



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1238867
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
-----------------------------------	-----------------	---

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: _____



1238867

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
--	---

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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--	---	---

Form	ACO1 - Well Completion
Operator	Prolific Resources LLC
Well Name	Roesler "B" 1
Doc ID	1238867

Tops

Name	Top	Datum
Anhydrite	1109	938
Base Anhy.	1126	921
Heebner Shale	3536	-1489
Lansing	3631	-1584
"G" Zone porosity	3707	-1660
Stark Shale	3849	-1802
Base KC	3921	-1874
Pawnee Lime	4017	-1970
Cherokee Shale	4055	-2008
Cherokee Sand	4069	-2022
Miss. Osage Chert	4120	-2073
Viola	4158	-2111
Simpson Shale	4244	-2197
Arbuckle	4293	-2246



BASIC
ENERGY SERVICES

COPY

PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1003327	1718	10/06/2014
INVOICE NUMBER			
91614123			

Pratt (620) 672-1201

B PROLIFIC RESOURCES LLC
I 2725 DRY CREEK RD
L GREAT BEND
T KS US 67530
O ATTN: DARRELL WILLINGER

J LEASE NAME Roesler B 1
O LOCATION
B COUNTY Pawnee
S STATE KS
I JOB DESCRIPTION Cement-New Well Casing/Pi
T JOB CONTACT
E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40773091	19843		Net - 30 days	11/05/2014

For Service Dates: 10/03/2014 to 10/03/2014

0040773091

171811483A Cement-New Well Casing/Pi 10/03/2014
Cement 5 1/2" Longstring

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
AA2 Cement	175.00	EA	13.09	2,290.74 T
60/40 POZ	50.00	EA	9.24	462.00 T
Celloflake	44.00	EA	2.85	125.36 T
C-41P	42.00	EA	3.08	129.36 T
Salt	797.00	EA	0.39	306.85 T
Cement Friction Reducer	50.00	EA	4.62	231.00 T
C-44	165.00	EA	3.97	654.31 T
FLA-322	83.00	EA	5.78	479.33 T
Mud Flush	500.00	EA	1.16	577.50 T
Gilsonite	875.00	EA	0.52	451.41 T
Claymax KCL Substitute	7.00	EA	26.95	188.65 T
"Latch Down Plug & Baffle, 5 1/2"" (Blu	1.00	EA	308.00	308.00
"Auto Fill Float Shoe 5 1/2"" (Blue)"	1.00	EA	277.20	277.20
"Turboizer, 5 1/2"" (Blue)"	8.00	EA	84.70	677.60
"Unit Mileage Chg (PU, cars one way)"	80.00	MI	3.27	261.80
Heavy Equipment Mileage	160.00	MI	5.39	862.40
"Proppant & Bulk Del. Chgs., per ton mil	828.00	EA	1.69	1,402.63
Depth Charge; 4001'-5000'	1.00	EA	1,940.40	1,940.40
Blending & Mixing Service Charge	225.00	BAG	1.08	242.55
Plug Container Util. Chg.	1.00	EA	192.50	192.50
"Service Supervisor, first 8 hrs on loc.	1.00	EA	134.75	134.75

PAID
10-31-14
ck# 5570

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	12,196.34
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	480.57
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	12,676.91
DALLAS, TX 75284-1903	PORT WORTH, TX 76102		



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 11483 A

DATE _____ TICKET NO. _____

DATE OF JOB 10-03-14		DISTRICT Pratt Kc		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 Profitic Resources				LEASE ROSSER B 1				WELL NO.							
ADDRESS				COUNTY PAWNEE				STATE KS							
CITY				STATE				SERVICE CREW S. Lucas, E. Gray, Phye							
AUTHORIZED BY				JOB TYPE CW 5 1/2" Log, 5 1/2"											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
19889-19843	40	mm					10-3-14			2:00					
19960-21010	40	mm								6:30					
37900										9:50					
										10:30					
										11:15					
										80					

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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AN 2 cont	SK	175		2,975.00
CP 103	60/40 pot	SK	50		600.00
CC 102	CellFAKE	lb	44		162.50
CC 105	C-410	lb	42		168.00
CC 111	SALT	lb	707		398.50
CC 112	CFR	lb	50		300.00
CC 115	C-414	lb	165		849.75
CC 129	FLA-322	lb	83		692.50
CC 201	7.5scm	lb	875		586.25
CF 607	LATCH DOWN PLUG BATH 5 1/2"	SA	1		400.00
CF 1251	PLUG TAP SHOUL	SA	1		360.00
CF 1651	Turbolizer	SA	8		890.00
C 104	CLAY MAX	AL	7		245.00
CC 151	MUD FLK	gal	500		750.00

CHEMICAL / ACID DATA:

SUB TOTAL

SERVICE & EQUIPMENT %TAX ON \$

MATERIALS %TAX ON \$

TOTAL

SERVICE REPRESENTATIVE Robert [Signature]

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 ~~11484~~ A

CONF

DATE _____ TICKET NO. 11483

DATE OF JOB <u>10-03-14</u> DISTRICT <u>PRA #</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>Profitic Resource</u>		LEASE <u>ROESLER B 1</u> WELL NO.							
ADDRESS		COUNTY <u>PAWNEE</u> STATE <u>KS</u>							
CITY STATE		SERVICE CREW <u>Sullivan, Eppig, Pyle</u>							
AUTHORIZED BY		JOB TYPE: <u>CW 5 1/2 HS</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
						ARRIVED AT JOB		AM	PM
						START OPERATION		AM	PM
						FINISH OPERATION		AM	PM
						RELEASED		AM	PM
						MILES FROM STATION TO WELL			

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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
E 100	gpk pms	m	50		340 00
E 101	Head Seat	in	160		1,120 00
E 113	Bulk Delivery	TON	828		1,821 60
CE 205	Depth Meter	SH	1		2,520 00
CE 240	Blender - mixer	SK	225		315 00
CE 504	Wp Container / Packed	SH	1		250 00
5003	Shovel Surface	SH	1		175 00

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE <u>Robert J. [Signature]</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>[Signature]</u>
FIELD SERVICE ORDER NO.	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer <i>Prologic Res.</i>	Lease No.	Date <i>10-03-14</i>
Lease <i>Rooster B</i>	Well # <i>1</i>	
Field Order # <i>11483</i>	Station <i>Pratt # 16</i>	Casing <i>5 1/2</i>
		Depth <i>4320'</i>
Type Job <i>CNW 5 1/2 long string</i>	Formation	County <i>PAWNEE</i>
		State <i>KS</i>
		Legal Description <i>11-22-18</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>5 1/2</i>	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth <i>4320'</i>	Depth	From	To	Pre Pad	Max			5 Min.
Volume <i>10242</i>	Volume	From	To	Pad	Min			10 Min.
Max Press <i>1200 d</i>	Max Press	From	To	Frac	Avg			15 Min.
Well Connection <i>P.</i>	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth <i>4179</i>	Packer Depth	From	To	Flush	Gas Volume			Total Load

Customer Representative	Station Manager <i>DRUG Satt</i>	Treater <i>Robert J. [Signature]</i>
-------------------------	-------------------------------------	---

Service Units	<i>37900</i>	<i>19889</i>	<i>19843</i>	<i>19960</i>	<i>21010</i>				
Driver Names	<i>Sullivan</i>	<i>Scott</i>		<i>Phye</i>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>6:30</i>					<i>on loc</i>
					<i>Ran 5 1/2 15.5' csg</i>
<i>9:00</i>					<i>CASING ON Bottom</i>
<i>9:05</i>					<i>Hook by circ csg</i>
<i>9:50</i>			<i>5</i>	<i>3</i>	<i>RT SPACER</i>
			<i>12</i>		<i>mix mud flush</i>
			<i>5</i>		<i>SPACER</i>
			<i>42</i>	<i>4.5</i>	<i>mix cmt 175 st AA-2 cmt @ 15' #</i>
					<i>cmt mix - 81 shut down wash lined up</i>
					<i>Refer - Plug</i>
				<i>6</i>	<i>St Deep</i>
	<i>250</i>				<i>Lost</i>
	<i>500</i>			<i>4</i>	<i>Slow rate</i>
<i>10:30</i>	<i>1500</i>		<i>102 1/2</i>		<i>plug down</i>
			<i>7</i>		<i>plug RT of 30 st</i>
			<i>5</i>		<i>plug MH of 20 st</i>
					<i>50B complete</i>
					<i>[Signature]</i>



BASIC
ENERGY SERVICES

COPY

PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1003327	1718	09/30/2014
INVOICE NUMBER			
91609630			

Pratt (620) 672-1201

B PROLIFIC RESOURCES LLC
I 2725 DRY CREEK RD
L GREAT BEND
L KS US 67530
T
O **ATTN:** DARRELL WILLINGER

J **LEASE NAME** Roesler B 1
O **LOCATION**
B **COUNTY** Pawnee
S **STATE** KS
I **JOB DESCRIPTION** Cement-New Well Casing/Pi
T **JOB CONTACT**
E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40770760	20920		Net - 30 days	10/30/2014

For Service Dates: 09/27/2014 to 09/27/2014

0040770760

171811150A Cement-New Well Casing/Pi 09/27/2014
Cement 8 5/8 Surface

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
A-Con Blend Common	200.00	EA	13.86	2,772.01 T
Common Cement	200.00	EA	12.32	2,464.00 T
Celloflake	100.00	EA	2.85	284.90 T
Calcium Chloride	940.00	EA	0.81	759.99 T
"Top Rubber Cmt Plug, 8 5/8""	1.00	EA	173.25	173.25
"Baffle Plate Alum., 8 5/8" (Blue)"	1.00	EA	130.90	130.90
"Centralizer, 8 5/8" (Blue)"	3.00	EA	69.30	207.90
"Unit Mileage Chg (PU, cars one way)"	45.00	MI	3.27	147.26
Heavy Equipment Mileage	90.00	MI	5.39	485.10
"Proppant & Bulk Del. Chgs., per ton mil	846.00	EA	1.69	1,433.12
Depth Charge; 501'-1000'	1.00	EA	924.00	924.00
Blending & Mixing Service Charge	400.00	BAG	1.08	431.20
Plug Container Util. Chg.	1.00	EA	192.50	192.50
"Service Supervisor, first 8 hrs on loc.	1.00	EA	134.75	134.75

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	10,540.88
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	511.89
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	11,052.77
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 11180 A

DATE _____ TICKET NO. _____

DATE OF JOB		DISTRICT		NEW WELL <input type="checkbox"/>		OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/>		INJ <input type="checkbox"/>		WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER				LEASE				WELL NO.							
ADDRESS				COUNTY				STATE							
CITY				STATE				SERVICE CREW							
AUTHORIZED BY				JOB TYPE:											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
						ARRIVED AT JOB									
						START OPERATION									
						FINISH OPERATION									
						RELEASED									
						MILES FROM STATION TO WELL									

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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

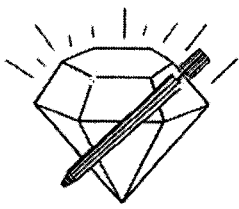
ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
					2.00 00
					2.00 00
					3.70 00
					9.27 00
					225.00
					77.00
					1.00 00
					1.00 00
					1.00 00
					1.00 00
					1.00 00
					510.00
					250.00
					175.00

CHEMICAL / ACID DATA:			

SUB TOTAL		167.00
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
------------------------	---

FIELD SERVICE ORDER NO. _____ (WELL OWNER OPERATOR CONTRACTOR OR AGENT)



DIAMOND TESTING, LLC
 P.O. Box 157
HOISINGTON, KANSAS 67544
 (620) 653-7550 • (800) 542-7313
 STC/Roeslerb1dst1

Company Prolific Resources, LLC Lease & Well No. Roesler "B" No. 1
 Elevation 2047 KB Formation Cherokee Sandstone Effective Pay _____ Ft. Ticket No. J3299
 Date 10-1-14 Sec. 11 Twp. 22S Range 18W County Pawnee State Kansas
 Test Approved By Robert T. (Bob) Stolze Diamond Representative John C. Riedl

Formation Test No. 1 Interval Tested from 4,058 ft. to 4,090 ft. Total Depth 4,090 ft.
 Packer Depth 4,053 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
 Packer Depth 4,058 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
 Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 4,061 ft. Recorder Number 30046 Cap. 6,000 psi.
 Bottom Recorder Depth (Outside) 4,087 ft. Recorder Number 13498 Cap. 6,000 psi.
 Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Murfin Drilling Company, Inc. - Rig 16 Drill Collar Length 30 ft I.D. 2 1/4 in.
 Mud Type Chemical Viscosity 56 Weight Pipe Length _____ ft I.D. _____ in.
 Weight 9.2 Water Loss 8.8 cc. Drill Pipe Length 4,002 ft I.D. 3 1/2 in.
 Chlorides 4,800 P.P.M. Test Tool Length 26 ft Tool Size 3 1/2-IF in.
 Jars: Make Sterling Serial Number 1 Anchor Length 32 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 9 mins. No blow back during shut-in.
 2nd Open: Strong blow increasing. Off bottom of bucket immediately. Gas to surface in 55 mins. Gauged 20 MCF/D. No blow back during shut-in.

Recovered 10 ft. of gas cut mud = .049200 bbls. (Grind out: 10%-gas; 90%-mud)
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____

Remarks Tool Sample Grind Out: 100%-mud
Gas sample taken. Gas burned.

Time Set Packer(s) 6:35 A.M. Time Started off Bottom 10:35 A.M. Maximum Temperature 111°
 Initial Hydrostatic Pressure.....(A) 1993 P.S.I.
 Initial Flow Period.....Minutes 30 (B) 18 P.S.I. to (C) 23 P.S.I.
 Initial Closed In Period.....Minutes 60 (D) 1313 P.S.I.
 Final Flow Period.....Minutes 60 (E) 18 P.S.I. to (F) 17 P.S.I.
 Final Closed In Period.....Minutes 90 (G) 1321 P.S.I.
 Final Hydrostatic Pressure.....(H) 1958 P.S.I.

Diamond Testing General Report

John Riedl
TESTER
CELL: 620-793-0550

General Information

Company Name	PROLIFIC RESOURCES LLC	Job Number	J3299
Contact	DOUG PANNING	Representative	JOHN RIEDL
Well Name	ROESLER "B" #1	Well Operator	PROLIFIC RESOURCES LLC
Unique Well ID		Report Date	2014/10/01
Surface Location	S11/22S/18W	Prepared By	JOHN RIEDL
Field		Qualified By	BOB STOLZLE

Test Information

Test Type	DST #1 CONVENTIONAL
Formation	CHEROKEE SANDSTONE
Well Fluid Type	
Test Purpose	

Start Test Date	2014/10/01	Start Test Time	05:00:00
Final Test Date	2014/10/01	Final Test Time	12:15:00

Test Recovery

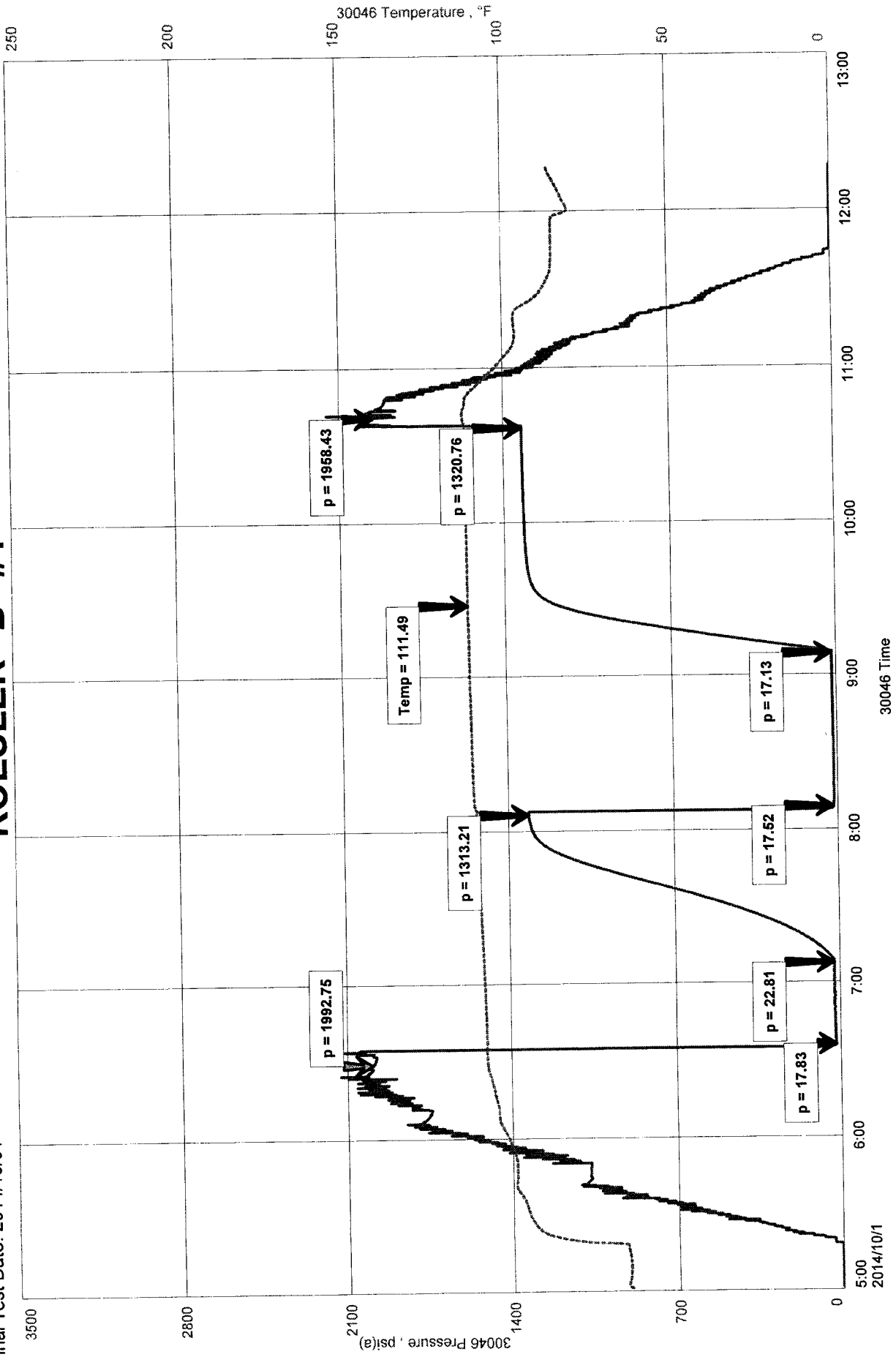
RECOVERY: 10' GAS CUT MUD 10% GAS, 90% MUD

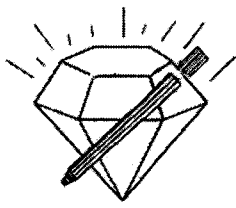
TOOL SAMPLE: 100% MUD

PROLIFIC RESOURCES LLC
DST #1 CHEROKEE SANDSTONE 4058-4090
Start Test Date: 2014/10/01
Final Test Date: 2014/10/01

ROESLER "B" #1
Formation: CHEROKEE SANDSTONE
Job Number: J3299

ROESLER "B" #1





DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
STC/Roeslerb1dst2

Company Prolific Resources, LLC Lease & Well No. Roesler "B" No. 1
Elevation 2047 KB Formation Mississippi Osage Chert Effective Pay _____ Ft. Ticket No. J3300
Date 10-1-14 Sec. 11 Twp. 22S Range 18W County Pawnee State Kansas
Test Approved By Robert T. (Bob) Stolzle Diamond Representative John C. Riedl

Formation Test No. 2 Interval Tested from 4,094 ft. to 4,130 ft. Total Depth 4,130 ft.
Packer Depth 4,089 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 4,094 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 4,097 ft. Recorder Number 30046 Cap. 6,000 psi.
Bottom Recorder Depth (Outside) 4,127 ft. Recorder Number 13498 Cap. 6,000 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Murfin Drilling Company, Inc. - Rig 16 Drill Collar Length 30 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 56 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.2 Water Loss 8.8 cc. Drill Pipe Length 4,038 ft I.D. 3 1/2 in.
Chlorides 4,800 P.P.M. Test Tool Length 26 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 1 Anchor Length 36 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: Weak, 3 in. blow. No blow back during shut-in.
2nd Open: Weak, 2 1/2 in. blow. No blow back during shut-in.

Recovered 40 ft. of gas in pipe
Recovered 20 ft. of gas cut mud = .098400 bbls. (Grind out: 10%-gas; 90%-mud)
Recovered 20 ft. of TOTAL FLUID = .098400 bbls.
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Remarks Tool Sample Grind Out: 100%-mud

Time Set Packer(s) 9:25 P.M. Time Started off Bottom 1:25 A.M. Maximum Temperature 109°
Initial Hydrostatic Pressure.....(A) 2015 P.S.I.
Initial Flow Period.....Minutes 30 (B) 21 P.S.I. to (C) 23 P.S.I.
Initial Closed In Period.....Minutes 60 (D) 111 P.S.I.
Final Flow Period.....Minutes 60 (E) 21 P.S.I. to (F) 26 P.S.I.
Final Closed In Period.....Minutes 90 (G) 144 P.S.I.
Final Hydrostatic Pressure.....(H) 1981 P.S.I.

Diamond Testing General Report

John Riedl
TESTER
CELL: 620-793-0550

General Information

Company Name	PROLIFIC RESOURCES LLC	Job Number	J3300
Contact	DOUG PANNING	Representative	JOHN RIEDL
Well Name	ROESLER "B" #1	Well Operator	PROLIFIC RESOURCES LLC
Unique Well ID		Report Date	2014/10/02
Surface Location	S11/22S/18W	Prepared By	JOHN RIEDL
Field		Qualified By	BOB STOLZLE

Test Information

Test Type	DST #2 CONVENTIONAL
Formation	MISS OSAGE CHERT
Well Fluid Type	
Test Purpose	

Start Test Date	2014/10/01	Start Test Time	20:30:00
Final Test Date	2014/10/02	Final Test Time	03:10:00

Test Recovery

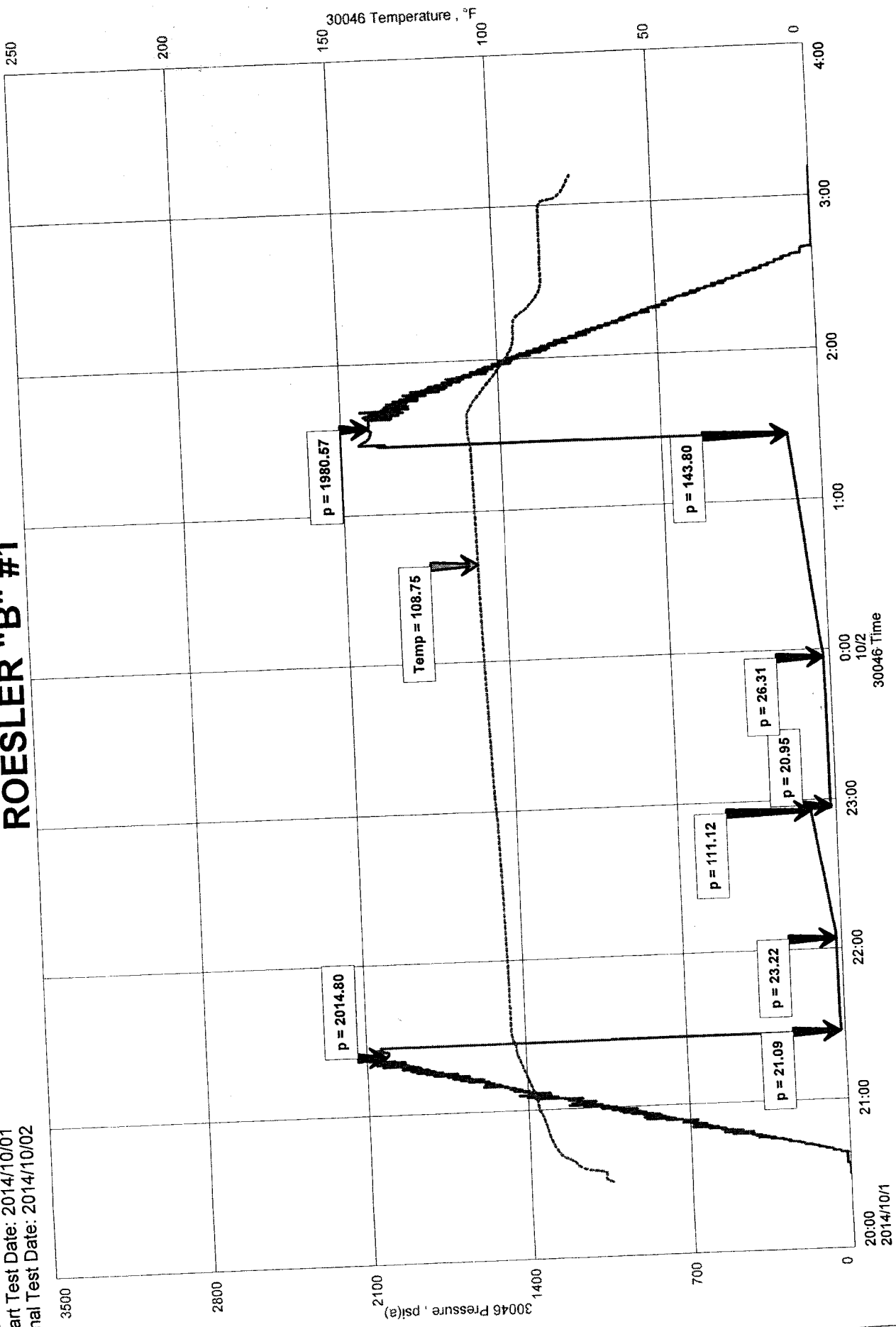
RECOVERY: 40' GAS IN PIPE
20' GAS CUT MUD 10% GAS, 90% MUD
20' TOTAL FLUID

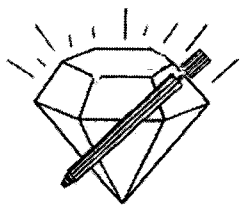
TOOL SAMPLE: 100% MUD

ROESLER "B" #1
Formation: MISS OSAGE CHERT
Job Number: J3300

PROLIFIC RESOURCES LLC
DST #2 MISS OSAGE CHERT 4094-4130
Start Test Date: 2014/10/01
Final Test Date: 2014/10/02

ROESLER "B" #1





DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
STC/Roeslerb1dst3

Company Prolific Resources, LLC Lease & Well No. Roesler "B" No. 1
Elevation 2047 KB Formation Viola Effective Pay _____ Ft. Ticket No. J3301
Date 10-2-14 Sec. 11 Twp. 22S Range 18W County Pawnee State Kansas
Test Approved By Robert T. (Bob) Stolzle Diamond Representative John C. Riedl

Formation Test No. 3 Interval Tested from 4,132 ft. to 4,170 ft. Total Depth 4,170 ft.
Packer Depth 4,127 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 4,132 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 4,135 ft. Recorder Number 30046 Cap. 6,000 psi.
Bottom Recorder Depth (Outside) 4,167 ft. Recorder Number 13498 Cap. 6,000 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Murfin Drilling Company, Inc. - Rig 16 Drill Collar Length 30 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 58 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.0 Water Loss 8.0 cc. Drill Pipe Length 4,076 ft I.D. 3 1/2 in.
Chlorides 4,800 P.P.M. Test Tool Length 26 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 1 Anchor Length 38 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 5 mins. No blow back during shut-in.
2nd Open: Strong blow increasing. Off bottom of bucket immediately. Strong blow back during shut-in.

Recovered 600 ft. of gas in pipe
Recovered 80 ft. of gas cut oil = 1.138400 bbls. (Grind out: 15%-gas; 85%-oil) Gravity: 38 @ 60°
Recovered 50 ft. of gas & oil cut mud = .432200 bbls. (Grind out: 15%-gas; 35%-oil; 50%-mud)
Recovered 130 ft. of TOTAL FLUID = 1.570600 bbls.
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Remarks Tool Sample Grind Out: 95%-oil; 5%-mud
Shut-in tool bearing went out causing invalid final shut-in.

Time Set Packer(s) 12:45 P.M. Time Started off Bottom 4:45 P.M. Maximum Temperature 111°
Initial Hydrostatic Pressure.....(A) 2005 P.S.I.
Initial Flow Period.....Minutes 30 (B) 28 P.S.I. to (C) 27 P.S.I.
Initial Closed In Period.....Minutes 60 (D) 1171 P.S.I.
Final Flow Period.....Minutes 60 (E) 29 P.S.I. to (F) 49 P.S.I.
Final Closed In Period.....Minutes 90 (G) _____ P.S.I.
Final Hydrostatic Pressure.....(H) 1972 P.S.I.

Diamond Testing General Report



John Riedl
TESTER
CELL: 620-793-0550

General Information

Company Name	PROLIFIC RESOURCES LLC	Job Number	J3301
Contact	DOUG PANNING	Representative	JOHN RIEDL
Well Name	ROESLER "B" #1	Well Operator	PROLIFIC RESOURCES LLC
Unique Well ID		Report Date	2014/10/02
Surface Location	S11/22S/18W	Prepared By	JOHN RIEDL
Field		Qualified By	BOB STOLZLE

Test Information

Test Type	DST #3 CONVENTIONAL
Formation	VIOLA
Well Fluid Type	
Test Purpose	

Start Test Date	2014/10/02	Start Test Time	11:20:00
Final Test Date	2014/10/02	Final Test Time	18:00:00

Test Recovery

RECOVERY: 600' GAS IN PIPE
 80' GAS CUT OIL 15% GAS, 85% OIL GRAVITY: 38 @ 60 DEGS
 50' GAS & OIL CUT MUD 15% GAS, 35% OIL, 50% MUD
 130' TOTAL FLUID

TOOL SAMPLE: 95% OIL, 5% MUD

PROLIFIC RESOURCES LLC
DST #3 VIOLA 4132-4170
Start Test Date: 2014/10/02
Final Test Date: 2014/10/02

ROESLER "B" #1

ROESLER "B" #1
Formation: VIOLA
Job Number: J3301

