Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1217105

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 #	API No. 15						
Name:	Spot Description:						
Address 1:							
Address 2:	Feet from North / South Line of Section						
City: State: Zip:+	Feet from East / West Line of Section						
Contact Person:	Footages Calculated from Nearest Outside Section Corner:						
Phone: ()							
CONTRACTOR: License #	GPS Location: Lat:, Long:						
Name:	(e.g. xx.xxxx) (e.gxxx.xxxx)						
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84						
Purchaser:	County:						
Designate Type of Completion:	Lease Name: Well #:						
New Well Re-Entry Workover	Field Name:						
	Producing Formation:						
	Elevation: Ground: Kelly Bushing:						
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:						
G OG GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet						
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No						
	If yes, show depth set: Feet						
If Workover/Re-entry: Old Well Info as follows:							
Operator:	If Alternate II completion, cement circulated from:						
Well Name:	feet depth to:w/sx cmt.						
Original Comp. Date: Original Total Depth:							
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan						
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)						
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls						
Dual Completion Permit #:	Dewatering method used:						
SWD Permit #:	Location of fluid disposal if hauled offsite:						
ENHR Permit #:							
GSW Permit #:	Operator Name:						
	Lease Name: License #:						
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West						
Recompletion Date Recompletion Date	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:					

	Page Two	1217105
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	
INCTOLICTIONS. Chow important tang of formations panetrated Da	tail all aaraa Banart all fi	nal capica of drill atoma toata giving interval toatad, time toal

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 (Attach Additional She	eets)	Yes No	L	.og Formatio	n (Top), Depth and	d Datum	Sample
Samples Sent to Geolog		Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING Report all strings set-c			on, 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 / SQL	JEEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and Pe	ercent Additives	
Protect Casing							
Plug Off Zone							
Did you perform a hydraulic	fracturing treatment of	on this well?	Yes	No (If No, skip	questions 2 an	d 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)							of the ACO_{-1}

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated					e			ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Size: Set At: Packer At:				At:	Liner F	Run:	No		
Date of First, Resumed	irst, Resumed Production, SWD or ENHR. Producing Method:			Gas Lift	Other (Explain)					
Estimated Production Per 24 Hours		Oil Bb	ls.	s. Gas Mcf Wat		Wate	er	Bbls.	Gas-Oil Ratio	Gravity
				1						
DISPOSITI	DISPOSITION OF GAS: METHOD OF COMPL			OF COMPLE	TION:		PRODUCTION INTER	VAL:		
Vented Solo	d 🗌 l	Jsed on Lease	ed on Lease Open Hole Perf. Dually (Submit A					Commingled (Submit ACO-4)		
(If vented, Su	bmit ACC	-18.)		Other <i>(Specify)</i> _						

Form	ACO1 - Well Completion
Operator	LB Exploration, Inc.
Well Name	Boyd 2
Doc ID	1217105

All Electric Logs Run

Dual Compensated Porosity
Dual Induction
Microresistivity
Borehole Compensated Sonic

QUALITY WELL SERVICE, INC. Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410 Office / Fax 620-672-3663

Rich's Cell 620-727-3409 Brady's Cell 620-727-6964

Sec.	Twp.	Range	(County	State	On Location	Finish			
Date 2-28-14 34	32	(3	Bos	zbor	K.S.	3:30 AM	7 pm			
Lease Boyd	Well No.	#2	Locati	on						
Contractor NINNES	CAH				B. EtPLORA	tion				
Type Job Surface				To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish						
Hole Size 95/8 T.D. 356				cementer an	d helper to assist owr	ner or contractor to de	o work as listed.			
Csg. 8 5/8	Depth	354		Charge L -	B. Explore	tion				
Tbg. Size	Depth			Street 21	35 2NO 1	2				
Tool	Depth			City Holy	Rand	State K.S.				
Cement Left in Csg.	Shoe J	oint		The above wa	s done to satisfaction an	nd supervision of owner	agent or contractor.			
Meas Line	Displac	e 21.4		Cement Amo	ount Ordered	e sts col	40 3 2015			
EQUIP	MENT			3305	× 60/40 0	7% Gel 3%000	14 C.F.			
Pumptrk 6 No. Sem				Common	65 03	rd 270sx				
Bulktrk 9 No. Pete				Poz. Mix	05					
Bulktrk No.				Gel. 5						
Pickup No.				Calcium ()					
JOB SERVICES	S & REMA	RKS		Hulls						
Rat Hole		ay.		Salt						
Mouse Hole				Flowseal 67.50						
Centralizers				Kol-Seal						
Baskets				Mud CLR 48						
D/V or Port Collar	1		3	CFL-117 or CD110 CAF 38						
back ciscula	trong	with Mud	Pump.	Sand						
punped con	ent	2705	KS	Handling 345						
displace 2	1-4	BBL		Mileage	5					
Shat in					FLOAT EQUIPM	ENT				
				Guide Shoe						
Cement did cilc	ulate	to suifa	C.C.	Centralizer						
				Baskets						
				AFU Inserts						
				Float Shoe						
				Latch Down						
				LMV	15					
				Service supervision						
				Pumptrk Charge Surface						
				Mileage	5 x 2					
						Tax				
	,					Discount	5. 			
X Signature	a.r	Sand	<u></u>			Total Charge	Taylor Printing, Inc.			

5982



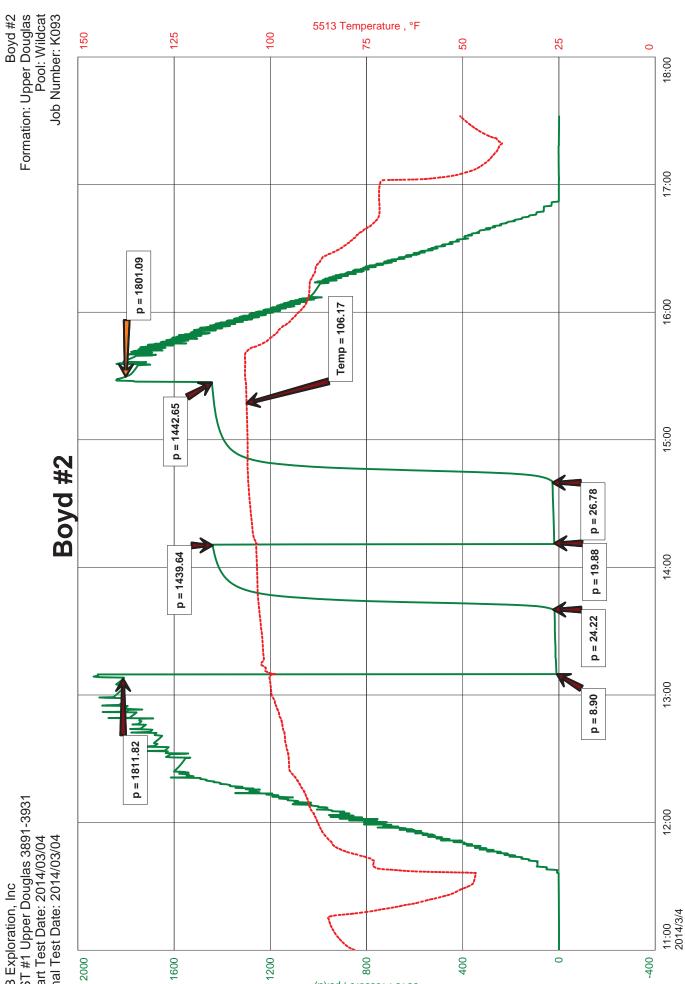
3

TREATMENT REPORT

Losse $\int_{1}^{\infty} \sqrt{9}$ Well #ZCasing C 1/2Depth 4/6/2County (5/4) 8/2State MSFree Depth 26C 1/WLON 95 T / in 1Formight 05 1 2 0Legal Descriptions 4 - 3/2 - 13PIPE DATAPERFORATING DATAFLUD USEDTREATMENT RESUMEDepth 4/6/20Depth 4/6/20Max PressPart / 5 - 5 / 4 / 4 / 72PERS 3 / 3 / 3 / 2 / 2 / 3 / 2 / 2 / 3 / 2 / 2	Customer		XPluiar		ase No.	<u> </u>				Date	$\frac{1}{2}$	'N 14	
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Formation of ST2 uDegrif user for the set of the			Pratt			. <u></u>	Casing	1/2 Depth	4690	County 15	· · · · ·	1	~
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The Pressure Pressure Bbb. Pumped Hate Service Log 9:40 ⁴⁴ / /			· .	Mcgr	Aw			14.14 1	1509				
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12.30 1 1 HOUK UP TO CASING / BITAN CITC W RIMINAL 1:47 3:00 5 4.5 PMMP 5 BBI H20 1:51 300 5 4.5 PMMP 5 BBI H20 1:52 3:00 6 5 PMP 5 BBI H20 1:52 3:00 6 5 PMP 5 BBI H20 1:52 3:00 6 5 PMP 5 BBI H20 1:54 3:00 6 5 PMP 5 BBI H20 1:54 3:00 6 5 PMP 5 BBI H20 1:54 3:00 41 5 PMP 50 SK, AA-2 2:52 - - 43 WASh PMP time time, Drop Plug 2:00 - 5.5 57.07 DISPIREMENT, 2%, VeL 2:14 3:00 - 55 57.07 DISPIREMENT, 2%, VeL 2:24 3:00 113 Plug Borm P3E Th IS00 Feleban thi	an and the second se							6,	7.8	11, 12, 1	13,14		· · · · · · · · · · · · · · · · · · ·
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7:21 3,00 5 Lift Pressure 7:24 400 90 5 STOP IONATING 7:26 400 100 3 Slow IAN 2:31 700/1500 113 Plug Down Pst-To 1500 Felcased the IP 2:45 7,5 Plug CAT + Mouse hole Slow Plete Jub Iow Plete The Awk Kon The Awk Kon	2:02			-									· · · · · · · · · · · · · · · · · · ·
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245 7,5 Plug GAT + MOUNT hole (112 TXIN JUB JUB ISMPLETE THANK YOU M, ME MART	2:26						3					· · · ·	
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10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • (620) 672-1201 • Fax (620) 672-5383					:				10 - (00	0) 670 -			0 5000

10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 6/124-8613 • (620) 6/2-1201 • Fax (620) 6/2-5383

L B Exploration, Inc DST #1 Upper Douglas 3891-3931 Start Test Date: 2014/03/04 Final Test Date: 2014/03/04



(a)isq , surserre , psi(a)

5513 Time

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JASON MCLEMORE



CELL # 620-617-0527

General Information

Company Name L B E Contact Well Name Unique Well ID Surface Location Field Well Type	Mike Petermann Boyd #2 DST #1 Upper Douglas 3891-3931 34-32s-13w-Barber Wildcat	Representative Well Operator	K093 Jason McLemore L B Exploration, Inc Jason McLemore Steve Petermann #7
Test Information			
Test Type Formation Well Fluid Type Test Purpose (AEUB)	Drill Stem Test Upper Douglas 01 Oil Initial Test	Report Date Prepared By	Jason McLemore L B Exploration, Inc 2014/03/04 Jason McLemore
Start Test Date Final Test Date		Start Test Time Final Test Time	11:00:00 17:35:00

Test Results

RECOVERED:

25	Watery Mud, 30% Water, 70% Mud
25	TOTAL FLUID

CHLORIDES: 20000 PH: 9

TOOL SAMPLE: Watery Mud



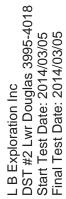
DIAMOND TESTING P.O. Box 157 HOISINGTON, KANSAS 67544 (800) 542-7313 DRILL-STEM TEST TICKET

TIME ON: 11:00 AM

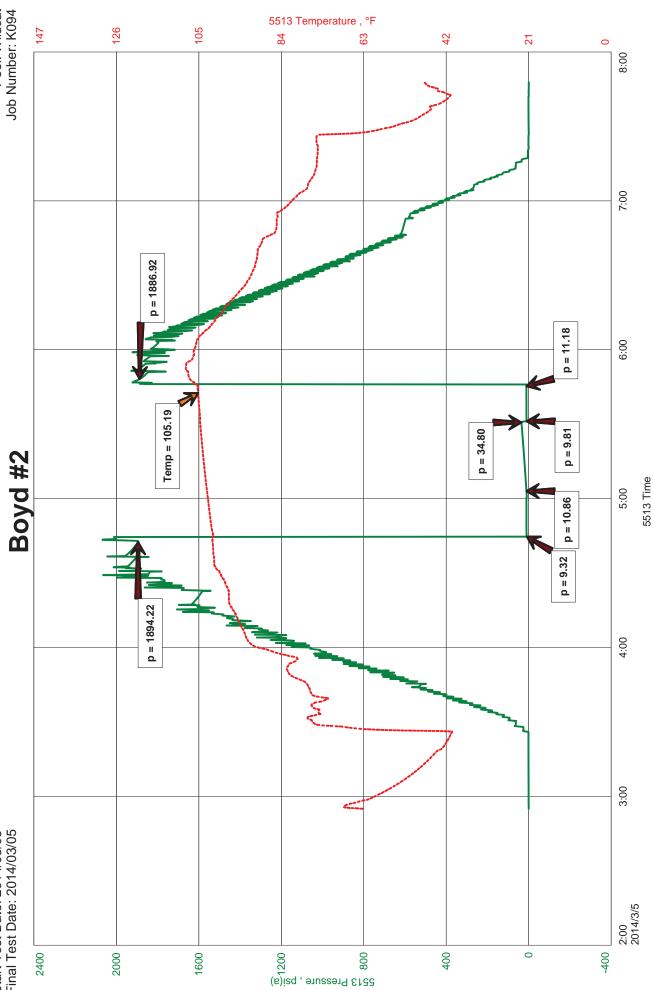
TIME OFF: 17:35 PM

FILE: boyd	2dst1
Company LB Exploration, Inc	Lease & Well No. Boyd #2
Contractor_Ninnescah	Charge to LB Exploration, Inc.
ElevationGL 1781FormationUpper Doug	las Effective PayFt. Ticket NoK093
Date 3-4-14 Sec. 34 Twp. 32 S	Range13 W CountyBarber StateKANSAS
Test Approved By Steve Peterman	Diamond Representative Jason McLemore
Formation Test No. 1 Interval Tested from	3891 ft. to 3931 ft. Total Depth 3931 ft.
Packer Depth3886 ft. Size6 3/4in.	
Packer Depth 3891 ft. Size6 3/4 in.	Packer depth ft. Size 6 3/4 in.
Depth of Selective Zone Set	
Top Recorder Depth (Inside) 3879 ft.	Recorder Number 5513 Cap. 5000 P.S.I.
Bottom Recorder Depth (Outside) 3880 ft.	Recorder Number 5588 Cap. 6000 P.S.I.
Below Straddle Recorder Depth ft.	Recorder NumberCapP.S.I.
Mud Type Chemical Viscosity 52	Drill Collar Length 0 ft. I.D. 2 1/4 in
Weight 8.8 Water Loss 8.2 c	c. Weight Pipe Length0 ft. I.D2 7/8 ir
Chlorides 4000 P.P.M.	Drill Pipe Length 3866 ft. I.D 3 1/2 in
Jars: MakeSTERLINGSerial NumberNA	_ Test Tool Length25 ft. Tool Size3 1/2-IF in
Did Well Flow?NoReversed OutNo	Anchor Length 40 ft. Size 4 1/2-FH ir
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in.	31' DP in Anchor Surface Choke Size 1 in. Bottom Choke Size 5/8 in
Blow: 1st Open: Weak Blow, Built to 2-1/8", No Blowk	back
2nd Open: Weak Blow, Built to 1", No Blowback	
Recovered 25 ft. of Watery Mud, 30% Water, 70% Mud	an ann an tha an an tha ann an tha bha ann an tha bha ann an tha an
Recovered 25 ft. of TOTAL FLUID	
Recovered ft. of	
Recovered ft. of CHLORIDES: 20000	
Recoveredft. of PH: 9	Price Job
Recoveredft. of	Other Charges
Remarks: TOOL SAMPLE: Watery Mud	Insurance
	Total
Time Set Packer(s) 1:12 PM P.M. Time Started Off E	Bottom3:27 PMP.M. Maximum Temperature106
Initial Hydrostatic Pressure	(A) <u>1812 P.S.I.</u>
Initial Flow Period	(B) 9 P.S.I. to (C) 24 P.S.I.
Initial Closed In Period	(D)F.3.1.
Final Flow Period	(E) 20 P.S.I. to (F) 27 P.S.I.
Final Closed In Period	
Final Hydrostatic Pressure	(H) 1801 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.







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JASON MCLEMORE



CELL # 620-617-0527

General Information

Company Name Contact Well Name Unique Well ID Surface Location Field Well Type	DST #2 Lwr Douglas 3995-4018 34-32-13 Barber Wildcat	Representative Well Operator	K094 Jason McLemore L B Exploration Inc Jason McLemore Steve Petermann #7
Test Information Test Type Formation Well Fluid Type Test Purpose (AB		Report Date Prepared By	Jason McLemore L B Exploration Inc 2014/03/05 Jason McLemore

Test Results

RECOVERED:

- Drilling Mud TOTAL FLUID 1
- 1



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

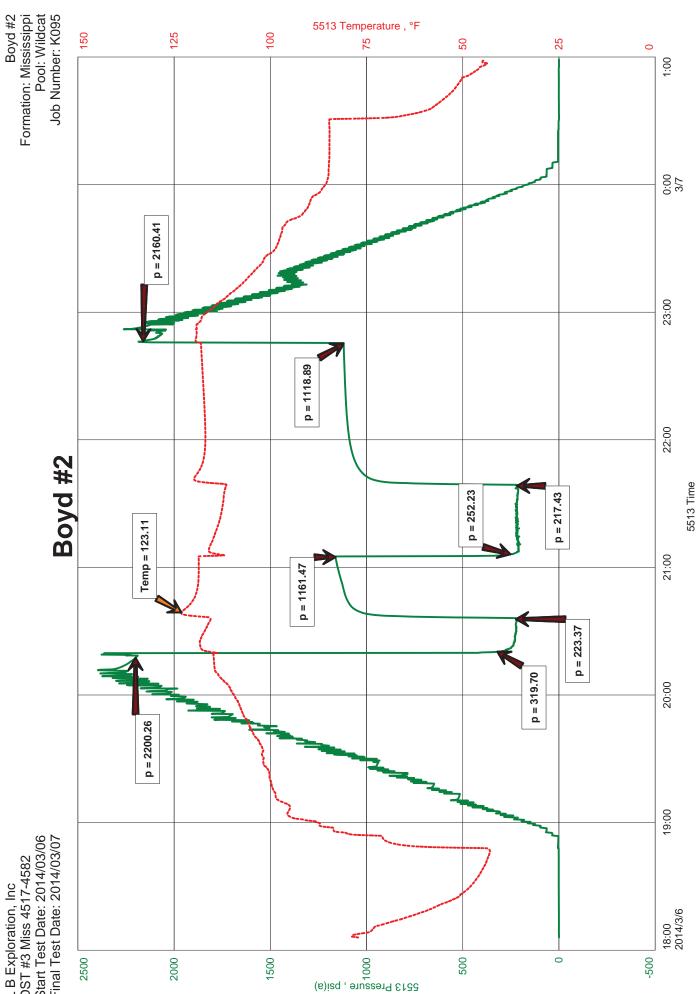
TIME ON: 2:55 AM

TIME OFF: 7:48 AM

FILE:	boyd2d	st2					
Company LB Exploration, Inc		Lease & Well No. B	oyd #2				
Contractor_Ninnescah		Charge to LB Explo	ration, Inc.				
ElevationGL 1781FormationLower	r Douglas	SEffective Pay		_Ft.	Ticket No.		K094
Date 3-5-14 Sec. 34 Twp.	32 S Ra	inge	13 W County_	Bai	rber s	State_	KANSAS
Test Approved By Steve Petermann		Diamond Representati	ve	Jasor	McLemo	re	
Formation Test No. 2 Interval Tested from	39	95 ft. to	4018 ft Tot	al Denti	1		4018 ft.
0000	in.	Packer depth					in.
0005	n.	Packer depth				3/4	in.
Depth of Selective Zone Set							
	3 _{ft.}	Recorder Number	551	3 Cap.		500) P.S.I.
Bottom Recorder Depth (Outside) 398		Recorder Number_				1.1.1	
Below Straddle Recorder Depth	ft.	Recorder Number_					P.S.I.
Mud Type Chemical Viscosity 52		Drill Collar Length			D		
Weight 8.8 Water Loss 8.2	CC.	Weight Pipe Length			.D.		
Chlorides 4000 P.F		Drill Pipe Length			D.	3 1/	2 ir
Jars: Make STERLING Serial Number NA		Test Tool Length			ool Size _	3 1/	2-IFir
Did Well Flow? No Reversed Out No		Anchor Length	2	3_ft. 5	Size	4 1/	2-FH ir
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 X	H_in.	Surface Choke Size	1	_in. E	Bottom Cho	ke Siz	eir
Blow: 1st Open: Weak Surface Blow, No Blowba	ck						
^{2nd Open:} Dead, Pull Tool	01-030-0						ų.
Recovered 1 ft. of Drilling Mud							
Recovered 1 ft. of TOTAL FLUID							
Recovered ft. of							
Recovered ft. of							
Recoveredft. of				Price .	dop		
Recoveredft. of				Other	Charges		
Remarks:				Insura	nce		
A.M.				Total			
Time Set Packer(s) 4:46 AM P.M. Time Starte	d Off Bot	5:46 AM	A.M. P.M. Ma	ximum 1	Femperatu	re	105
Initial Hydrostatic Pressure		(A)	1894 P.S.I.				
Initial Flow Period Minutes	15	(B)	9 P.S.I. te	o (C)		11 _F	P.S.I.
Initial Closed In Period Minutes	30	(D)	35 P.S.I.				
Final Flow Period Minutes	15	(E)	10 P.S.I. to	o (F)		11 _P	.S.I.
Final Closed In PeriodMinutes	0	(G)	NA P.S.I.				
Final Hydrostatic Pressure		(H)	1887 _{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.

L B Exploration, Inc DST #3 Miss 4517-4582 Start Test Date: 2014/03/06 Final Test Date: 2014/03/07



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DIAMOND TESTING P. O. Box 157 HOISINGTON, KANSAS 67544 (316) 653-7550

GAS VOLUME REPORT

Company_ L B Exploration, Inc.	Lease & Well NoBoyd #2	
Date <u>3-6-14 Sec. ³⁴Twp. 32</u> S Rge. <u>13</u> V	Dorbor	KS
Drilling ContractorNinnescah #101	Formation Mississippi	DST No3
Remarks: Gas to Surface in 3 Minutes		

INITIAL FLOW

Time O'Clock	Orifice Size	Gauge	CF/D
5 min	1/2 _{in.}	28# _{in.}	222,000
10 min	1/2 in.	40# in.	285,000
15 min	1/2 _{in.}	40# in.	285,000
	in.	in.	
: 	in.	in,	
	in.	ຳກ.	
	in.	in.	
	in.	in.	
	ìn,	in.	
	in.	in.	

FINAL FLOW IW

Time O'Clock	Orifice Size	Gauge	CF/D
10 min	1/2 in,	45# _{in.}	311,000
20 min	1/2 in.	48# in.	326,000
30 min	1/2 _{in.}	48# in.	326,000
	in.	in.	
	in,	in.	
	in.	in,	
	in,	in.	
	in.	in.	
	ìn.	in,	
	in.	in.	

FINAL FLOW

JASON MCLEMORE



CELL # 620-617-0527

General Information

Company Name L Contact Well Name Unique Well ID Surface Location Field Well Type	DST #3 Miss 4517-4582 34-32s-13w-Barber Wildcat	Representative Well Operator	K095 Jason McLemore L B Exploration, Inc Jason McLemore Steve Petermann #7
Test Information			
Test Type Formation Well Fluid Type Test Purpose (AEU	01 Oil	Report Date Prepared By	Jason McLemore L B Exploration, Inc 2014/03/07 Jason McLemore
Start Test Date Final Test Date		Start Test Time Final Test Time	18:06:00 01:00:00

Test Results

RECOVERED:

150	Gassy Muddy Oil, 50% Gas, 25% Oil, 25% Mud
150	TOTAL FLUID



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

TIME ON: 6:06 PM

TIME OFF: 1:00 AM

	FIL	E: boyd2d	st3				
Company_LB Exploration, Inc			_Lease & Well NoB	oyd #2			
Contractor Ninnescah			_ Charge to LB Explo	oration, Inc.			
ElevationGL 1758Forma	ation	Mississip	Di_Effective Pay		_Ft. Ticket	No	K095
Date 3-6-14 Sec. 34	Twp		ange			State_	KANSAS
Test Approved By Steve Petermann			_ Diamond Representat	ive	Jason McLe	emore	
Formation Test No. 3	nterval Tested from	45	517 ft. to	4582 ft. Total	Depth		4582 ft.
Packer Depth4512 ft.			Packer depth		1.5		in.
Packer Depth4517 ft.			Packer depth			6 3/4	in.
Depth of Selective Zone Set							
Top Recorder Depth (Inside)	Z	1505 _{ft.}	Recorder Number	5513	Cap.	500	0 P.S.I.
Bottom Recorder Depth (Outside)	2	506 _{ft.}	Recorder Number_	5588	Cap.	600	⁰ P.S.I.
Below Straddle Recorder Depth		ft.	Recorder Number_		Сар		
	ty56		Drill Collar Length_		t. I.D		
Weight 9.5 Water Loss	s11.2	CC.	Weight Pipe Length	0	ft. I.D	2 7/	8 ir
Chlorides		P.P.M.	Drill Pipe Length	4492	ft. I.D	3 1/	'2in
Jars: Make STERLING Serial Nu	umberN	Α	Test Tool Length	25	ft. Tool Siz	e3 1/	2-IF in
Did Well Flow? No Rev	versed Out	No		65	ft. Size	4 1/	2-FH ir
Main Hole Size 7 7/8 Too	ol Joint Size 4 1/2	2 XH _in.	32' DP in Anchor Surface Choke Size	<u> </u>	n. Bottom	Choke Siz	ze_ 5/8 _ ir
Blow: 1st Open: Strong, BOB in	10 Sec., Gas	To Surfa	ace in 3 Min., (Gaging Gas.	No Blow	/back	
^{2nd Open:} Strong, BOB on 0	Open, Gaging (Gas. Blov	vback Built to 9	11			
Recovered 150 ft. of Gassy Mude	dy Oil, 50% Gas, 25	% Oil, 25%	Mud				
Recovered 150 ft. of TOTAL FLU	IID						
Recoveredft. of							
Recovered ft. of							
Recoveredft. of				F	Price Job		
Recoveredft. of				(Other Charge	es	
Remarks:				1	nsurance		
					Total		
Time Set Packer(s) 8:20 PM	A.M. _P.M. Time Sta	arted Off Bo	ttom10:35 PM	A.M. P.M. Maxir	num Tempe	rature	123
Initial Hydrostatic Pressure			(A)	2200 P.S.I.			
Initial Flow Period	Minutes	15	(B)	320 P.S.I. to (C)	223	P.S.I.
Initial Closed In Period	Minutes	30	(D)	1161 P.S.I.			
Final Flow Period	Minutes	30	(E)	252 P.S.I. to (F)	217_ _F	2.S.I.
Final Closed In Period	Minutes	60	(G)	1119 P.S.I.			
Final Hydrostatic Pressure			(H)	2160 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.

	HYDRAUL	IC FRACTURING FL	UID PRODUCT COMPONENT I	NFORMATION DI	SCLOSURE	
	Fracture Date:	3/21/20	14			
	County:					
	Operator Name:	LB Exploration Inc.	•			
Well N	ame and Number:	Boyd #2				
Total Base Fl	uid Volume (gal)*:	4933	32			
Hydraulic Fracturinរ្	g Fluid Compositio	n:				
Trade Name	Supplier	Purpose	Ingredients	Chemical Abstract Service Number	Maximum Ingredient Concentration in Additive	Maximum Ingredient Concentration in HF Fluid
				(CAS#)	(% by mass)**	(% by mass)**
Plexslick 957	Chemplex	Friction Reducer	Petroleum Hydrotreated Light Distillate	64742-47-8	25%	0.0179696%
Plexsurf 580 ME	Chemplex	Product Stabalizer	Methyl Alcohol	67-56-1	10%	0.0025190%
Plexsurf 580 ME	Chemplex	Product Stabalizer	2-Butoxyethanol	111-76-2	50%	0.0125950%
Claymax	Chemplex	Clay Stabalizer	No hazardous ingredient	N/A	0%	0.000000%
AMA-398	Chemplex	Biocide	Dazomet	533-74-4	98%	0.0006338%
Plexgel Breaker XPA	Chemplex	Breaker/Slickwater	Hydrogen Peroxide	7722-84-1	7%	0.0014000%
Plexset 730	Chemplex	Activator	Methanol	67-56-1	50%	0.6500000%
Plexset 730	Chemplex	Activator	Alcohol Ethoxylates	Mixture	60.00%	0.7800000%
Frac Sand	Uniman	Propant	Crystalline Silica in the form of Quartz	14808-60-7	100.00%	19.3%