



1205226

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: 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: _____ _____ |
|--|---|---|

| | |
|-----------|------------------------|
| Form | ACO1 - Well Completion |
| Operator | Anderson Energy, Inc. |
| Well Name | Huddleston 2 |
| Doc ID | 1205226 |

Tops

| Name | Top | Datum |
|----------------|------|-------|
| Heebner | 2162 | -879 |
| Iatan | 2442 | -1159 |
| Lansing | 2588 | -1305 |
| Kansas City | 2763 | -1481 |
| Stark | 2870 | -1587 |
| BKC | 2977 | -1694 |
| Cherokee Sh | 3230 | -1947 |
| Mississippi | 3324 | -2041 |
| Kinderhook Sh. | 3643 | -2360 |
| Simpson Sd | 3708 | -2425 |
| Arbuckle | 3773 | -2490 |
| LTD | 3902 | -2619 |



DIAMOND TESTING
 P.O. Box 157
 HOISINGTON, KANSAS 67544
 (800) 542-7313

TIME ON: 2:38 pm
 TIME OFF: 9:53 pm

DRILL-STEM TEST TICKET
 FILE: **huddle2dst3**

Company Anderson Energy Lease & Well No. Huddleston #2
 Contractor Southwind Rig #8 Charge to Anderson Energy
 Elevation 1274 Sur Formation KC Hertha Effective Pay _____ Ft. Ticket No. S0449
 Date 28-Apr-2014 Sec. 14 Twp. 29S Range 1W County Sedgwick State KANSAS
 Test Approved By Ken LeBlanc Diamond Representative Jacob McCallie

Formation Test No. 3 Interval Tested from 2,897 ft. to 2,920 ft. Total Depth 2,920 ft.

Packer Depth 2,892 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Packer Depth 2,897 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 2,878 ft. Recorder Number 5,951 Cap. 5,000 P.S.I.

Bottom Recorder Depth (Outside) 2,899 ft. Recorder Number 5,584 Cap. 5,000 P.S.I.

Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type Chemical Viscosity 48 Drill Collar Length 121 ft. I.D. 2 1/4 in.

Weight 9.1 Water Loss 8.8 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.

Chlorides 3,200 P.P.M. Drill Pipe Length 2,743 ft. I.D. 3 1/2 in.

Jars: Make STERLING Serial Number 5 Test Tool Length 33 ft. Tool Size 3 1/2-IF in.

Did Well Flow? NA Reversed Out NA Anchor Length 23 ft. Size 4 1/2-FH in.

Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Anchor made up of all perfs Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: 1/4" Blow- Built to 7 1/2" in 30 min NOBB

2nd Open: WSB- Built to BB in 43 1/2 min 1/4" BB

Recovered 94 ft. of GIP

Recovered 5 ft. of CO 100% O

Recovered 36 ft. of SLOC&WCM 1% O 3% W 52% M

Recovered 114 ft. of SLOCHWCM 1% O 47% W 52% M

Recovered 155 ft. of TOTAL FLUID

Recovered _____ ft. of PH: 7 RW: .23 @ 60 degrees F

Remarks: CHLORIDES: 35,000 ppm

Tool Sample: 2% O 95% W 3% M

Time Set Packer(s) 4:17 pm ^{AM} Time Started Off Bottom 8:02 pm ^{AM} Maximum Temperature 99

Initial Hydrostatic Pressure..... (A) 1,364 P.S.I.

Initial Flow Period..... Minutes 30 (B) 8 P.S.I. to (C) 43 P.S.I.

Initial Closed In Period..... Minutes 45 (D) 849 P.S.I.

Final Flow Period..... Minutes 60 (E) 50 P.S.I. to (F) 77 P.S.I.

Final Closed In Period..... Minutes 90 (G) 854 P.S.I.

Final Hydrostatic Pressure..... (H) 1,362 P.S.I.

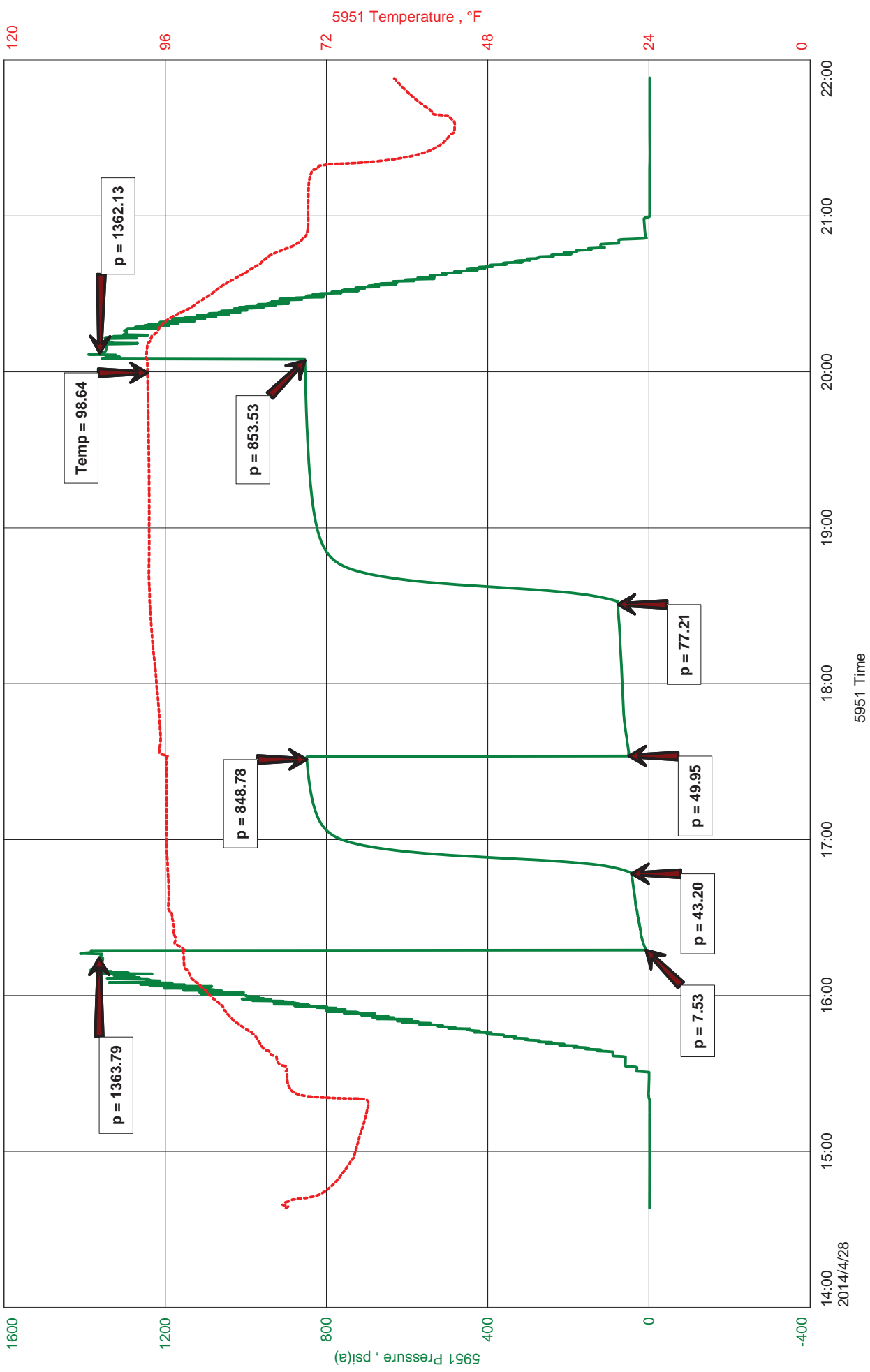
Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

| | |
|---------------|---------------|
| Price Job | |
| Other Charges | |
| Insurance | <u>\$0.00</u> |
| Total | |

Anderson Energy
DST #3 KC/Hertha 2897-2920'
Start Test Date: 2014/04/28
Final Test Date: 2014/04/28

Huddleston #2
Formation: DST #3 KC/Hertha 2897-2920'
Pool: Pool Ext.
Job Number: S0449

Huddleston #2





Diamond Testing General Report

**JAKE
FAHRENBRUCH - TESTER
Cell: (620) 282-8977**

P.O. Box 157
Hoisington KS 67544
Office: (800) 542-7313

General Information

| | | | |
|----------------------|-----------------|-------------------------|-------------------------------|
| Company Name | Anderson Energy | Well Name | Huddleston #2 |
| Well Operator | Anderson Energy | Unique Well ID | DST #3 KC/Hertha 2897-2920' |
| Contact | Thomas Anderson | Surface Location | SEC 14-29S-1W Sedgwick County |
| Site Contact | Ken LeBlanc | Test Unit | 5 |
| Field | Unknown | Pool | Pool Ext. |
| Well Type | Vertical | Job Number | S0449 |
| Prepared By | Jacob McCallie | Qualified By | Ken LeBlanc |

Test Information

| | | | |
|------------------------|-----------------------------|------------------------|--------------|
| Test Type | Drill Stem Test | Test Purpose | Initial Test |
| Formation | DST #3 KC/Hertha 2897-2920' | Gauge Name | 5951 |
| Start Test Date | 2014/04/28 | Start Test Time | 14:38:00 |
| Final Test Date | 2014/04/28 | Final Test Time | 21:53:00 |

Test Results

RECOVERED:

| | | |
|------|-------------|------------------|
| 94' | GIP | |
| 5' | CO | 100% O |
| 36' | SLOC&WCM | 1% O 3% W 96%M |
| 114' | SLOCHWCM | 1% O 47% W 52% M |
| 155' | TOTAL FLUID | |

PH: 7
RW: .23 @ 60 degrees F
Chlorides: 35,000 ppm

TOOL SAMPLE:

2% O 95% W 3% M

Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

October 24, 2014

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

Re: ACO-1
API 15-173-21034-00-00
Huddleston 2
SE/4 Sec.14-29S-01W
Sedgwick County, Kansas

Dear Thomas Anderson:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 04/22/2014 and the ACO-1 was received on October 20, 2014 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department

ALLIED OIL & GAS SERVICES, LLC 062768

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
Madame Lodge ks

| | | | | | | | |
|----------------------------------|----------------|---------------------------------|------------------------------------|---------------------------|-----------------------------|-------------------------|--------------------------|
| DATE <u>4-23-14</u> | SEC. <u>14</u> | TWP. <u>29S</u> | RANGE <u>1W</u> | CALLED OUT <u>9:10 Pm</u> | ON LOCATION <u>11:30 Pm</u> | JOB START <u>3:00 A</u> | JOB FINISH <u>3:25 A</u> |
| LEASE <u>Hullster</u> | | WELL# <u>2</u> | LOCATION <u>Clearwater Ks E 5m</u> | | | COUNTY <u>Sedgewick</u> | STATE <u>Ks</u> |
| OLD OR <u>(NEW)</u> (Circle one) | | LOCATION <u>1N 1/2 E N into</u> | | | | | |

CONTRACTOR Southwind 8
 TYPE OF JOB Conductor
 HOLE SIZE 17 1/2 T.D. 118
 CASING SIZE 13 3/8 DEPTH 118
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT 20'
 CEMENT LEFT IN CSG. 20'
 PERFS. _____
 DISPLACEMENT 14 1/2 bbl fresh
 EQUIPMENT _____

PUMP TRUCK CEMENTER Dale Heard
 # 548/545 HELPER Justin Rower
 BULK TRUCK _____
 # 381/252 DRIVER Ct Rackley
 BULK TRUCK _____
 # _____ DRIVER _____

OWNER Anderson Energy
 CEMENT AMOUNT ORDERED 125 sx A + 3' CC
 COMMON A 125 sx @ 17.90 2232.50
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE 5 sx @ 64.00 320.00
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

REMARKS:

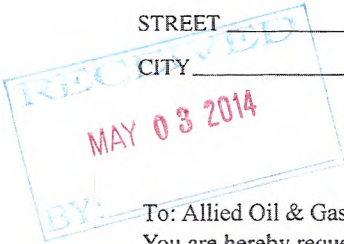
On Location Still drilling
Safety meeting Rig up Safety
meeting Break Circ. Pressure Test
Pump spacer Mix + pump cement
Start disp + wash up. Continue
displacement. Stop Shut in
Release pressure

511.50 = 20% TOTAL 2557.50

SERVICE

DEPTH OF JOB 118'
 PUMP TRUCK CHARGE 1512.28
 L.V. 71 @ 4.40 312.40
 MILEAGE 71 @ 7.70 546.70
 MANIFOLD _____ @ _____
Handling 131.28 @ 2.48 325.60
Mileage 6.05 @ 7.60 1117.06
762.90 = 20% TOTAL 3814.51

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



To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME X Parrell Yo-tt
 SIGNATURE X Parrell Yo-tt

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

SALES TAX (If Any) _____
 TOTAL CHARGES 4372.01
 DISCOUNT _____ IF PAID IN 30 DAYS
Net - 5097.68

