



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1220739
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: _____

1220739

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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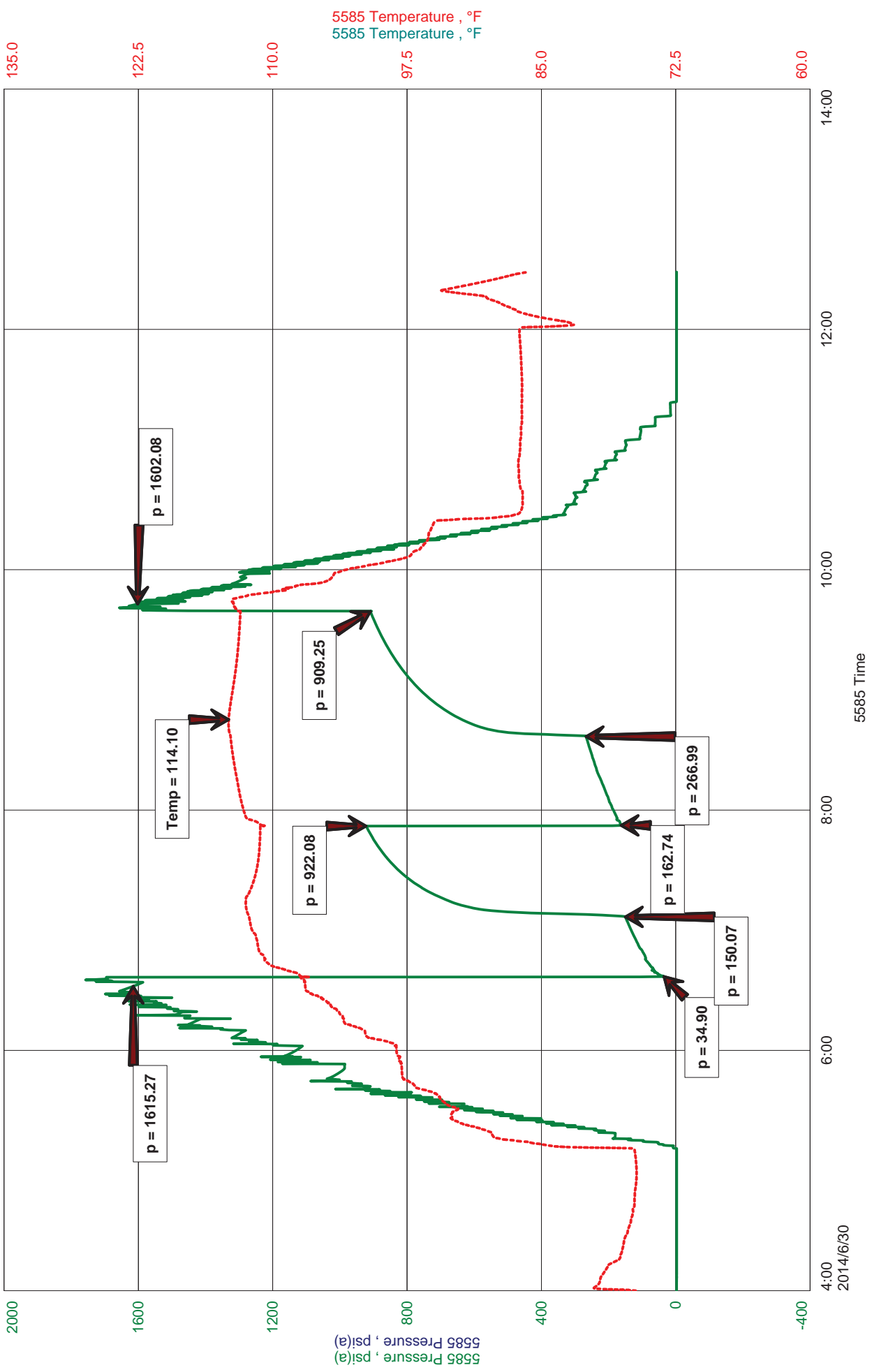
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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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LD DAVIS DRILLING LLC
DST1"ARBUCKLE"3453-3552
Start Test Date: 2014/06/30
Final Test Date: 2014/06/30

REIFSCHNEIDER 3
Formation: DST1"ARBUCKLE"3453-3552
Pool: WILDCAT
Job Number: A062

REIFSCHNEIDER 3



DIAMOND TESTING, LLC

TESTER : ANDY CARREIRA
CELL # 620-617-7202

General Information

Company Name	LD DAVIS DRILLING LLC	LD DAVIS	Job Number	A062
Contact		REIFSCHNEIDER 3	Representative	ANDY CARREIRA
Well Name		DST1"ARBUCKLE"3453-3552	Well Operator	LD DAVIS DRILLING INC
Unique Well ID		S3C 1-19S-15W BARTON CNTY, KS	Report Date	2014/06/30
Surface Location			Prepared By	ANDY CARREIRA
Well License Number				
Field		WILDCAT		
Well Type		Vertical		

Test Information

Test Type	CONVENTIONAL
Formation	DST1"ARBUCKLE"3453-3552
Well Fluid Type	01 Oil
Test Purpose	Initial Test

Start Test Date	2014/06/30	Start Test Time	04:00:00
Final Test Date	2014/06/30	Final Test Time	12:28:00

Gauge Name	5585
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Test Results

RECOVERY: 2395' GIP
252' CGO 15%G, 85%O
126' MCGO 10%G, 75%O, 15%M
315' HOCGM 10%G, 20%O, 70%M
693' TOTAL FLUID

GRAVITY: 36 @ 60 deg

TOOL SAMPLE: 70% OIL, 30% MUD



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

TIME ON: 04:00
 TIME OFF: 12:28

DRILL-STEM TEST TICKET
 FILE: REIFSCHNEIDER 3 DST1

Company LD DAVIS DRILLING INC. Lease & Well No. REIFSCHNEIDER 3
 Contractor LD RIG 1 Charge to LD DAVIS DRILLING INC.
 Elevation 1924 KB Formation ARBUCKLE Effective Pay _____ Ft. Ticket No. A062
 Date 6-29-14 Sec. 1 Twp. 19 S Range 15 W County BARTON State KANSAS
 Test Approved By KIM SHOEMAKER Diamond Representative ANDY CARREIRA

Formation Test No. 1 Interval Tested from 3453 ft. to 3552 ft. Total Depth 3552 ft.
 Packer Depth 3448 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
 Packer Depth 3453 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 3434 ft. Recorder Number 5585 Cap. 5000 P.S.I.
 Bottom Recorder Depth (Outside) 3455 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 0 ft. I.D. 2 1/4 in.
 Weight 9.2 Water Loss 7.0 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
 Chlorides 2000 P.P.M. Drill Pipe Length 3420 ft. I.D. 3 1/2 in.
 Jars: Make STERLING Serial Number 09 Test Tool Length 33 ft. Tool Size 3 1/2-IF in.
 Did Well Flow? NO Reversed Out NO Anchor Length 99 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: BOB IN 4 MIN. (6"bb)
 2nd Open: BOB IN 5 MIN. (10"bb)

Recovered 2395 ft. of GIP
 Recovered 252 ft. of CGO 15%G, 85%O
 Recovered 126 ft. of MCGO 10%G, 75%O, 15%M
 Recovered 315 ft. of HOCGM 10%G, 20%O, 70%M

Recovered <u>693</u> ft. of <u>TOTAL FLUID</u>	<u>GRAVITY: 36 @ 60 deg</u>	Price Job
Recovered _____ ft. of _____		Other Charges
Remarks: _____		Insurance
<u>TOOL SAMPLE: 70%OIL, 30%MUD</u>		Total

Time Set Packer(s) 6:37 AM A.M. P.M. Time Started Off Bottom 9:37 AM A.M. P.M. Maximum Temperature 114

Initial Hydrostatic Pressure..... (A) 1615 P.S.I.
 Initial Flow Period..... Minutes 30 (B) 35 P.S.I. to (C) 150 P.S.I.
 Initial Closed In Period..... Minutes 45 (D) 922 P.S.I.
 Final Flow Period..... Minutes 45 (E) 163 P.S.I. to (F) 267 P.S.I.
 Final Closed In Period..... Minutes 60 (G) 909 P.S.I.
 Final Hydrostatic Pressure..... (H) 1602 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.

KIM B. SHOEMAKER

CONSULTING GEOLOGIST

318-684-9709 * WICHITA, KS

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

COMPANY L. D. DRILLING, INC.

LEASE #3 REIFSCHEIDER

FIELD MERTEN NE

LOCATION 330' ENL + 2310' FEL NW NW NE

SEC 1 TWP 19S RGE 15W

COUNTY BARTON STATE KANSAS

CONTRACTOR L. D. DRILLING, INC.

SPUD 6-25-14 COMP 7-1-14

RTD 3650 LTD 3650

MUD UP 2910 TYPE MUD CHEMICAL

ELEVATIONS

KB 1924

DF _____

GL 1919

Measurements Are All From 1924 KB

CASING SURFACE 8 5/8" @ 886'
PRODUCTION 5 1/2" @

ELECTRICAL SURVEYS
DUAL IND., DENS-N., MICRO

SAMPLES SAVED FROM 3000 TO 3650

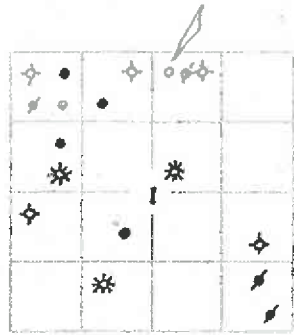
DRILLING TIME KEPT FROM 2850 TO 3650

SAMPLES EXAMINED FROM 3000 TO 3650

GEOLOGICAL SUPERVISION FROM 3300 TO 3650

GEOLOGIST ON WELL KIM B. SHOEMAKER

FORMATION TOPS	LOG	SAMPLES
ANHYDRITE	898 + 1026	898 + 1026
TOPEKA	2918 - 924	2922 - 998
HEEBNER	3161 - 1237	3162 - 1238
BROWN LIME	3239 - 1315	3242 - 1318
LANSING	3247 - 1323	3252 - 1328
B/KC	3467 - 1543	3468 - 1544
ARBUCKLE	3543 - 1619	3544 - 1620



APL: 15-009-25896

REMARKS

6-25-14 SPUD
6-26 @ 755'
6-27 @ 1170'
6-28 @ 2500'
6-29 @ 3280'
6-30 @ 3552'
7-1 @ 3650'

LEGEND

- Anhydrite
- Salt
- Sandstone
- Shale
- Carb. sh.
- Limestone
- Gel. Lims.
- Chert
- Dolomite

DRILLING TIME IN MINUTES
PER FOOT
Rate of Penetration increases

DEPTH
850
900

SAMPLE DESCRIPTIONS

REMARKS

ANHYDRITE 898 + 1026

B/LANK 917 + 1007

LITHOLOGY

SHOE01-06

960

2850

2900

3000

TOPEKA 2922-998

Samples are logged
ls. Tq. Xln. Xln. Suv. Sl. Foss

Sh. BEC Carb.

Sh. Chyd

ls. Tq. Sl. Foss

Sh. Chyd

ls. Wt. V. Sl. Foss Sl. Chyd

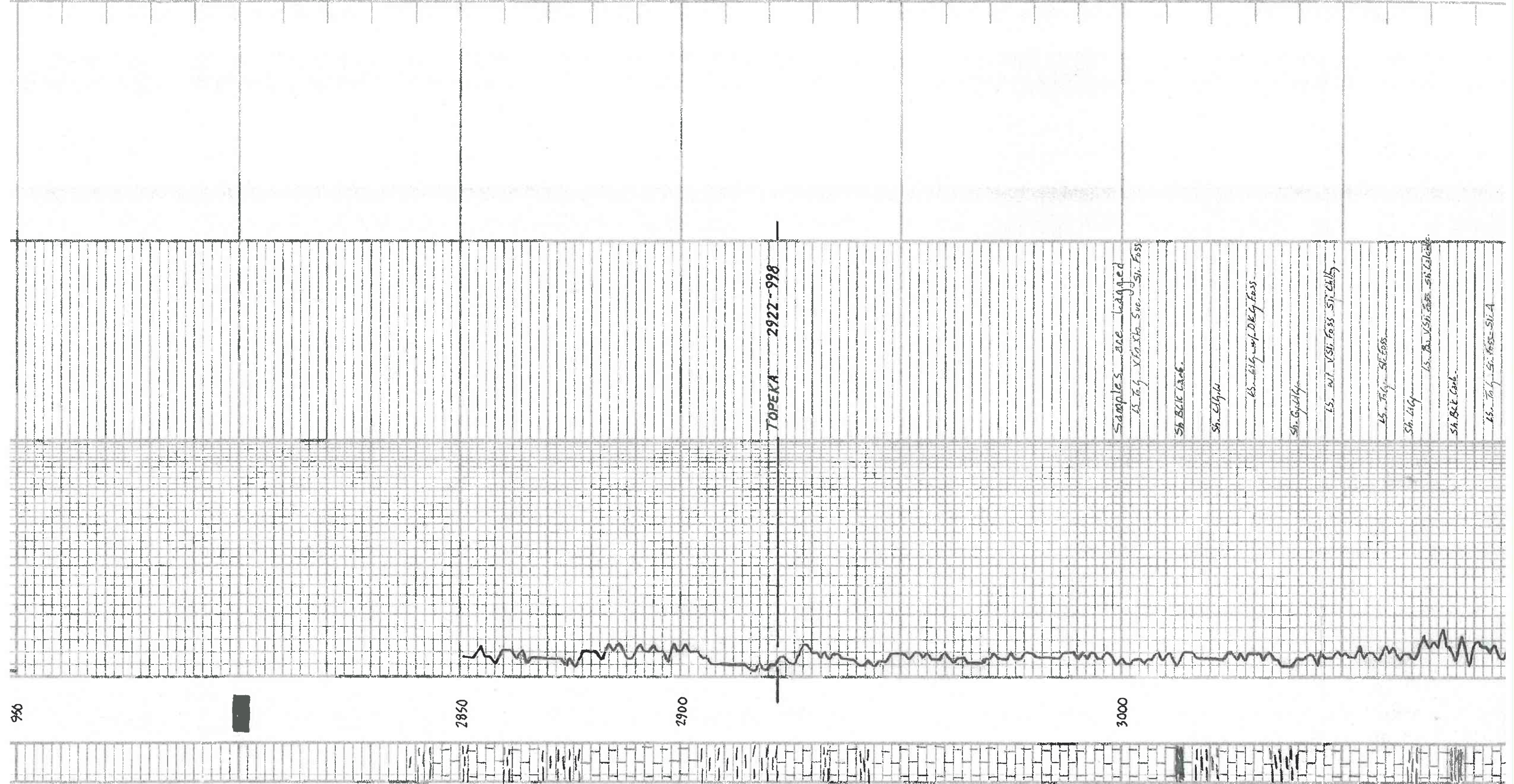
ls. Tq. Sl. Foss

Sh. Chyd

ls. Bu. V. Sl. Foss Sl. Chyd

Sh. BEC Carb.

ls. Tq. Sl. Foss Sl. A



3100

3200

3300

3400

Ls. Tally - Das - Caliente

Ls. 14g - ooc - gd ooc - p - DEB. Hvy SH. 2550. Hvy DE. N. No. Floor. No odor.

Ls. 14g - VSI. Foss.

Ls. 14g - VSI. Chilly

Ls. wt 14g - SI. Foss. SI. Chilly

HEEBNER 3162-1238

Ls. 14g - SI. Foss.

Sh. 14G.

Ls. wt. Foss. SI. A. Fr. B. Hvy. p. DE. Hvy. SH. 2550. Hvy. DE. N. No. Floor. No. Odor.

Ls. Tally - SI. Foss. SHD

Sh. 14g. Ca. Sully

Sh. 14g. W

Sh. 14g. W.

BROWN LIME 3242-1318

Ls. 14g. SI. Foss.

✓ LIMS 2.06

LANSING 3252-1328

Ls. Tally. SI. ooc. p. ooc. p. DE. B. SHD. SH. No. Floor. No. Odor.

Ls. 14g. VSI. Foss.

Ls. Tally. SI. ooc. Foss. SI. A. Fr. B. Hvy. p. DE. Hvy. SH. 2550. Hvy. DE. N. No. Floor. No. Odor.

Ls. 14g. SI. Foss. - wt.

Ls. B. Dm.

Ls. Tally. Foss. Tally. DE. B. SH. VSI. Foss. No. Floor. No. Odor.

Ls. wt. Chilly

Ls. Tally. ooc. gd. ooc. p. DE. Hvy. SH. 2550. Hvy. DE. N. No. Floor. No. Odor.

Ls. Tally. Ooc. gd. ooc. p.

Ls. wt. Chilly

Ls. 14g. Das.

Sh. 14g.

Ls. Tally. SI. wt. SHD

Ls. B. T. Das.

Ls. wt. ooc. SI. Chilly. B. Tally. DE. B. SH. 2550. Hvy. DE. N. No. Floor. No. Odor.

VSI: 38
WT: 8.9
VSI: 12.0
Call: 6.300



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 10778 A

DATE _____ TICKET NO. _____

DATE OF JOB 7-1-14	DISTRICT Pratt	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 LD Drilling	LEASE Reifschneider	WELL NO. 3						
ADDRESS	COUNTY Baton	STATE Ks						
CITY	STATE	SERVICE CREW MATTAL, McGraw, Cobb						
AUTHORIZED BY	JOB TYPE: CNW Longstring							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE 7-1-14	TIME 2:00
37586	.5					ARRIVED AT JOB	7:45	
77686/19905	.5	19907	.5			START OPERATION	11:30	
19959/73768	.5					FINISH OPERATION	12:05	
						RELEASED	1:00	
						MILES FROM STATION TO WELL	55	

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: **X**
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 100C	Common CRT	SK	160		2,560 00
CP 103	60/40 POZ	SK	30		360 00
CC 111	SALT	LB	661		330 50
CC 130	C-51	LB	31		775 00
CC 201	Gilsonite	LB	800		536 00
CA 607	LATCH DOWN Plug + Baffle	EA	1		400 00
CA 1251	Auto Kill Float Stop	EA	1		360 00
CA 1651	Turbolizer	EA	6		660 00
CA 1901	Blocker	EA	1		290 00
CA 2001	Scraper Cable Type	EA	6		450 00
C 704	CLAYmax	gal	4		140 00
CC 151	Mudflus4	gal	1,000		1,500 00
E 100	Ru. Mils	Mi	55		233 75
E 101	Heavy eq. Mils	Mi	110		770 00
E 113	PROP + Bulk Rel.	TM	487		1,070 85
CE 204	Depth Charge 300-4000'	kg	1		2,160 00
CE 240	Blend + Mix Charge	SK	190		266 00
CE 504	Plug Container	JOB	1		250 00
S003	Supercol	EA	1		175 00

SUB TOTAL **10,098 20**

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE Mike MATTAL	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: X R. W. W.
FIELD SERVICE ORDER NO.	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

3453-3552

L. D. DRILLING, INC.

7 SW 26th Avenue

GREAT BEND, KS 67530

TD-3650'

Customer L.D. Drilling INC Order _____

Lease Rietschneider #3 Date _____

Description of Pipe used 5 1/2"

Amount 11.3 TOP Row 50

Jts.	Ft.	Ins.	Ft.	Ins.	Ft.	Ins.	Ft.	Ins.	Ft.	Ins.
1	32	05	32	20	40	33	31	69		
2	42	87	42	28	40	36	31	28		
3	26	33	42	60	40	30	32	83		
4	32	45	44	44	33	50	29	39		
5	42	72	33	74	32	35	31	93		
6	43	94	39	30	31	64	40	35		
7	29	97	27	35	32	74	31	60		
8	29	73	28	75	27	33	40	34		
9	41	87	28	93	29	15	31	61		
10	43	85	28	47	31	62	31	68		
11	31	86	30	22	30	48	40	36		
12	31	43	32	77	29	50	33	08		
13	31	25	42	88	32	08	33	53		
14	32	15	42	89	25	72	40	35		
15	36	78	41	54	33	28	31	58		
16	32	84	42	48	32	22	31	57		
17	31	95	32	80	32	33	46	36		
18	42	52	34	03	27	55	31	22	- out	
19	27	71	32	03	28	40	32	22	- out	
20	44	96	44	32	28	30	40	38		
21	31	40	25	20	29	86	32	14	- out	
22	27	85	31	62	31	44	40	40	- out	
23	33	58	21	44	33	86	31	83	- out	
24	32	85	31	94	32	48				
25	30	69	22	16	33	18				
26	30	30	31	00	28	75				
27	32	50	32	15	29	52				
28	30	20	32	17	28	83				
29	33	03	40	77	40	34				
30	32	80	40	35	40	35				
Total	9024	43	1022	82	967	13	791	72		

TOTAL PIECES _____ LENGTH 3806.10 FEET _____ INCHES _____

RECEIVED BY _____ TALLIED BY _____

LD DRILLING, INC. Lease No. _____ Date **6-26-2014**
SCHEIDER Well # **3**
 Station **PRATT, KS.** Casing **8 5/8"** Depth **900'** County **BARTON** State **Ks.**
 Job **CNW-8 5/8" S.P.** Formation _____ Legal Description **1-19-15**

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft	CMT-	Acid	Pro-Pad	RATE	PRESS	ISIP
8 5/8"	8 5/8"		CMT-	200 SKS A-CON	@ 2.47 CUFT	Max		5 Min.
Depth	Depth	From	To			Min		10 Min.
886'	886'	From	To	BMT-	200 SKS COMMON	Avg		15 Min.
Volume	Volume	From	To		@ 1.20 CUFT	HHP Used		Annulus Pressure
33.3 BBL	33.3 BBL	From	To			Gas Volume		Total Load
Max Press	Max Press	From	To					
300	300	From	To					
Well Connection	Annulus Vol.	From	To					
P.C.		From	To					
Plug Depth	Packer Depth	From	To	Flush	54 BBL			
886'		From	To					

Customer Representative **LD** Station Manager **K. GORDLEY** Treater **K. LESLEY**
 Service Units: **70140 19889 19843 19960 21010**
 Driver Names: **LESLEY MARQUEZ — GIBSON —**

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
10:00 AM					ON LOCATION - SAFETY MEETING
7:30 PM					RUN JOBS. 8 5/8" x 28" CSG.
3:25 PM					CSG. ON BOTTOM
3:20 PM					HOOK UP TO CSG. / BREAK CIRC. w/ RIG
3:52 PM	400		5	6	HOD AHEAD
3:55 PM	300		88	6	MIX 200 SKS. A-CON @ 12 PPG
4:10 PM	200		43	6	MIX 200 SKS. COMMON @ 15.6 PPG
4:17 PM					SHUTDOWN - RELEASE PLUG
4:19 PM	0		0	6	START DISPLACEMENT
4:29 PM	250		50	3	SLOW RATE
4:30 PM	300		54	2	PLUG @ DESIRED DEPTH
					CIRC. THRU JOB
					CIRC. 15 BBL TO PIT

JOB COMPLETE,
THANKS -
KEVEN LESLEY