



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1234706
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: _____

1234706

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

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> <i>(Submit ACO-4)</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	Butch A 1
Doc ID	1234706

All Electric Logs Run

Borehole Volume Caliper Log
Compensated Neutron PEL Density Log
Composite Log
Geologist Log
Phased Induction Log

Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Butch A 1
Doc ID	1234706

Tops

Name	Top	Datum
Heebner	3630	-2117
Toronto	3646	-2133
Lansing	3796	-2283
Stark	4250	-2737
Hushpuckney	4250	-2737
Mississippian	4456	-2943
Viola	4700	-3187
Simpson SH	4792	-3279
Arbuckle	4925	-3412
Total Depth	4991	



PAGE 1 of 1	CUST NO 1000719	YARD # 1718	INVOICE DATE 10/15/2014
INVOICE NUMBER 91622336			

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 Butch A 1
 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
40776486	19843		Net - 30 days	11/14/2014

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 10/14/2014 to 10/14/2014				
0040776486				
171811464A Cement-New Well Casing/Pi 10/14/2014				
Cement 13 3/8" Conductor Pipe				
60/40 POZ	350.00	EA	9.24	3,234.00
Celloflake	88.00	EA	2.85	250.71
Calcium Chloride	903.00	EA	0.81	730.08
"Unit Mileage Chg (PU, cars one way)"	40.00	MI	3.47	138.60
Heavy Equipment Mileage	80.00	MI	5.78	462.00
"Proppant & Bulk Del. Chgs., per ton mil	602.00	EA	1.93	1,158.85
Depth Charge; 0-500'	1.00	EA	770.00	770.00
Blending & Mixing Service Charge	350.00	BAG	1.08	377.30
"Service Supervisor, first 8 hrs on loc.	1.00	EA	134.75	134.75

OCT 16 2014
 9/21 BC

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	7,256.29
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	301.36
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	7,557.65
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		





PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1000719	1718	10/28/2014
INVOICE NUMBER			
91634268			

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 Butch A 1
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
40780779	20920		Net - 30 days	11/27/2014	
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 10/24/2014 to 10/24/2014					
0040780779					
171811496A Cement-New Well Casing/Pi 10/24/2014					
Cement PTA					
<div style="position: absolute; top: 10px; left: 10px; border: 2px solid black; padding: 5px; transform: rotate(-15deg);"> <p style="font-size: 24px; font-weight: bold; margin: 0;">Entered</p> <p style="font-size: 18px; font-weight: bold; margin: 0;">NOV 09 2014</p> <p style="font-size: 18px; font-weight: bold; margin: 0;">BY: [Signature]</p> <p style="font-size: 24px; font-weight: bold; margin: 0;">9121 BC</p> </div>					
20/40 POZ		200.00	EA	9.24	1,848.00
Cement Gel		344.00	EA	0.19	66.22
"Unit Mileage Chg (PU, cars one way)"		40.00	MI	3.47	138.60
Heavy Equipment Mileage		80.00	MI	5.78	462.00
"Proppant & Bulk Del. Chgs., per ton mil		344.00	EA	1.93	662.20
Depth Charge; 4001'-5000'		1.00	EA	1,940.40	1,940.40
Blending & Mixing Service Charge		200.00	BAG	1.08	215.60
"Service Supervisor, first 8 hrs on loc.		1.00	EA	134.75	134.75

PLEASE REMIT TO: BASIC ENERGY SERVICES, LP PO BOX 841903 DALLAS, TX 75284-1903	SEND OTHER CORRESPONDENCE TO: BASIC ENERGY SERVICES, LP 801 CHERRY ST, STE 2100 FORT WORTH, TX 76102	SUB TOTAL 5,467.77 TAX 136.87 INVOICE TOTAL 5,604.64	
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BASIC

energy services, L.P.

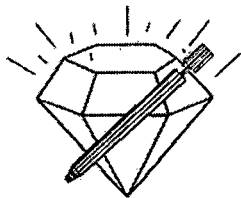
TREATMENT REPORT

Customer <i>SHICKLAND OIL</i>	Lease No.	Date <i>10-24-14</i>	
Lease <i>BUTCH A</i>	Well # <i>1</i>		
Field Order # <i>11496</i>	Station <i>PRATT</i>	Casing <i>O.P.</i>	Depth <i>4949</i>
Type Job <i>CNW P.T.A</i>	Formation	County <i>BARBER</i>	State <i>OK</i>
		Legal Description <i>32-32-11</i>	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
<i>7.5" P</i>							
Depth <i>4949</i>	Depth	From	To	Pre Pad	Max		5 Min.
Volume	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative	Station Manager <i>DAVE SOTT</i>	Treater <i>Robert Sullivan</i>
Service Units <i>37700 33708 20920 19960 19860</i>		
Driver Names <i>Sullivan METCALD ERNST</i>		

Time	Casing Pressure	Tubing Pressure	Bbbs. Pumped	Rate	Service Log
<i>11:30 Am</i>					<i>on loc</i>
					<i>P.T.A.</i>
					<i>1" 4949'</i>
<i>1:35</i>			<i>10</i>		<i>SPACED</i>
<i>/</i>			<i>10 1/2</i>		<i>conf</i>
<i>/</i>			<i>10</i>		<i>SPACED</i>
<i>1:55</i>			<i>62</i>		<i>MUD</i>
					<i>6:30'</i>
<i>5:35</i>			<i>5</i>		<i>SPACED</i>
<i>/</i>			<i>10 1/2</i>		<i>conf</i>
<i>6:45</i>			<i>7 1/2</i>		<i>SPACED & MUD</i>
					<i>3:30'</i>
<i>6:15</i>			<i>5</i>		<i>SPACED</i>
<i>/</i>			<i>10 1/2</i>		<i>conf</i>
<i>4:25</i>			<i>3</i>		<i>DISP</i>
<i>7:15</i>			<i>10</i>		<i>TOP 60' w/20 LHW/30</i>
<i>7:30</i>					<i>5036 conf / 17 HANKS</i>



DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
butch1dst1

Company Chieftain Oil Company, Inc. Lease & Well No. Butch No. 1
Elevation 1513 KB Formation Toronto Effective Pay _____ Ft. Ticket No. K187
Date 10-18-14 Sec. 32 Twp. 32S Range 11W County Barber State Kansas
Test Approved By Aaron Young Diamond Representative Jason McLemore

Formation Test No. 1 Interval Tested from 3,654 ft. to 3,685 ft. Total Depth 3,685 ft.
Packer Depth 3,649 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 3,654 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 3,635 ft. Recorder Number 5513 Cap. 5,000 psi.
Bottom Recorder Depth (Outside) 3,636 ft. Recorder Number 5588 Cap. 6,000 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Fossil Drilling, Inc. - Rig 2 Drill Collar Length 155 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 47 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.1 Water Loss 9.2 cc. Drill Pipe Length 3,466 ft I.D. 3 in.
Chlorides 4,800 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 6 Anchor Length 31 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-FH in.

Blow: 1st Open: Weak blow increasing to 3/4 in. No blow back during shut-in.
2nd Open: Weak blow increasing to 1 in. No blow back during shut-in.

Recovered 75 ft. of drilling mud w/oil specks = .369000 bbls. (Grind out: <1%-oil; >99%-mud)

Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Remarks Tool slid 7 ft. on 1st open.

Time Set Packer(s) 11:53 P.M. Time Started off Bottom 3:23 A.M. Maximum Temperature 109°
Initial Hydrostatic Pressure.....(A) 1744 P.S.I.
Initial Flow Period.....Minutes 30 (B) 41 P.S.I. to (C) 55 P.S.I.
Initial Closed In Period.....Minutes 60 (D) 331 P.S.I.
Final Flow Period.....Minutes 45 (E) 60 P.S.I. to (F) 62 P.S.I.
Final Closed In Period.....Minutes 75 (G) 212 P.S.I.
Final Hydrostatic Pressure.....(H) 1718 P.S.I.



JASON MCLEMORE

CELL # 620-617-0527

General Information

Company Name	Chieftain Oil Company, Inc	
Contact	Ryan Molz	Job Number K187
Well Name	Butch #1	Representative Jason McLemore
Unique Well ID	DST #1 Toronto 3654-3685	Well Operator Chieftain Oil Company, Inc
Surface Location	32-32s-11w-Barber	Prepared By Jason McLemore
Field	Wildcat	Qualified By Aaron Young
Well Type	Vertical	Test Unit 6

Test Information

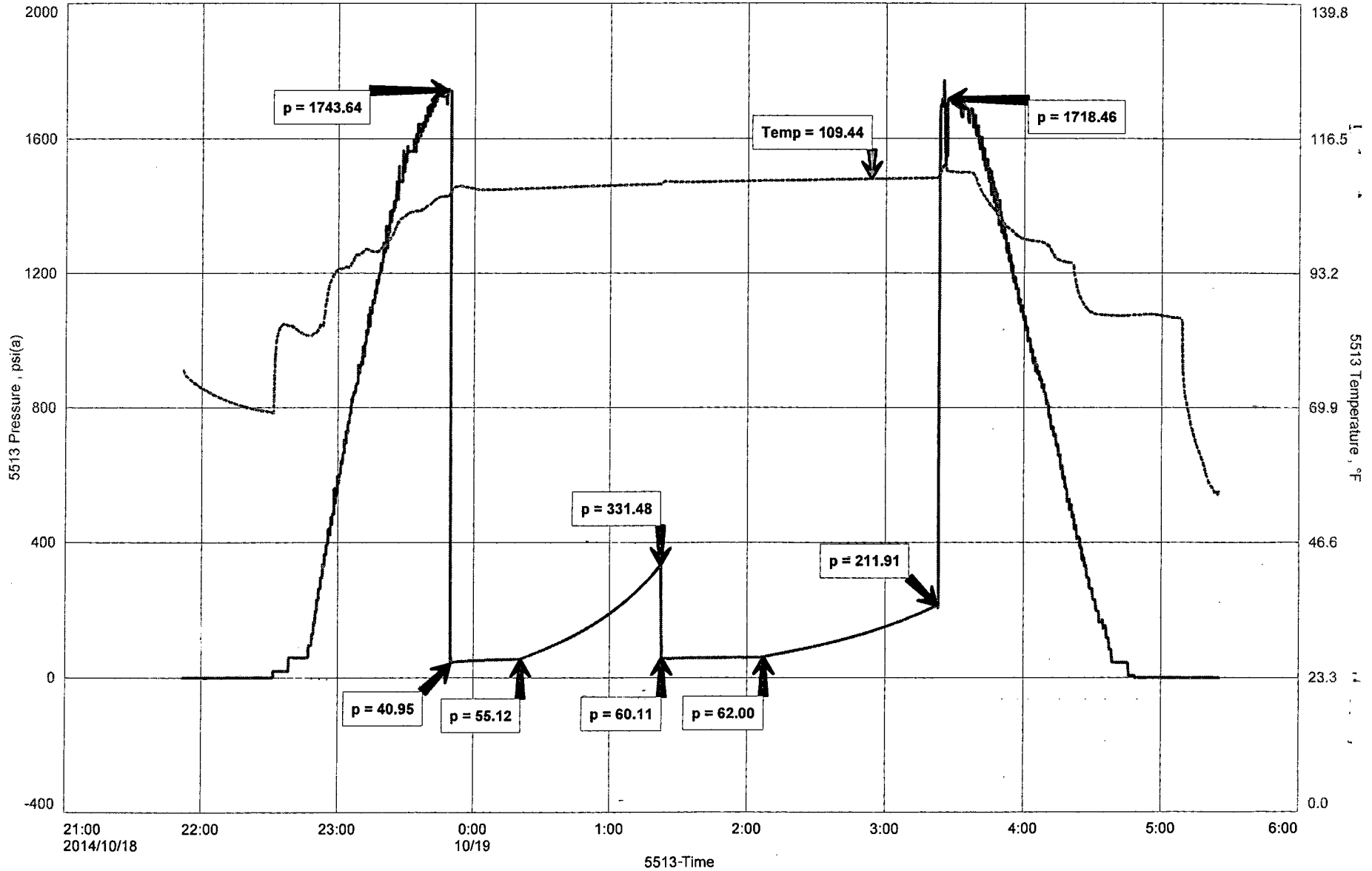
Test Type	Drill Stem Test	Representative Jason McLemore
Formation	Toronto	Well Operator Chieftain Oil Company, Inc
Well Fluid Type	01 Oil	Report Date 2014/10/19
Test Purpose (AEUB)	Initial Test	Prepared By Jason McLemore
Start Test Date	2014/10/18	Start Test Time 21:52:00
Final Test Date	2014/10/19	Final Test Time 05:27:00

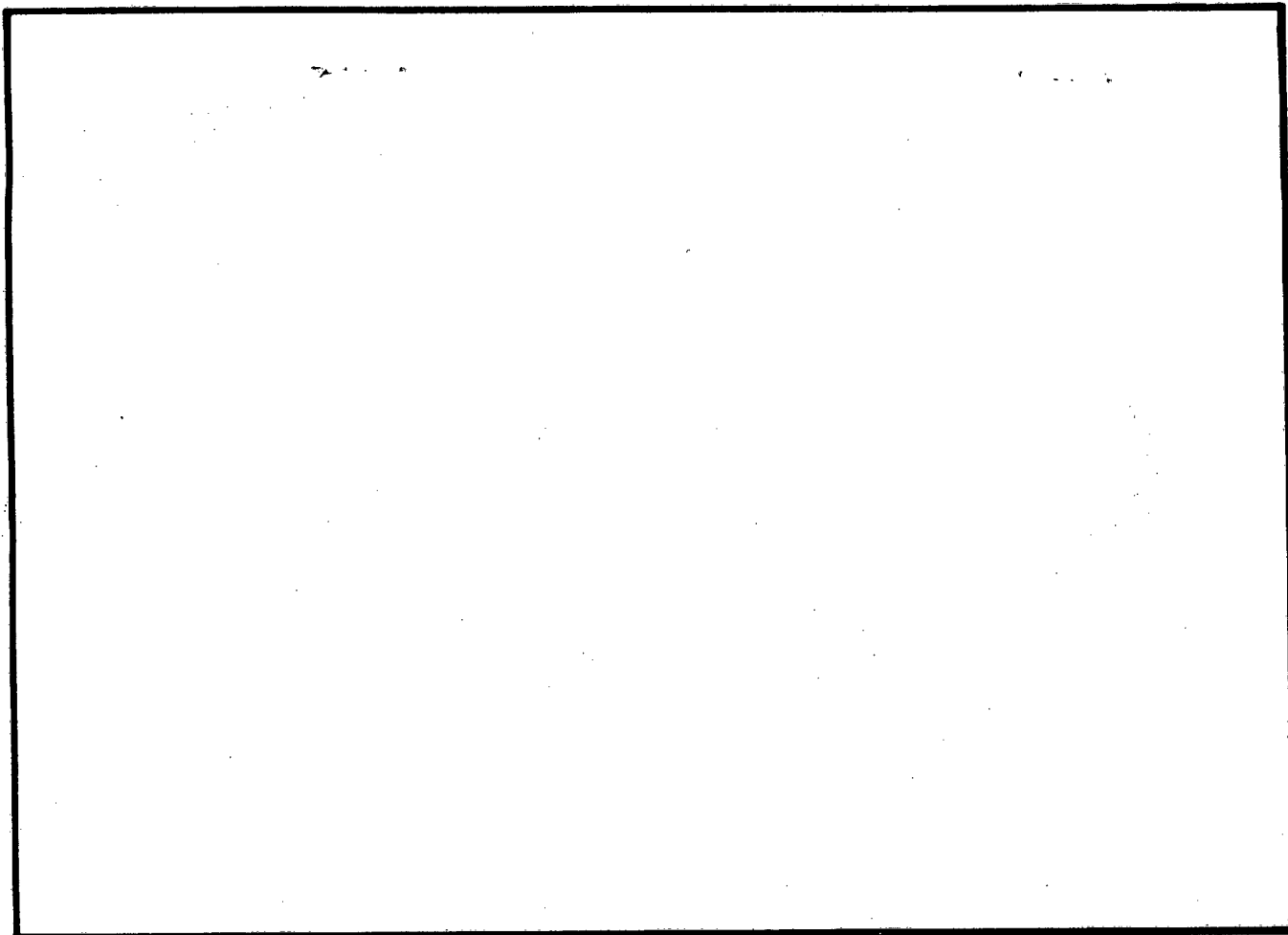
Test Results

RECOVERED:

75	Drilling Mud W/Oil Specks, <1% Oil
75	TOTAL FLUID

Butch #1





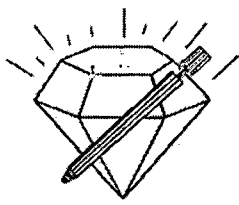
This is an actual photograph of recorder chart.

POINT	PRESSURE	
	Electronic Reading	
(A) Initial Hydrostatic Mud	1744	PSI
(B) First Initial Flow Pressure	41	PSI
(C) First Final Flow Pressure	55	PSI
(D) Initial Closed-in Pressure	331	PSI
(E) Second Initial Flow Pressure	60	PSI
(F) Second Final Flow Pressure	62	PSI
(G) Final Closed-in Pressure	212	PSI
(H) Final Hydrostatic Mud	1718	PSI

NOMENCLATURE

b	= Approximate Radius of Investigation	Feet
b¹	= Approximate Radius of Investigation (Net Pay Zone h ¹)	Feet
D.R.	= Damage Ratio	—
EI	= Elevation	Feet
GD	= B.T. Gauge Depth (From Surface Reference)	Feet
h	= Interval Tested	Feet
h¹	= Net Pay Thickness	Feet
K	= Permeability	md
K¹	= Permeability (From Net Pay Zone h ¹)	md
m	= Slope Extrapolated Pressure Plot (Psi ² /cycle Gas)	psi/cycle
OF¹	= Maximum Indicated Flow Rate	MCF/D
OF²	= Minimum Indicated Flow Rate	MCF/D
OF³	= Theoretical Open Flow Potential with/Damage Removed Max.	MCF/D
OF⁴	= Theoretical Open Flow Potential with/Damage Removed Min.	MCF/D
P^S	= Extrapolated Static Pressure	Psig.
P^F	= Final Flow Pressure	Psig.
P[∇]	= Potentiometric Surface (Fresh Water*)	Feet
Q	= Average Adjusted Production Rate During Test	bbls/day
Q¹	= Theoretical Production w/Damage Removed	bbls/day
Q^g	= Measured Gas Production Rate	MCF/D
R	= Corrected Recovery	bbls
r^w	= Radius of Well Bore	Feet
t	= Flow Time	Minutes
t[∇]	= Total Flow Time	Minutes
T	= Temperature Rankine	°R
Z	= Compressibility Factor	—
u	= Viscosity Gas or Liquid	CP
Log	= Common Log	

* Potentiometric Surface Reference to Rotary Table When Elevation Not Given, Fresh Water Corrected to 100° F.



DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
butch1dst2

Company Chieftain Oil Company, Inc. Lease & Well No. Butch No. 1
Elevation 1513 KB Formation Douglas Effective Pay _____ Ft. Ticket No. K188
Date 10-19-14 Sec. 32 Twp. 32S Range 11W County Barber State Kansas
Test Approved By Aaron Young Diamond Representative Jason McLemore

Formation Test No. 2 Interval Tested from 3,713 ft. to 3,732 ft. Total Depth 3,732 ft.
Packer Depth 3,708 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 3,713 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 3,694 ft. Recorder Number 5513 Cap. 5,000 psi.
Bottom Recorder Depth (Outside) 3,695 ft. Recorder Number 5588 Cap. 6,000 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Fossil Drilling, Inc. - Rig 2 Drill Collar Length 155 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 47 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.0 Water Loss 9.2 cc. Drill Pipe Length 3,525 ft I.D. 3 in.
Chlorides 4,500 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 6 Anchor Length 19 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-FH in.

Blow: 1st Open: Good blow increasing. Off bottom of bucket in 10 mins. No blow back during shut-in.
2nd Open: Good blow increasing. Off bottom of bucket in 10 mins. No blow back during shut-in.

Recovered 875 ft. of muddy water = 8.567400 bbls. (Grind out: 95%-water; 5%-mud) Chlorides: 140,000 Ppm PH: 7.0 RW: .85 @ 60°
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Remarks Tool slid 10 ft. on 1st open.

Time Set Packer(s) 4:55 P.M. Time Started off Bottom 7:55 P.M. Maximum Temperature 116°
Initial Hydrostatic Pressure.....(A) 1755 P.S.I.
Initial Flow Period.....Minutes 30 (B) 72 P.S.I. to (C) 285 P.S.I.
Initial Closed In Period.....Minutes 60 (D) 1301 P.S.I.
Final Flow Period.....Minutes 30 (E) 288 P.S.I. to (F) 448 P.S.I.
Final Closed In Period.....Minutes 60 (G) 1288 P.S.I.
Final Hydrostatic Pressure.....(H) 1734 P.S.I.



JASON MCLEMORE

CELL # 620-617-0527

General Information

Company Name	Chieftain Oil Company, Inc	
Contact	Ryan Molz	Job Number K188
Well Name	Butch #1	Representative Jason McLemore
Unique Well ID	DST #2 Douglas 3713-3732	Well Operator Chieftain Oil Company, Inc
Surface Location	32-32s-11w-Barber	Prepared By Jason McLemore
Field	Wildcat	Qualified By Aaron Young
Well Type	Vertical	Test Unit 6

Test Information

Test Type	Drill Stem Test	Representative Jason McLemore
Formation	Douglas	Well Operator Chieftain Oil Company, Inc
Well Fluid Type	01 Oil	Report Date 2014/10/19
Test Purpose (AEUB)	Initial Test	Prepared By Jason McLemore
Start Test Date	2014/10/19	Start Test Time 14:24:00
Final Test Date	2014/10/19	Final Test Time 22:21:00

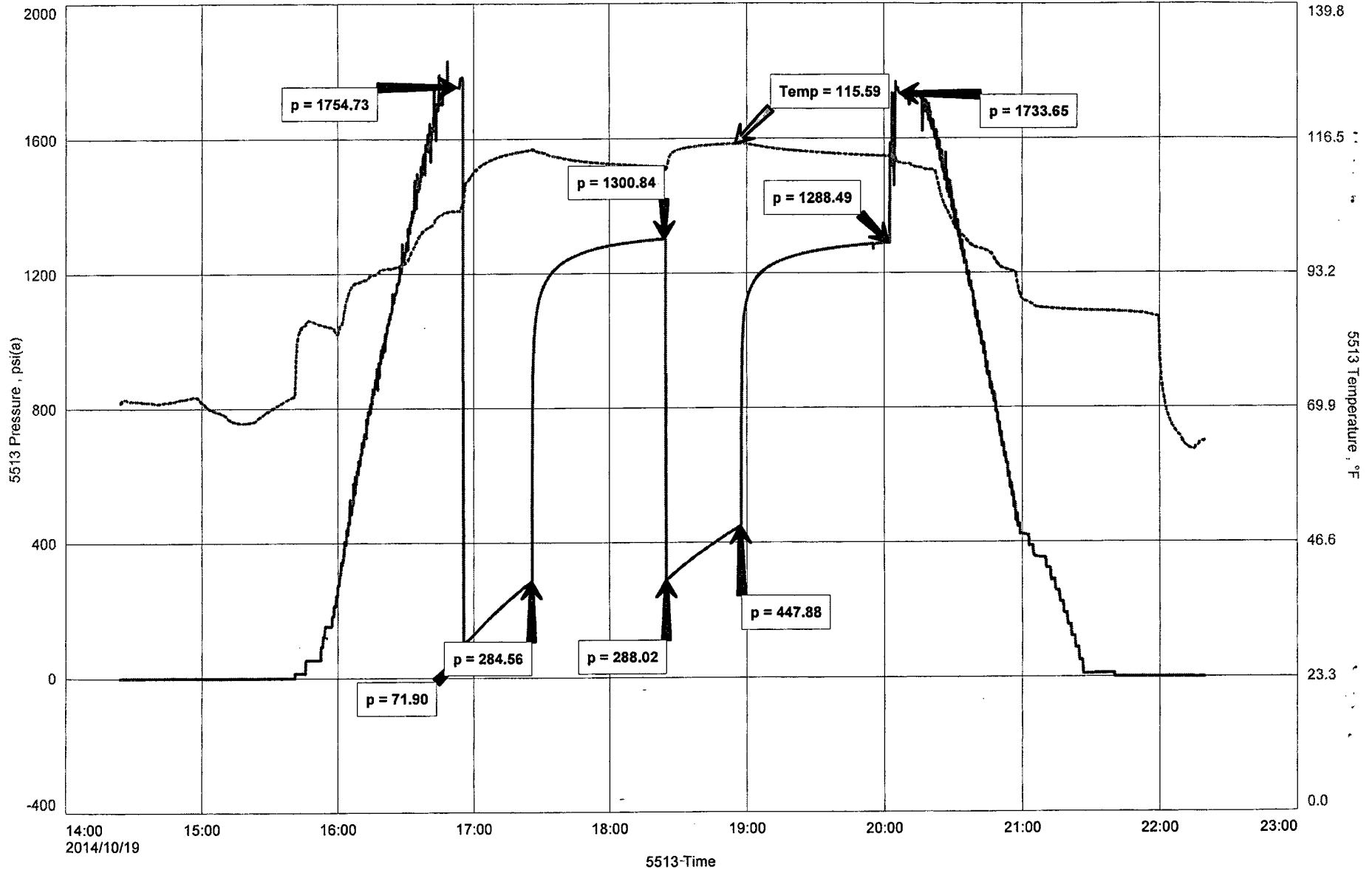
Test Results

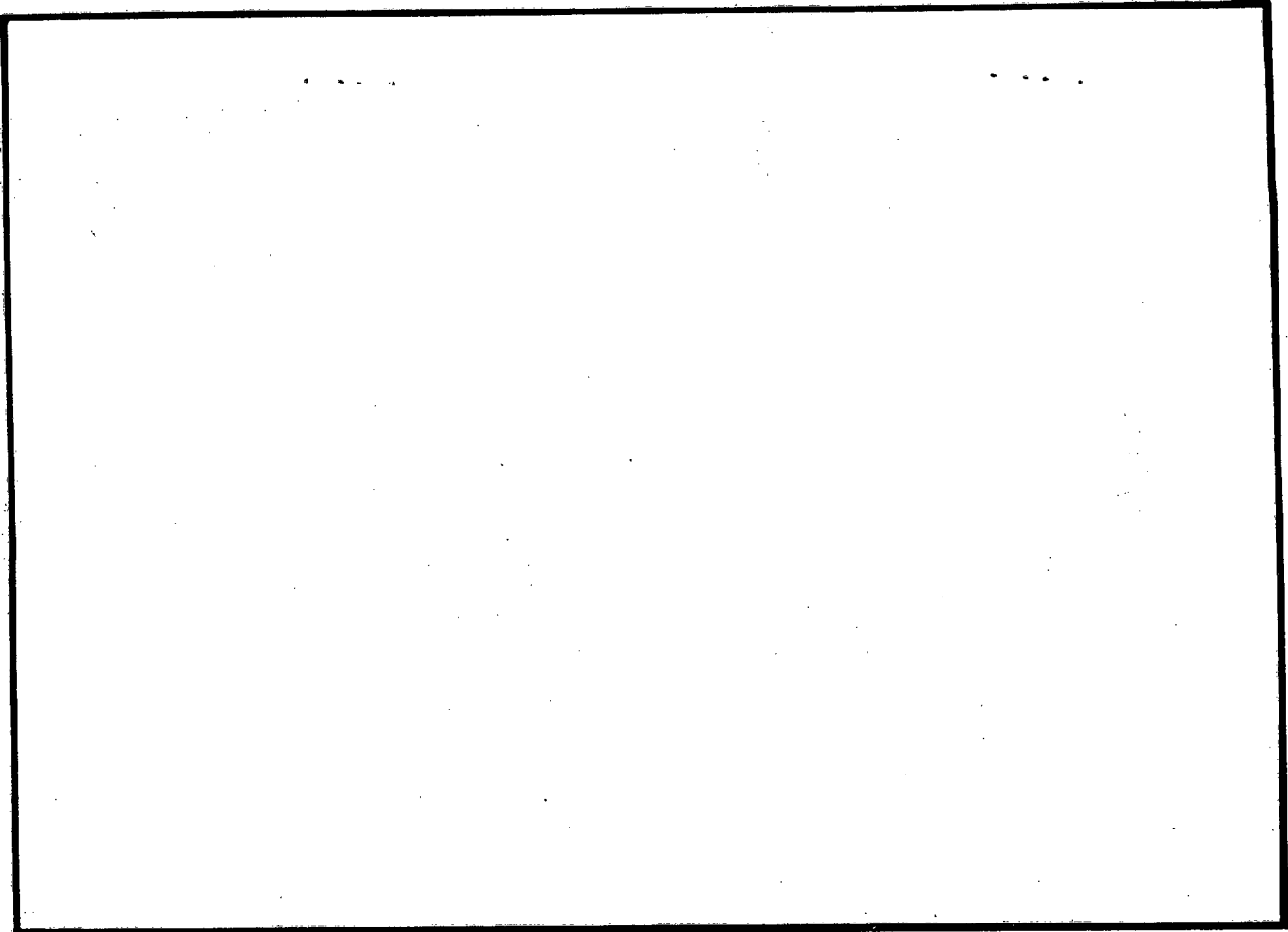
RECOVERED:

875 Muddy Water, 95% Water, 5% Mud
875 TOTAL FLUID

CHLORIDES: 140,000
PH: 7
RW: .850 @ 60

Butch #1





This is an actual photograph of recorder chart.

POINT	PRESSURE	
	Electronic Reading	
(A) Initial Hydrostatic Mud	1755	PSI
(B) First Initial Flow Pressure	72	PSI
(C) First Final Flow Pressure	285	PSI
(D) Initial Closed-in Pressure	1301	PSI
(E) Second Initial Flow Pressure	288	PSI
(F) Second Final Flow Pressure	448	PSI
(G) Final Closed-in Pressure	1288	PSI
(H) Final Hydrostatic Mud	1734	PSI

NOMENCLATURE

b	== Approximate Radius of Investigation	Feet
b¹	== Approximate Radius of Investigation (Net Pay Zone h¹)	Feet
D.R.	== Damage Ratio	————
EI	== Elevation	Feet
GD	== B.T. Gauge Depth (From Surface Reference)	Feet
h	== Interval Tested	Feet
h¹	== Net Pay Thickness	Feet
K	== Permeability	md
K¹	== Permeability (From Net Pay Zone h¹)	md
m	== Slope Extrapolated Pressure Plot (Psi²/cycle Gas)	psi/cycle
OF¹	== Maximum Indicated Flow Rate	MCF/D
OF²	== Minimum Indicated Flow Rate	MCF/D
OF³	== Theoretical Open Flow Potential with/Damage Removed Max.	MCF/D
OF⁴	== Theoretical Open Flow Potential with/Damage Removed Min.	MCF/D
P^S	== Extrapolated Static Pressure	Psig.
P^F	== Final Flow Pressure	Psig.
P^{PT}	== Potentiometric Surface (Fresh Water*)	Feet
Q	== Average Adjusted Production Rate During Test	bbls/day
Q¹	== Theoretical Production w/Damage Removed	bbls/day
Q^g	== Measured Gas Production Rate	MCF/D
R	== Corrected Recovery	bbls
r^w	== Radius of Well Bore	Feet
t	== Flow Time	Minutes
t^o	== Total Flow Time	Minutes
T	== Temperature Rankine	°R
Z	== Compressibility Factor	————
u	== Viscosity Gas or Liquid	CP
Log	== Common Log	

* Potentiometric Surface Reference to Rotary Table When Elevation Not Given, Fresh Water Corrected to 100° F.