03/06	Start Test Time	13:27:00
Final Test Date	2014/03/06	Final Test Time	19:17:00

Gauge Name	5585
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Test Results

RECOVERY: 5' MUD

TOOL SAMPLE: 100% MUD



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: RACETTE 3-10 DST3

TIME ON: 13:27
TIME OFF: 19:17

Company NEW GULF OPERATING LLC. Lease & Well No. RACETTE 3-10
Contractor VAL 4 Charge to NEW GULF OPERATING LLC.
Elevation 3032 KB Formation LKC"J" Effective Pay _____ Ft. Ticket No. A024
Date 3-6-14 Sec. 10 Twp. _____ 12 S Range _____ 32 W County LOGAN State KANSAS
Test Approved By JOHN GOLDSMITH Diamond Representative ANDY CARREIRA

Formation Test No. 3 Interval Tested from 4245 ft. to 4273 ft. Total Depth 4273 ft.
Packer Depth 4240 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth 4245 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4226 ft. Recorder Number 5585 Cap. 5,000 P.S.I.
Bottom Recorder Depth (Outside) 4247 ft. Recorder Number 8471 Cap. 10000 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEMICAL Viscosity 48 Drill Collar Length 30 ft. I.D. 2 1/4 in.
Weight 9.2 Water Loss 8.0 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
Chlorides 2200 P.P.M. Drill Pipe Length 4183 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number 1 Test Tool Length 32 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NO Reversed Out NO Anchor Length 28 ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: SURFACE BLOW. DIED IN 10 MIN. (NObb)
2nd Open: NO BLOW (NObb)

Recovered <u>5</u> ft. of <u>MUD</u>	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
TOOL SAMPLE: 100% MUD	Total

Time Set Packer(s) 3:30 PM A.M. P.M. Time Started Off Bottom 5:30 PM A.M. P.M. Maximum Temperature 105

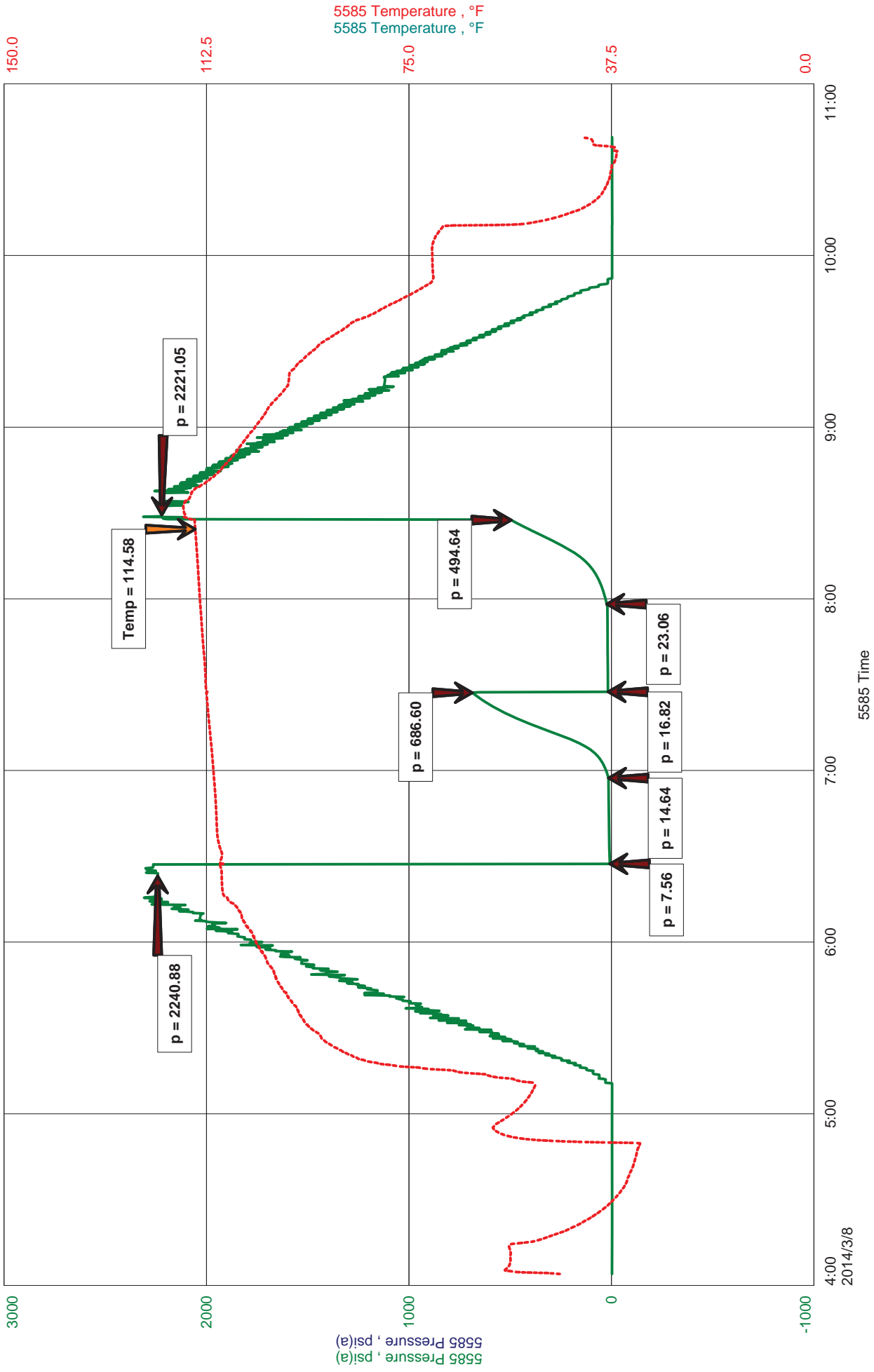
Initial Hydrostatic Pressure..... (A) 2044 P.S.I.
Initial Flow Period..... Minutes 30 (B) 5 P.S.I. to (C) 7 P.S.I.
Initial Closed In Period..... Minutes 30 (D) 37 P.S.I.
Final Flow Period..... Minutes 30 (E) 7 P.S.I. to (F) 9 P.S.I.
Final Closed In Period..... Minutes 30 (G) 32 P.S.I.
Final Hydrostatic Pressure..... (H) 2030 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.

NEW GULF OPERATING LLC
DST4" JOHNSON " 4554-4626
Start Test Date: 2014/03/08
Final Test Date: 2014/03/08

RACETTE 3-10
Formation: DST4" JOHNSON " 4554-4626
Pool: WILDCAT
Job Number: A025

RACETTE 3-10



DIAMOND TESTING, LLC

TESTER : ANDY CARREIRA
CELL # 620-617-7202

General Information

Company Name	NEW GULF OPERATING LLC	Contact	JIM HENKLE	Job Number	A025
Well Name	RACETTE 3-10	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/08
Unique Well ID	DST4" JOHNSON " 4554-4626	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/08
Surface Location	SEC 10-12S-32W LOGAN CNTY,KS.	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/08
Well License Number		Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/08
Field	WILDCAT	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/08
Well Type	Vertical	Well Operator	NEW GULF OPERATING LLC.	Report Date	2014/03/08

Test Information

Test Type	CONVENTIONAL
Formation	DST4" JOHNSON " 4554-4626
Well Fluid Type	01 Oil
Test Purpose	Initial Test

Start Test Date	2014/03/08	Start Test Time	04:04:00
Final Test Date	2014/03/08	Final Test Time	10:42:00

Gauge Name	5585
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Test Results

RECOVERY: 5' OCM 10% OIL, 90% MUD

TOOL SAMPLE: 10% OIL, 90% MUD



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: RACETTE 3-10 DST4

TIME ON: 04:04
TIME OFF: 10:42

Company NEW GULF OPERATING LLC. Lease & Well No. RACETTE 3-10
Contractor VAL 4 Charge to NEW GULF OPERATING LLC.
Elevation 3032 KB Formation JOHNSON Effective Pay _____ Ft. Ticket No. A025
Date 3-8-14 Sec. 10 Twp. _____ 12 S Range _____ 32 W County LOGAN State KANSAS
Test Approved By JOHN GOLDSMITH Diamond Representative ANDY CARREIRA

Formation Test No. 4 Interval Tested from 4554 ft. to 4626 ft. Total Depth 4626 ft.
Packer Depth 4549 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth 4554 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4535 ft. Recorder Number 5585 Cap. 5,000 P.S.I.
Bottom Recorder Depth (Outside) 4556 ft. Recorder Number 8471 Cap. 10000 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEMICAL Viscosity 50 Drill Collar Length 30 ft. I.D. 2 1/4 in.
Weight 9.2 Water Loss 8.0 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
Chlorides 2200 P.P.M. Drill Pipe Length 4492 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number 1 Test Tool Length 32 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NO Reversed Out NO Anchor Length 72 ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: WEAK BLOW. DIED IN 7 MIN. (NObb)
2nd Open: NO BLOW (NObb)

Recovered 5 ft. of OCM 10% OIL, 90% MUD
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____

Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
TOOL SAMPLE: 10% OIL, 90% MUD	Total

Time Set Packer(s) 6:28 AM A.M. P.M. Time Started Off Bottom 8:28 AM A.M. P.M. Maximum Temperature 115

Initial Hydrostatic Pressure..... (A) 2241 P.S.I.
Initial Flow Period..... Minutes 30 (B) 8 P.S.I. to (C) 15 P.S.I.
Initial Closed In Period..... Minutes 30 (D) 687 P.S.I.
Final Flow Period..... Minutes 30 (E) 17 P.S.I. to (F) 23 P.S.I.
Final Closed In Period..... Minutes 30 (G) 495 P.S.I.
Final Hydrostatic Pressure..... (H) 2221 P.S.I.

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CONSOLIDATED
Oil Well Services, LLC

266420

TICKET NUMBER 44545
LOCATION OAKLEY KS.
FOREMAN Damon M. Fuzzy

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT

KS.

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-10-14	5661	RACETTE 3-10	10	12	32	LOGAN
CUSTOMER NEW GULF			OAKLEY 5 1/2 mi			
MAILING ADDRESS 10441 S. REGAL BLVD.			1 W 1/4 S E INTO			
CITY TULSA	STATE OK	ZIP CODE 74133	TRUCK # 405	DRIVER JORDAN L.	TRUCK # 528 T-127	DRIVER JEREMY R
			530 T-129	DOC		
			RIDE ALONE	DIALS		

JOB TYPE 2-STAGE HOLE SIZE 7 7/8 HOLE DEPTH 5157 CASING SIZE & WEIGHT 5 1/2 #15.5
 CASING DEPTH 5073.52 DRILL PIPE _____ TUBING _____ OTHER DV @ 2567'
 SLURRY WEIGHT 14.2/12.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING SHOE 21.23
 DISPLACEMENT 120.24/61.09 DISPLACEMENT PSI _____ MIX PSI _____ RATE 6 BPM

REMARKS: Safety meeting Rig up on VAL #4 Run float equipment cent. ON #1, 2, 3, 6, 9, 12, 15, 18, 59, 61 BASKET ON #60 1/2 way on joint. D.V. on top of #60 @ 2567' circ on bottom for 1HR mixed 500 GAL of mudflush then 300 SKS OWC #5 KOLSEAL shut down washed pump and lines dropped plug then pumped 60 BBL of H2O then 60 BBL of mud lift was #1200 LANDED PLUG @ #1800 RELEASED PRESSURE float held hooked up to ~~60~~ 3HRS mixed 400 SKS 60/40 8% gel 1/4" FLOSEAL WITH #500 OF HOLES PROVIDED BY THE CUSTOMER shut down releases plug washed pump & lines and displaced 6 1/2 BBL of H2O lift was #800 LANDED @ #1900 RELEASED PRESSURE float held THANK YOU DAMON CREW

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	3175.00	3175.00 ✓
5406	10	MILEAGE	5.25	52.50 ✓
5407A	34 tons	ton mileage delivery	1.75	595.00 ✓
1126	300 SKS	OWC	23.70	7110.00 ✓
1110A	1500 #	KOLSEAL	.56	840.00 ✓
1131	450 SKS	60/40 POZ	15.86	7137.00 ✓
1118B	3096 #	BENTONITE	.27	835.92 ✓
1107	113 #	FLOSEAL	2.97	335.61 ✓
11446	500 GAL.	500 GAL MUD FLUSH	1.00	500.00 ✓
4253	1	TYPE PACKER SHOES 5 1/2 6 1/2 X 6 3/4 (E)	1850.00	1850.00 ✓
4130	10	CENTRALIZERS 5 1/2 (W)	61.00	610.00 ✓
4104	1	BASKET 5 1/2 (W)	290.00	290.00 ✓
4277A	1	D.V. TOOL 5 1/2 (W)	4900.00	4900.00 ✓
4454	1	5 1/2 LATCHDOWN PLUG (W)	5671.00	5671.00 ✓
1111	160 #	SALT	N/C	N/C ✓
				28798.03 ✓
				2879.80 ✓
				25918.23 ✓
			7.65	SALES TAX 1719.59 ✓
				ESTIMATED TOTAL 27637.82 ✓

completed

Ravin 3737

AUTHORIZATION

[Signature]

TITLE

DATE

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this fo



CONSOLIDATED
Oil Well Services, LLC

266246

TICKET NUMBER 43110
LOCATION Oakley
FOREMAN Dane Retzlaff

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-27-14	5661	Racette 3-10	10	12	32	KS LEWIS
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			057	Cory D		
CITY			466	Cody R		
STATE			Foreman	Darren R		
ZIP CODE						
Tulsa						
OK						
74133						

Oakley is
6 miles
south
1 west
1/2 south
& into

JOB TYPE Surface HOLE SIZE 12.25 HOLE DEPTH 270 CASING SIZE & WEIGHT 8.625 / 24 LB
CASING DEPTH 866 DRILL PIPE 4.5 TUBING _____ OTHER _____
SLURRY WEIGHT 14.8 SLURRY VOL 1.36 WATER gal/sk 6.5 CEMENT LEFT In CASING 30
DISPLACEMENT 15.6 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on Val Rig 4. Rig up pump truck. Break circulation with rig pump.
Mix 200 sks of common class A cement 3% cc 2% gel. Wash pump and lines. Displace
with 15.5 bbls of water and shut down. Shut in and release pressure. Rig pump truck
down. Cement did circulate.

approx. 5 bbls to pit Cement Did Circulate

THANKS DANE, DARREN & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401s	1	PUMP CHARGE	1150.00	1150.00 ✓
5406	5	MILEAGE	5.25	26.25 ✓
5407	9.4	for mileage Delivery (min)	430.00	430.00 ✓
1104s	200 sks	Class A cement	18.55	3710.00 ✓
1102	564	Calcium chloride	.94	530.16 ✓
1118B	376	Bentonite	1.27	478.52 ✓
1111	100	salt	—	— ✓
			Subtotal	5947.93 ✓
			Less 10%	574.79 ✓
			Subtotal	5353.14 ✓
			SALES TAX	298.94 ✓
			ESTIMATED TOTAL	5652.08 ✓

completed

Revin 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____

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