



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1220893
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: _____

1220893

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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
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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	Chieftain Oil Co., Inc.
Well Name	Achenbach B 5
Doc ID	1220893

All Electric Logs Run

Geologist Log
Borehole Volume Caliper Log
Composite Log
Phased Induction Shallow Focus SP Log
Compensated Neutron PEL Density Micro Log

Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Achenbach B 5
Doc ID	1220893

Tops

Name	Top	Datum
Kansas City	4357	-2944
Mississippian	4779	-3364
Kinderhook SH	5030	-3617
Chattanooga SH	5109	-3696
Misener SD	5131	-3721
Viola	5195	-3782
Base of Viola	5290	-3877
Upper Simpson SD	5312	-4899
Lower Simpson SD	5468	-4055
Arbuckle	5499	-4086
Total Depth	5600	



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 143701
Invoice Date: Jun 6, 2014
Page: 1

Bill To:
Chieftain Oil Company Inc. P O Box 124 Kiowa, KS 67070-0124

PAID
JUL 09 2014
9121

Customer ID	Field Ticket #	Payment Terms	
Chieft	62399	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Medicine Lodge	Jun 6, 2014	7/6/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Achenbach B #5		
774.00	CEMENT MATERIALS	Chloride	1.10	851.40
300.00	CEMENT MATERIALS	60/40/2% Gel	18.43	5,529.00
74.00	CEMENT MATERIALS	Flo Seal	2.97	219.78
322.60	CEMENT SERVICE	Cubic Feet Charge	2.48	800.05
285.22	CEMENT SERVICE	Ton Mileage Charge	2.75	784.36
1.00	CEMENT SERVICE	Surface	1,512.25	1,512.25
21.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	92.40
21.00	CEMENT SERVICE	Pump Truck Mileage	7.70	161.70
1.00	CEMENT SUPERVISOR	Ron Gilley		
1.00	OPERATOR ASSISTANT	Carl Rackley		
1.00	CEMENT SUPERVISOR	Jason Thimesch		
1.00	OPERATOR ASSISTANT	Kenneth Jack		

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 2,487.73

ONLY IF PAID ON OR BEFORE

Jul 6, 2014

Subtotal	9,950.94
Sales Tax	471.91
Total Invoice Amount	10,422.85
Payment/Credit Applied	
TOTAL	10,422.85



ALLIED OIL & GAS SERVICES, LLC 062399

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:
Medicine Lodge

DATE <u>6-6-14</u>	SEC <u>6</u>	TWP. <u>SSS</u>	RANGE <u>11W</u>	CALLED OUT <u>11:00</u>	ON LOCATION <u>12:00</u>	JOB START <u>3:30</u>	JOB FINISH <u>4:15</u>
LEASE <u>Prosenbaugh</u>	WELL # <u>B-4</u>	LOCATION <u>281 S to Driftwood, Wash</u>	COUNTY <u>Barber</u>	STATE <u>KS</u>			
OLD OR (NEW) (Circle one)							

CONTRACTOR Fossil

TYPE OF JOB Surface

HOLE SIZE 17 1/2 T.D. 325

CASING SIZE 13 3/8 DEPTH 325.51

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 20'

CEMENT LEFT IN CSG. 20'

PERFS. _____

DISPLACEMENT 49 Bbls

EQUIPMENT _____

OWNER Chieftan Oil

CEMENT AMOUNT ORDERED 300.5x 60:40:2%Gel
CCt 2% Gel 1 1/4 # Fluor

COMMON	@		
POZMIX	@		
GEL	@		
CHLORIDE	<u>774 lbs @ 1.10</u>	<u>851.4</u>	
ASC	@		
60:40:2% Gel	<u>300.5x @ 18.43</u>	<u>5529.00</u>	
Fluor	<u>74 lbs @ 2.97</u>	<u>219.78</u>	
	@		
	@		
	@		
	@		
	@		
	@		
HANDLING	@		
MILEAGE	@		

PUMP TRUCK CEMENTER Ron Gailley

892-555 HELPER CS Rackley, Jason T

BULK TRUCK # 702-643 DRIVER Ken Jack

BULK TRUCK # _____ DRIVER _____

REMARKS:
Held tail gate meeting pressure
Test lines pump fresh H2O Ahead
Mix All Cement Start Displace
ment, Wash truck up, Cement did
Circulate

1450.04 = 250.00 TOTAL 6600.18

SERVICE

DEPTH OF JOB <u>325</u>		
PUMP TRUCK CHARGE		<u>1512.25</u>
EXTRA FOOTAGE LV <u>21mi @ 4.40</u>		<u>92.40</u>
MILEAGE <u>21mi @ 7.70</u>		<u>161.70</u>
MANIFOLD	@	
Handing <u>322.6 cu @ 2.48</u>		<u>800.05</u>
Discharge <u>285.22 hrs @ 2.75</u>		<u>784.35</u>

851.43 = 250.00 TOTAL 3350.75

PLUG & FLOAT EQUIPMENT

NA

	@	
	@	
	@	
	@	
	@	

TOTAL _____

CHARGE TO: Chieftan Oil

STREET _____

CITY _____ STATE _____ ZIP _____

SALES TAX (If Any) _____

TOTAL CHARGES 9950.93

DISCOUNT _____ IF PAID IN 30 DAYS

Net \$ 7463.20

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 Jim Wenzelich

SIGNATURE Jim Wenzelich



PAGE 1 of 1	CV NO 1000719	INVOICE DATE 06/17/2014
INVOICE NUMBER 1718 - 91518608		

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

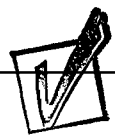
J LEASE NAME Achenbach B 5
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40733929	20920		Net - 30 days	07/17/2014

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 06/14/2014 to 06/14/2014				
0040733929				
171810885A Cement-New Well Casing/Pi 06/14/2014				
Cement 5 1/2" Longstring				
AA2 Cement	250.00	EA	10.54	2,634.83 T
C-41P	47.00	EA	2.48	116.55 T
Salt	1,238.00	EA	0.31	383.76 T
C-44	235.00	EA	3.19	750.31 T
FLA-322	188.00	EA	4.65	874.15 T
Gilsonite	1,250.00	EA	0.42	519.22 T
Claymax KCL Substitute	5.00	EA	21.70	108.49 T
Mud Flush	500.00	EA	0.93	464.97 T
"Latch Down Plug & Baffle, 5 1/2"" (Blu	1.00	EA	247.98	247.98
"Auto Fill Float Shoe 5 1/2"" (Blue)"	1.00	EA	223.19	223.19
"Turbolizer, 5 1/2"" (Blue)"	7.00	EA	68.20	477.37
"5 1/2"" Basket (Blue)"	2.00	EA	179.79	359.58
"Unit Mileage Chg (PU, cars one way)"	50.00	MI	2.63	131.74
Heavy Equipment Mileage	100.00	MI	4.34	433.97
"Proppant & Bulk Del. Chgs., per ton mil	588.00	EA	1.36	801.98
Depth Charge; 5001-6000'	1.00	EA	1,785.49	1,785.49
Blending & Mixing Service Charge	250.00	BAG	0.87	216.99
Plug Container Util. Chg.	1.00	EA	154.99	154.99
*Service Supervisor, first 8 hrs on loc.	1.00	EA	108.49	108.49

JUL 09 2014
 9304

(PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	10,794.05
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	418.44
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	11,212.49
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 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>6-14-14</u> DISTRICT <u>Pratt</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>CHITAW OIL</u>		LEASE <u>CHITAW OIL</u> WELL NO.:						
ADDRESS		COUNTY <u>BARTON</u>		STATE <u>KS</u>				
CITY STATE		SERVICE CREW <u>William Green, H. King</u>						
AUTHORIZED BY		JOB TYPE: <u>CONV. W. L.S.</u>						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <u>6-13-14</u> DATE	AM/PM	TIME
<u>3228 3070</u>	<u>1 A</u>							<u>8:00</u>
<u>1,960 3106</u>	<u>1 A</u>					ARRIVED AT JOB	AM/PM	<u>5:45</u>
<u>37900</u>						START OPERATION	AM/PM	<u>9:00</u>
						FINISH OPERATION	AM/PM	<u>10:45</u>
						RELEASED	AM/PM	<u>11:30</u>
						MILES FROM STATION TO WELL <u>50</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	1/2" 200'	SK	300		3,400.00
CP 105	1/2" 50'	SK	50		850.00
CP 105	C-41P	lb	47		100.00
CP 111	5/8"	lb	1235		617.50
CP 115	C-44P	lb	235		1,210.00
CP 119	3/4" 300'	lb	188		1,410.00
CP 201	G 1/2"	lb	1250		837.50
CP 207	1/2" 1/2" 5/8" 5/4"	SK	1		460.00
CP 1051	1/2" 3/4" 1"	SK	1		360.00
CP 1051	1/2" 3/4" 1"	SK	7		770.00
CP 1051	1/2" 3/4" 1"	SK	2		580.00
CP 1051	1/2" 3/4" 1"	SK	5		175.00
CP 1051	1/2" 3/4" 1"	SK	500		750.00
CP 100	1/2" 3/4" 1"	SK	50		312.50
CP 101	1/2" 3/4" 1"	SK	100		200.00
CP 115	1/2" 3/4" 1"	SK	585		1,392.50
CP 306	1/2" 3/4" 1"	SK	1		5,180.00
CP 240	1/2" 3/4" 1"	SK	250		500.00
CP 309	1/2" 3/4" 1"	SK	1		350.00
					175.00

SUB TOTAL 10,777.50

CHEMICAL / ACID DATA:			

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

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.

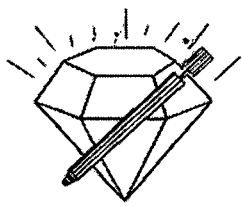
TREATMENT REPORT

Customer CHIEFTAIN OIL	Lease No.	Date 06-14-14
Lease ACHENBACH B	Well # 3	
Field Order # 10885	Station PRATT KS	Casing 5 1/2
		Depth 5592
Type Job CNW 5 1/2 completion	Formation	County BARBER
		State KS
		Legal Description 1-35-12

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
5 1/2				Pre Pad	Max		5 Min.	
Depth 5592'	Depth	From	To	Pad	Min		10 Min.	
Volume 132	Volume	From	To	Frac	Avg		15 Min.	
Max Press 2000	Max Press	From	To		HHP Used		Annulus Pressure	
Well Connection P.C.	Annulus Vol.	From	To	Flush	Gas Volume		Total Load	
Plug Depth 3550'	Packer Depth	From	To					

Customer Representative	Station Manager DAVE SCOTT	Treater Robert Fuller
Service Units 37900 33708 20920 19960 21010		
Driver Names Callard GRAVES Anthony		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
5:45					ON loc soft, meety
					RUN 133 STS 5 1/2 15.5" csp.
					BASTTS "2" 14 CNT 8, 10, 11, 15, 17, 20, 21
					circ csp 1/2 way 30 min 1 HR Bottom
8:40					CASING on Bottom
8:45					Hook up circ csp.
9:00			5	4	14 SPACER
	150		12		37 MUD FLUSH
			5		SPACER
			52	5	mix 200 SK AA-2 cnt @ 150 opp.
					cnt mix shot down. wash, lower, pump
					Release Plug
				4	St Pump with 2% KCL
	200				Lift 15.
				4	Shw Kelp
10:40	1750		132		Plug down
			7		plug R.H w/ 30st
			5		plug with 20st
					50B complete



DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
achenbachb5dst1

Company Chieftain Oil Company, Inc. Lease & Well No. Achenbach "B" No. 5
Elevation 1398 GL Formation Misener Effective Pay Ft. Ticket No. K134
Date 6-12-14 Sec. 1 Twp. 35S Range 12W County Barber State Kansas
Test Approved By David Barker Diamond Representative Jason McLemore

Formation Test No. 1 Interval Tested from 5,121 ft. to 5,151 ft. Total Depth 5,151 ft.
Packer Depth 5,116 ft. Size 6 3/4 in. Packer Depth ft. Size in.
Packer Depth 5,121 ft. Size 6 3/4 in. Packer Depth ft. Size in.
Depth of Selective Zone Set ft.

Top Recorder Depth (Inside) 5,102 ft. Recorder Number 5513 Cap. 5,000 psi.
Bottom Recorder Depth (Outside) 5,103 ft. Recorder Number 5588 Cap. 6,000 psi.
Below Straddle Recorder Depth ft. Recorder Number Cap. psi.

Drilling Contractor Fossil Drilling, Inc. - Rig 3 Drill Collar Length 234 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 54 Weight Pipe Length ft I.D. in.
Weight 9.3 Water Loss 8.0 cc. Drill Pipe Length 4,854 ft I.D. 3 1/2 in.
Chlorides 4,000 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 6 Anchor Length 30 ft. Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: Strong blow increasing. Off bottom of bucket in 20 secs. Gas to surface in 15 mins. Gauged gas. No blow back during shut-in. (SEE GAS VOLUME REPORT)
2nd Open: Strong blow increasing. Off bottom of bucket on open. Gauged gas. No blow back during shut-in. (SEE GAS VOLUME REPORT)

Recovered 240 ft. of gassy oil & water cut mud = 1.236660 bbls. (Grind out: 10%-gas; 10%-oil; 20%-water; 60%-mud) Chlorides: 100,000 Ppm PH: 7.0
Recovered ft. of
Recovered ft. of
Recovered ft. of
Recovered ft. of
Recovered ft. of

Remarks

Time Set Packer(s) 7:14 A.M. Time Started off Bottom 10:29 A.M. Maximum Temperature 129°
Initial Hydrostatic Pressure.....(A) 2526 P.S.I.
Initial Flow Period.....Minutes 30 (B) 54 P.S.I. to (C) 79 P.S.I.
Initial Closed In Period.....Minutes 60 (D) 1939 P.S.I.
Final Flow Period.....Minutes 45 (E) 74 P.S.I. to (F) 97 P.S.I.
Final Closed In Period.....Minutes 60 (G) 1945 P.S.I.
Final Hydrostatic Pressure.....(H) 2510 P.S.I.



JASON MCLEMORE

CELL # 620-617-0527

General Information

Company Name	Chieftain Oil Company, Inc	
Contact	Ron Molz	Job Number K134
Well Name	Achenbach B5	Representative Jason McLemore
Unique Well ID	DST #1 Misener 5121-5151	Well Operator Chieftain Oil Company, Inc
Surface Location	1-35s-12w-Barber	Prepared By Jason McLemore
Field	Stranathan	Qualified By Dave Barker
Well Type	Vertical Test Unit	#6

Test Information

Test Type	Drill Stem Test	Well Operator	Chieftain Oil Company, Inc	Representative	Jason McLemore
Formation	Misner	Report Date	2014/06/12		
Well Fluid Type	01 Oil	Prepared By	Jason McLemore		
Test Purpose (AEUB)	Initial Test				

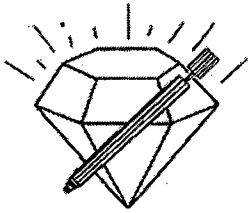
Start Test Date	2014/06/12	Start Test Time	03:36:00
Final Test Date	2014/06/12	Final Test Time	12:52:00

Test Results

RECOVERED:

240 Gassy Oil & Water Cut Mud, 10% Gas, 10% Oil, 20% Water, 60% Mud
 240 TOTAL FLUID

CHLORIDES: 100,000
 PH: 7



DIAMOND TESTING, LLC
 P.O. Box 157
HOISINGTON, KANSAS 67544
 (620) 653-7550 • (800) 542-7313

Company Chieftain Oil Company, Inc. Lease & Well No. Achenbach "B" No. 5
 Date 6-12-14 Sec 1 Twp 35 S Rge 12 W Location SE SE NW County Barber State Kansas
 Drilling Contractor Fossil Drilling, Inc. - Rig 3 Formation Misener DST No. 1
 Remarks: 1st Open: Gas to surface in 15 mins. Sample taken 25 mins. into initial flow.

Open Tool: 7:14 a.m. **INITIAL FLOW**

Time O' Clock	Orifice Size	Gauge	MCF/D
7:34 a.m.	1/2 in.	25 psi	205
* 7:39 a.m.	1/2 in.	20 psi	177
7:44 a.m.	1/2 in.	16 psi	153

Open Tool: 8:44 a.m. **FINAL FLOW**

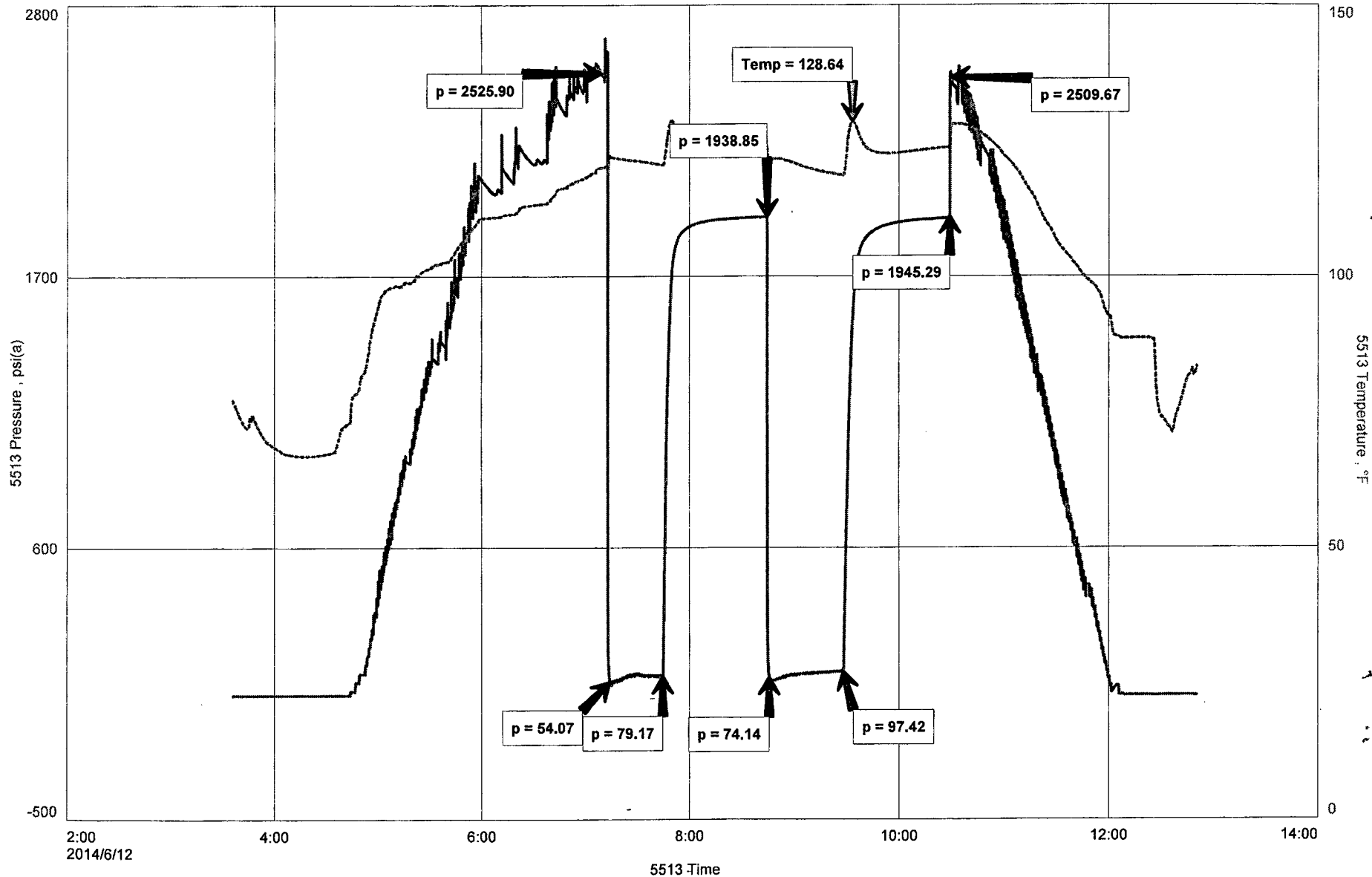
Time O' Clock	Orifice Size	Gauge	MCF/D
8:54 a.m.	1/2 in.	17 psi	159
9:04 a.m.	1/2 in.	15 psi	147
9:14 a.m.	1/2 in.	15 psi	147
9:24 a.m.	1/2 in.	14 psi	141

* Sample taken.

Chieftain Oil Company, Inc
DST #1 Misener 5121-5151
Start Test Date: 2014/06/12
Final Test Date: 2014/06/12

Achenbach B5
Formation: Misener
Pool: Wildcat
Job Number: K134

Achenbach B5



POINT**PRESSURE**
Electronic Reading

(A)	Initial Hydrostatic Mud	2526	PSI
(B)	First Initial Flow Pressure	54	PSI
(C)	First Final Flow Pressure	79	PSI
(D)	Initial Closed-in Pressure	1939	PSI
(E)	Second Initial Flow Pressure	74	PSI
(F)	Second Final Flow Pressure	97	PSI
(G)	Final Closed-in Pressure	1945	PSI
(H)	Final Hydrostatic Mud	2510	PSI