



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1234715  
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: \_\_\_\_\_



1234715

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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# ALLIED OIL & GAS SERVICES, LLC 063240

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:

DATE <u>9.13.14</u>	SEC. <u>35</u>	TWP. <u>29</u>	RANGE <u>24</u>	CALLED OUT	ON LOCATION <u>9.12 11:30P</u>	JOB START <u>9.13 3:30A</u>	JOB FINISH <u>9.13 5:30A</u>
LEASE <u>Waneta</u>		WELL # <u>1-35</u>		LOCATION <u>Bloom Ks 1w 1/10s</u>		COUNTY <u>Ford</u>	STATE <u>Ks</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)			E into				

CONTRACTOR Maverick 106

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 5490

CASING SIZE 8 5/8 DEPTH 641

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE 4 1/2 DEPTH 1560

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. —

PERFS. \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_

OWNER Deutsch O: L Co

CEMENT AMOUNT ORDERED 1855x 60' 40' 4' 6cl

EQUIPMENT

PUMP TRUCK CEMENTER Justin Bower

# 548/545 HELPER Todd Seba

BULK TRUCK

# 819/823 DRIVER Wayne Rucker

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON	@	_____
POZMIX	@	_____
GEL	@	_____
CHLORIDE	@	_____
ASC	@	_____

Allied 60' 40' 4 @ 18.92 3500.20

HANDLING @ \_\_\_\_\_

MILEAGE @ \_\_\_\_\_

30% = 1050.06 TOTAL 3500.20

REMARKS:

1st plug 1560 50 SX

2nd plug 660 50 SX

3rd plug 60 80 SX

Mouse 20 SX

Rat 30 SX

SERVICE

DEPTH OF JOB	<u>1560, 660, 60</u>	
PUMP TRUCK CHARGE		<u>1250.00</u>
EXTRA FOOTAGE	<u>L.V. 50 @ 4.40</u>	<u>220.00</u>
MILEAGE	<u>50 @ 7.70</u>	<u>385.00</u>
MANIFOLD		@ _____
<u>Handling 196 cu ft</u>	@ <u>2.48</u>	<u>486.08</u>
<u>Drayage 8.27 / 413.68</u>	@ <u>2.75</u>	<u>1137.61</u>
		<u>3478.69</u>
<u>30% = 1043.60</u>		TOTAL <u>1655.00</u>

CHARGE TO: Deutsch Oil Co

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL \_\_\_\_\_

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.

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES ~~6978.89~~ 6978.89

DISCOUNT ~~2100.00~~ 4885.22 IF PAID IN 30 DAYS

PRINTED NAME Alcail E Farmer

SIGNATURE Alcail E Farmer

# ALLIED OIL & GAS SERVICES, LLC 063236

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:  
Medicine Lodge KS

DATE <u>9.3.14</u>	SEC <u>35</u>	TWP <u>29s</u>	RANGE <u>24w</u>	CALLED OUT	ON LOCATION <u>12:00</u>	JOB START <u>1:00P</u>	JOB FINISH <u>2:00P</u>
LEASE <u>Waneta</u>	WELL # <u>1-35</u>	LOCATION <u>Bloom KS 1w S 3/10</u>	COUNTY <u>Ford</u>	STATE <u>KS</u>			
OLD OR <u>NEW</u> (Circle one)			<u>E into</u>				

CONTRACTOR Maverick OWNER Deutsch Oil Company  
TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 645  
CASING SIZE 8 5/8 DEPTH 641.99  
TUBING SIZE DEPTH  
DRILL PIPE DEPTH  
TOOL DEPTH  
PRES. MAX MINIMUM  
MEAS. LINE SHOE JOINT 42  
CEMENT LEFT IN CSG. 42  
PERFS.  
DISPLACEMENT 38 bbl Fresh

CEMENT  
AMOUNT ORDERED 185sx 6.5' 3.5' 6' Gel  
3' CC 1/4# Floseal  
100sx Class A + 3' CC

**EQUIPMENT**

PUMP TRUCK CEMENTER Jako Head / Todd Schrt  
# 894/302 HELPER Robert Johnson  
BULK TRUCK  
# 421/200 DRIVER James Bowen  
BULK TRUCK  
# DRIVER

COMMON <u>Class A 100sx</u>	@	<u>17.90</u>	<u>1790.00</u>
POZMIX	@		
GEL	@		
CHLORIDE <u>765#</u>	@	<u>1.10</u>	<u>841.50</u>
ASC	@		
<u>ALWC 185sx</u>	@	<u>19.88</u>	<u>3677.80</u>
<u>Floseal 47#</u>	@	<u>2.97</u>	<u>139.59</u>
	@		
	@		
	@		
	@		
	@		
HANDLING	@		
MILEAGE			

**REMARKS:**

On Location Safety Meeting  
Rig up Safety Meeting  
Pressure Test Pump Spacer  
Mixt pump lead Cmt Mixt pump  
tail cmt stop release plus  
Start Displacement + Washing  
Continue slow rate bump  
plus shut in release pressure  
Cmt did cure

35% = 2257.11 TOTAL 6448.89

**SERVICE**

DEPTH OF JOB		<u>641.99</u>	
PUMP TRUCK CHARGE		<u>2058.50</u>	
EXTRA FOOTAGE <u>LV 50</u>	@	<u>4.40</u>	<u>220.00</u>
MILEAGE <u>50</u>	@	<u>7.70</u>	<u>385.00</u>
MANIFOLD <u>1 Head</u>	@		<u>275.00</u>
<u>Handling 319.32 cu/ft</u>	@	<u>2.48</u>	<u>791.92</u>
<u>Drayage 681.80 T. mile</u>	@	<u>2.75</u>	<u>1874.94</u>

35% = 1961.87 TOTAL 5605.36

**PLUG & FLOAT EQUIPMENT**

<u>1 TRP</u>	@	<u>131</u>	<u>131.00</u>
<u>1 Raffel plate</u>	@		<u>320.00</u>
	@		
	@		

35% = 35.00 TOTAL 451.00

CHARGE TO: Deutsch Oil Company  
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 Jeremy Stuckey

SIGNATURE [Signature]

SALES TAX (if Any) \_\_\_\_\_  
TOTAL CHARGES 12505.25  
DISCOUNT 8128.41 IF PAID IN 30 DAYS



**TRILOBITE TESTING, INC.**

# DRILL STEM TEST REPORT

Deutsch Oil Company

**35-29s-24w Ford Co. Ks.**

8300 E. 22nd St. N.  
Wichita, Ks. 67226

**Waneta # 1-35**

Job Ticket: 54144

**DST#: 1**

ATTN: Logan Walker

Test Start: 2014.09.09 @ 21:30:09

## GENERAL INFORMATION:

Formation: **Pawnee**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 05:18:39

Time Test Ended: 12:47:39

Test Type: Conventional Bottom Hole (Initial)

Tester: Matt Smith

Unit No: 53

**Interval: 5122.00 ft (KB) To 5182.00 ft (KB) (TVD)**

Reference Elevations: 2582.00 ft (KB)

Total Depth: 5182.00 ft (KB) (TVD)

2572.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 10.00 ft

**Serial #: 6773 Inside**

Press@RunDepth: 200.02 psig @ 5123.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.09.09

End Date:

2014.09.10

Last Calib.:

2014.09.10

Start Time: 21:30:14

End Time:

12:47:39

Time On Btm:

2014.09.10 @ 05:10:09

Time Off Btm:

2014.09.10 @ 09:01:09

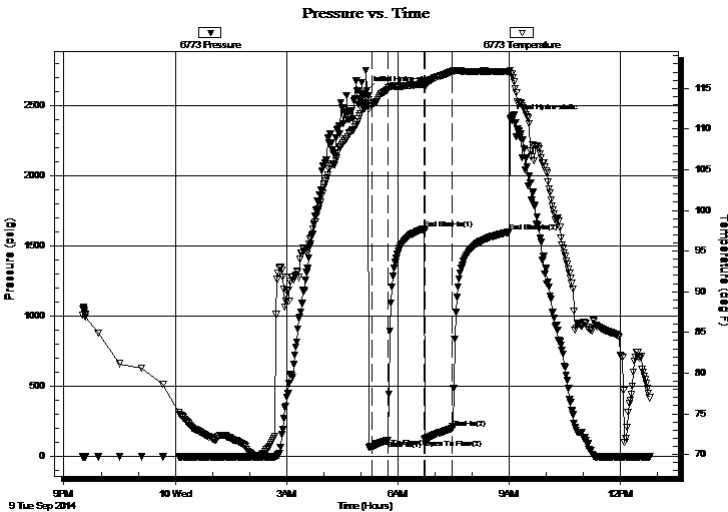
TEST COMMENT: IF: Fair - Strong blow . B.O.B. in 27 mins.

IS: No blow .

FF: Fair blow . Surf., - 7 1/2".

FS: No blow .

## PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2609.06	113.58	Initial Hydro-static
9	66.79	113.07	Open To Flow (1)
33	114.93	114.85	Shut-In(1)
93	1623.94	115.48	End Shut-In(1)
94	125.16	115.19	Open To Flow (2)
138	200.02	117.08	Shut-In(2)
230	1599.85	117.07	End Shut-In(2)
231	2409.02	117.20	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
62.00	SOGMCW 5%g 45%m 50w	0.87
62.00	SOMCW 15%m 85%w	0.87
62.00	SOGWCM 10%g 45%w 45%m	0.87
62.00	SOGMCW 5%g 45%m 50%w	0.87
62.00	SOGWCM 5%g 45%w 50%m	0.87
45.00	SOWCM 50%w 50%m	0.63

## Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

## FLUID SUMMARY

Deutsch Oil Company

**35-29s-24w Ford Co. Ks.**

8300 E. 22nd St. N.  
Wichita, Ks. 67226

**Waneta # 1-35**

Job Ticket: 54144

**DST#: 1**

ATTN: Logan Walker

Test Start: 2014.09.09 @ 21:30:09

### Mud and Cushion Information

Mud Type: Gel Chem  
Mud Weight: 9.00 lb/gal  
Viscosity: 51.00 sec/qt  
Water Loss: 10.79 in<sup>3</sup>  
Resistivity: ohm.m  
Salinity: 8300.00 ppm  
Filter Cake: 0.20 inches

Cushion Type:  
Cushion Length: ft  
Cushion Volume: bbl  
Gas Cushion Type:  
Gas Cushion Pressure: psig

Oil API: deg API  
Water Salinity: 29000 ppm

### Recovery Information

Recovery Table

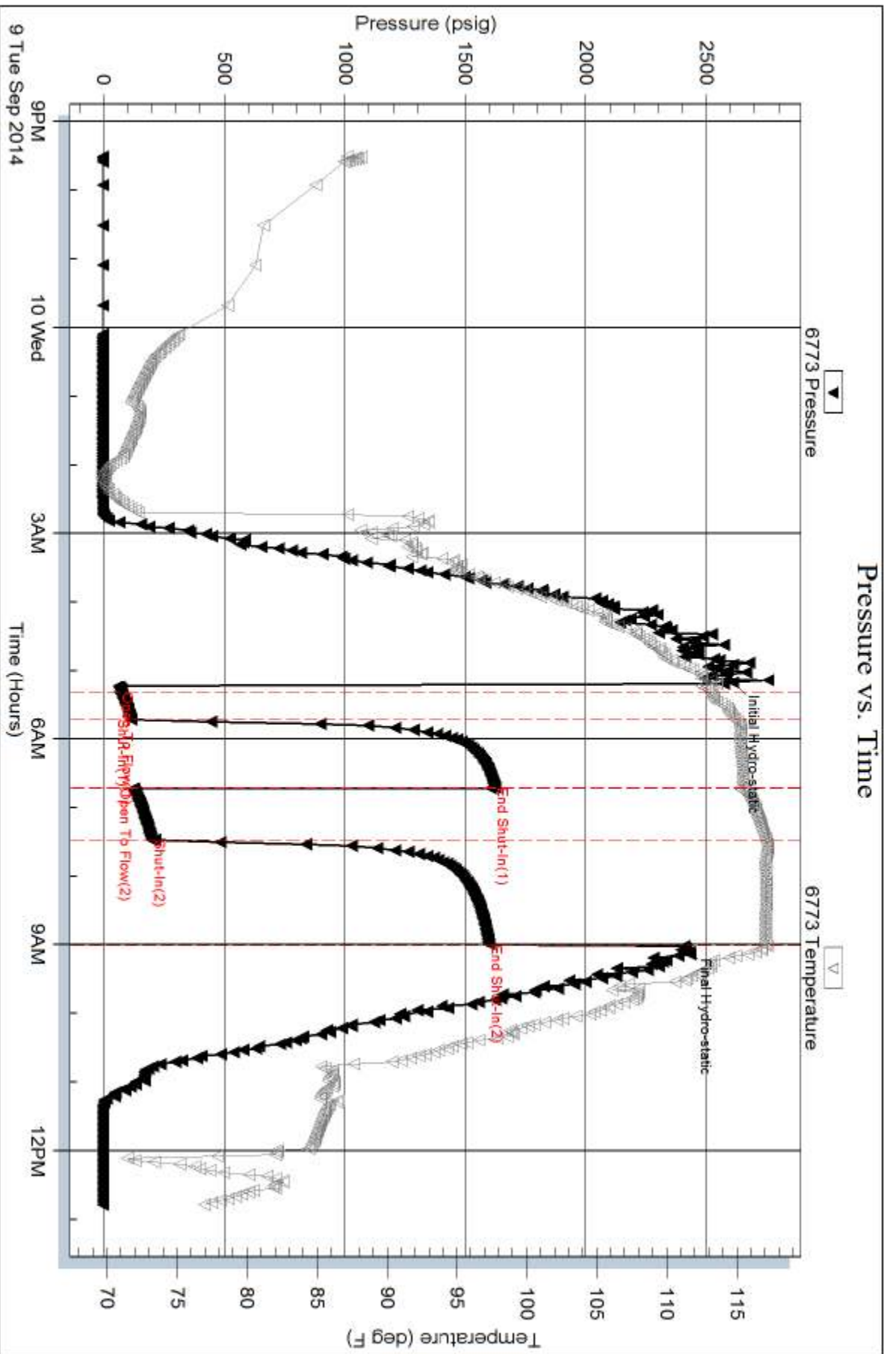
Length ft	Description	Volume bbl
62.00	SOGMCW 5%g 45%m 50w	0.870
62.00	SOMCW 15%m 85%w	0.870
62.00	SOGWCM 10%g 45%w 45%m	0.870
62.00	SOGMCW 5%g 45%m 50%w	0.870
62.00	SOGWCM 5%g 45%w 50%m	0.870
45.00	SOWCM 50%w 50%m	0.631
0.00	137' G.I.P. 100%g	0.000
0.00	RW .10 @ 74 = 29000	0.000

Total Length: 355.00 ft      Total Volume: 4.981 bbl

Num Fluid Samples: 0      Num Gas Bombs: 0      Serial #: none

Laboratory Name:      Laboratory Location:

Recovery Comments: RW .10 @ 74 degrees = 29000 chlorides





**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

Deutsch Oil Company  
8300 E. 22nd St. N.  
Wichita, Ks. 67226  
ATTN: Logan Walker

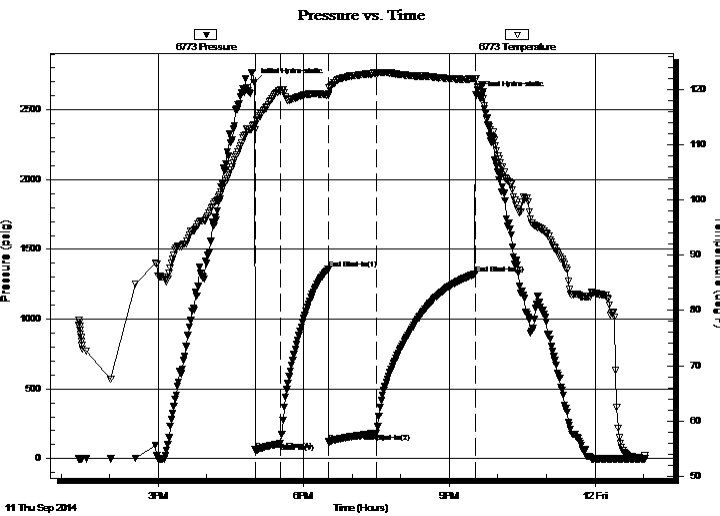
**35-29s-24w Ford Co. Ks.**  
**Waneta # 1-35**  
Job Ticket: 54145      **DST#: 2**  
Test Start: 2014.09.11 @ 13:21:38

## GENERAL INFORMATION:

Formation: **Marrow**  
Deviated: No Whipstock:                      ft (KB)  
Time Tool Opened: 17:00:23  
Time Test Ended: 01:02:08  
Interval: **5342.00 ft (KB) To 5397.00 ft (KB) (TVD)**  
Total Depth: 5397.00 ft (KB) (TVD)  
Hole Diameter: 7.88 inches Hole Condition: Fair  
Test Type: Conventional Bottom Hole (Reset)  
Tester: Matt Smith  
Unit No: 53  
Reference Elevations: 2582.00 ft (KB)  
2572.00 ft (CF)  
KB to GR/CF: 10.00 ft

**Serial #: 6773      Inside**  
Press @ Run Depth: 183.62 psig @ 5343.00 ft (KB)      Capacity: 8000.00 psig  
Start Date: 2014.09.11      End Date: 2014.09.12      Last Calib.: 2014.09.12  
Start Time: 13:21:43      End Time: 01:02:08      Time On Btm: 2014.09.11 @ 16:58:23  
Time Off Btm: 2014.09.11 @ 21:32:53

TEST COMMENT: IF: Fair blow . Surf., - 9".  
IS: No blow .  
FF: Fair blow . Surf., - 7 1/2".  
FS: No blow .



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2695.77	113.54	Initial Hydro-static
2	56.45	113.63	Open To Flow (1)
33	107.44	119.96	Shut-In(1)
92	1358.57	118.91	End Shut-In(1)
93	119.32	119.14	Open To Flow (2)
152	183.62	122.98	Shut-In(2)
274	1322.62	121.98	End Shut-In(2)
275	2605.33	121.85	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
62.00	SOGWCM 5%g 45%w 50%m	0.87
62.00	SOGWCM 5%g 25%w 70%m	0.87
62.00	SOGWCM 5%g 10%w 85%m	0.87
62.00	SOGWCM 3%g 37%w 60%m	0.87
67.00	SOMCW 25%m 75%w	0.94
0.00	RW .18 @ 56 = 52000 chlorides	0.00

\* Recovery from multiple tests

## Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)





**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Deutsch Oil Company

**35-29s-24w Ford Co. Ks.**

8300 E. 22nd St. N.  
Wichita, Ks. 67226

**Waneta # 1-35**

Job Ticket: 54145

**DST#: 2**

ATTN: Logan Walker

Test Start: 2014.09.11 @ 13:21:38

## Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

52000 ppm

Viscosity: 66.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 11.19 in<sup>3</sup>

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 10400.00 ppm

Filter Cake: 0.20 inches

## Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
62.00	SOGWCM 5%g 45%w 50%m	0.870
62.00	SOGWCM 5%g 25%w 70%m	0.870
62.00	SOGWCM 5%g 10%w 85%m	0.870
62.00	SOGWCM 3%g 37%w 60%m	0.870
67.00	SOMCW 25%m 75%w	0.940
0.00	RW .18 @ 56 = 52000 chlorides	0.000

Total Length: 315.00 ft

Total Volume: 4.420 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:

Serial #: 6773

Inside

Deutsch Oil Company

Maneta # 1-35

DST Test Number: 2

### Pressure vs. Time

