



Confidentiality Requested:

Yes  No

**KANSAS CORPORATION COMMISSION** 1248311  
**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: \_\_\_\_\_



1248311

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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Form	ACO1 - Well Completion
Operator	Griffin, Charles N.
Well Name	Gladys 1
Doc ID	1248311

Tops

Name	Top	Datum
Elgin Shale	3327	-1875
Elgin Sand	3413	-1961
Heebner	3514	-2062
Brown Lime	3707	-2255
Stark	4097	-2645
Base KC	4185	-2733
Mississippian	4273	-2821
Kinderhook	4464	-3012
Viola	4572	-3120
Simpson	4658	-3206
Simpson Sand	4671	-3219

# QUALITY WELL SERVICE, INC.

6345

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Office 620-727-3410

Fax 620-672-3663

Rich's Cell 620-727-3409

Brady's Cell 620-727-6964

Date	04 09 15	Sec.	26	Twp.	32s	Range	12w	County	Barber	State	KS	On Location	4:00PM	Finish	6:00PM
Lease	Gladys		Well No.	1		Location 160 & 281 St., South to Pleasant Hill Rd, 3/4 mi. S.									
Contractor	Maverick 106							Owner Griffin							
Type Job	Surface							To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.							
Hole Size	12 1/4		T.D.	270											
Csg.	8 5/8	24#	Depth	265											
Tbg. Size			Depth												
Tool			Depth												
Cement Left in Csg.	20'		Shoe Joint	N/A											
Meas Line			Displace	15 1/2 BBls Fresh											
<b>EQUIPMENT</b>				The above was done to satisfaction and supervision of owner agent or contractor. Cement Amount Ordered 175sx class A + 2 1/2 gal + 3' hcc + 1/4" Flowseal											
Pumptrk	8	No.	David B												
Bulktrk	9	No.	Derek B Mike B												
Bulktrk		No.													
Pickup		No.	D. Felio												
<b>JOB SERVICES &amp; REMARKS</b>				Common 175 Poz. Mix Gel. 3 Calcium 6 Hulls Salt Flowseal 43.75 Kol-Seal Mud CLR 48 CFL-117 or CD110 CAF 38 Sand Handling 134 Mileage 10											
Rat Hole															
Mouse Hole															
Centralizers															
Baskets															
D/V or Port Collar															
Pipe on Bttm, Break circ, Pump Spacers, Mix 175sx A 243 cement, Start Disp. w/ Fresh H <sub>2</sub> O, Wash up truck, See Steady increase in PSI, Slow rate, Stop Pump at 15 1/2 BBls total Disp., Shot in cement Did Gravelate				<b>FLOAT EQUIPMENT</b>											
				Guide Shoe											
				Centralizer											
				Baskets											
				AFU Inserts											
				Float Shoe											
				Latch Down											
				L. MV 10											
				Service Equipment											
				Pumptrk Charge Surface											
				Mileage 200											
												Tax			
												Discount			
												Total Charge			
Signature Paul E. Jamon															





**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET  
1718 11954 A

26-325-12W

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB <b>4-18-15</b> DISTRICT <b>Pratt</b>		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 <b>Griffey Management LLC</b>		LEASE <b>Gladys</b> WELL NO. <b>1</b>								
ADDRESS		COUNTY <b>Barber</b> STATE <b>Ks</b>								
CITY STATE		SERVICE CREW <b>MATTAL, McGraw, Gibson</b>								
AUTHORIZED BY		JOB TYPE: <b>new 5 1/2 Long string</b>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
19905	1						4-17-15			8:00
						ARRIVED AT JOB	4-18-15			4:30
						START OPERATION				9:20
						FINISH OPERATION				10:15
						RELEASED				11:00
						MILES FROM STATION TO WELL				35

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
CP105	AA-2 CMT	SK	225		3,825 00
CP105	AA-2 CMT	SK	50		850 00
CC102	Cellofian	lb	69		255 30
CC111	Salt	lb	1257		628 50
CC112	CMT Filtration reducer	lb	130		780 00
CC115	C-44	lb	259		1,333 85
CC201	Gilsonite	lb	1378		923 26
CF607	Latex Plug + barrier 5 1/2	EA	1		400 00
CF1251	Auto Fill Fluid 5 1/2	EA	1		360 00
CF1651	TURBO liner 5 1/2	EA	5		550 00
CF1901	BASKET 5 1/2	EA	1		290 00
C704	CLAYMAY	gal	5		175 00
CC151	Mud Plug	gal	500		750 00
E100	P.U. Miles	Mi	35		157 50
E101	Heavy eq. Miles	Mi	70		525 00
E113	Prod. + Bulk Ad.	Ton	453		1,133 13
CE205	DEPT chum 400-500'	4hr	1		2,520 00
CE240	Bleed + mix chum	SK	275		385 00
CE504	Plug material	JOB	1		250 00
5003	supervise	ea	1		175 00
SUB TOTAL					16,266 54

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		9,271 72

SERVICE REPRESENTATIVE <b>Mike Mattal</b>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i>
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



Customer <i>Griffen Management</i>	Lease No.	Date <i>4-18-15</i>
Lease <i>Gladys</i>	Well # <i>1</i>	
Field Order # <i>11954</i>	Station	Casing <i>5 1/2</i>
Type Job <i>cnw 5 1/2 long string</i>	Formation	Depth <i>4795</i>
		County <i>Barber</i>
		State <i>KS</i>
		Legal Description <i>26-32S-12W</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>5 1/2</i>	Tubing Size	Shots/Ft		Acid- CMF <i>225</i>	SUGS	RATE	PRESS	ISIP
Depth <i>4795</i>	Depth	From	To	Pre Pad <i>50</i>		Max <i>AA-2</i>	<i>griffen</i>	5 Min.
Volume <i>106.3</i>	Volume	From	To	Pad		Min		10 Min.
Max Press <i>1500</i>	Max Press	From	To	Frac		Avg		15 Min.
Well Connection <i>PC</i>	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth <i>4781.6</i>	Packer Depth	From	To	Flush <i>106</i>		Gas Volume		Total Load

Customer Representative <i>J.R. Griffen</i>	Station Manager <i>Kevin Guilty</i>	Treater <i>Mike Matrai</i>
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Service Units	<i>37586</i>	<i>77686</i>	<i>19905</i>	<i>19903</i>	<i>19860</i>				
Driver Names	<i>MATRAI</i>	<i>McGraw</i>		<i>Gibson</i>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>4:30</i>					<i>on location / SAFETY meeting</i>
<i>6:20</i>					<i>Run 5 1/2 20# casing, based on 540'</i>
					<i>tubing on 7, 8, 9, 10, 11</i>
<i>8:27</i>					<i>Casing on BOTTOM</i>
<i>8:35</i>					<i>Hook to casing / Break circ. w. Rig</i>
<i>9:20</i>	<i>250</i>		<i>3</i>	<i>5.5</i>	<i>PUMP 3 bbl water</i>
<i>9:21</i>	<i>250</i>		<i>12</i>	<i>8.5</i>	<i>PUMP 12 bbl mud flush</i>
<i>9:23</i>	<i>250</i>		<i>3</i>	<i>5.5</i>	<i>PUMP 3 bbl water</i>
<i>9:24</i>	<i>300</i>		<i>55</i>	<i>5</i>	<i>Mix 225 SUGS AA-2 @ 15.3 rpg</i>
<i>9:35</i>			<i>4</i>	<i>3</i>	<i>WASH PUMP + Line / release plug</i>
<i>9:38</i>	<i>200</i>			<i>6.5</i>	<i>START 2% KCl displacement</i>
<i>9:49</i>	<i>350</i>		<i>65</i>	<i>6</i>	<i>lift pressure</i>
<i>9:54</i>	<i>800</i>		<i>96</i>	<i>3</i>	<i>slow rate</i>
<i>9:57</i>	<i>1500</i>		<i>106</i>		<i>plug down, released + hold</i>
<i>10:05</i>			<i>7.5</i>		<i>Plug rat + mouse hole</i>
					<i>circ thru JOB</i>
					<i>JOB COMPLETE</i>
					<i>Thank You!</i>
					<i>MIKE MATRAI</i>
					<i>MIKE + AARON</i>





**DIAMOND TESTING, LLC**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(620) 653-7550 • (800) 542-7313  
1gladysdst1

Company Charles N. Griffin Lease & Well No. Gladys No. 1  
Elevation 1442 GL Formation Snyder Sand Effective Pay \_\_\_\_\_ Ft. Ticket No. K235  
Date 4-13-15 Sec. 26 Twp. 32S Range 12W County Barber State Kansas  
Test Approved By Bruce A. Reed Diamond Representative Jason McLemore

Formation Test No. 1 Interval Tested from 3,489 ft. to 3,540 ft. Total Depth 3,540 ft.  
Packer Depth 3,484 ft. Size 6 3/4 in. Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in.  
Packer Depth 3,489 ft. Size 6 3/4 in. Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in.  
Depth of Selective Zone Set \_\_\_\_\_ ft.

Top Recorder Depth (Inside) 3,477 ft. Recorder Number 5513 Cap. 5,000 psi.  
Bottom Recorder Depth (Outside) 3,478 ft. Recorder Number 5588 Cap. 6,000 psi.  
Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ psi.

Drilling Contractor Maverick Drilling, LLC - Rig 106 Drill Collar Length \_\_\_\_\_ ft I.D. \_\_\_\_\_ in.  
Mud Type Chemical Viscosity 47 Weight Pipe Length \_\_\_\_\_ ft I.D. \_\_\_\_\_ in.  
Weight 9.0 Water Loss 8.8 cc. Drill Pipe Length 3,464 ft I.D. 3 1/2 in.  
Chlorides 3,000 P.P.M. Test Tool Length 25 ft Tool Size 3 1/2-IF in.  
Jars: Make Sterling Serial Number Not Run Anchor Length 20' perf. w/31' drill pipe 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 2 1/2 mins. No blow back during shut-in.

2nd Open: Strong blow increasing. Off bottom of bucket in 30 secs. No blow back during shut-in.

Recovered 425 ft. of gas in pipe  
Recovered 55 ft. of drilling mud = .782650 bbls.  
Recovered 55 ft. of TOTAL FLUID = .782650 bbls.  
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Remarks \_\_\_\_\_

Time Set Packer(s) 4:26 P.M. Time Started off Bottom 7:26 P.M. Maximum Temperature 106°  
Initial Hydrostatic Pressure.....(A) 1628 P.S.I.  
Initial Flow Period.....Minutes 30 (B) 29 P.S.I. to (C) 29 P.S.I.  
Initial Closed In Period.....Minutes 60 (D) 259 P.S.I.  
Final Flow Period.....Minutes 30 (E) 38 P.S.I. to (F) 34 P.S.I.  
Final Closed In Period.....Minutes 60 (G) 170 P.S.I.  
Final Hydrostatic Pressure.....(H) 1615 P.S.I.



JASON MCLEMORE

CELL # 620-617-0527

**General Information**

Company Name	Charles N Griffin	Charles N Griffin	Job Number	K235	
Contact		Gladys #1	Representative	Jason McLemore	
Well Name		DST #1 Snyder Sand	3489-3540	Well Operator	Charles N Griffin
Unique Well ID		26-32s-12w-Barber	Prepared By	Jason McLemore	
Surface Location		Toni-Mike Northeast	Qualified By	Bruce Reed	
Field		Vertical	Test Unit		
Well Type					

**Test Information**

Test Type	Drill Stem Test	Representative	Jason McLemore
Formation	Snyder Sand	Well Operator	Charles N Griffin
Well Fluid Type	01 Oil	Report Date	2015/04/13
Test Purpose (AEUB)	Initial Test	Prepared By	Jason McLemore
Start Test Date	2015/04/13	Start Test Time	14:22:00
Final Test Date	2015/04/13	Final Test Time	21:30:00

**Test Results**

RECOVERED:

55            Drilling Mud  
55            TOTAL FLUID

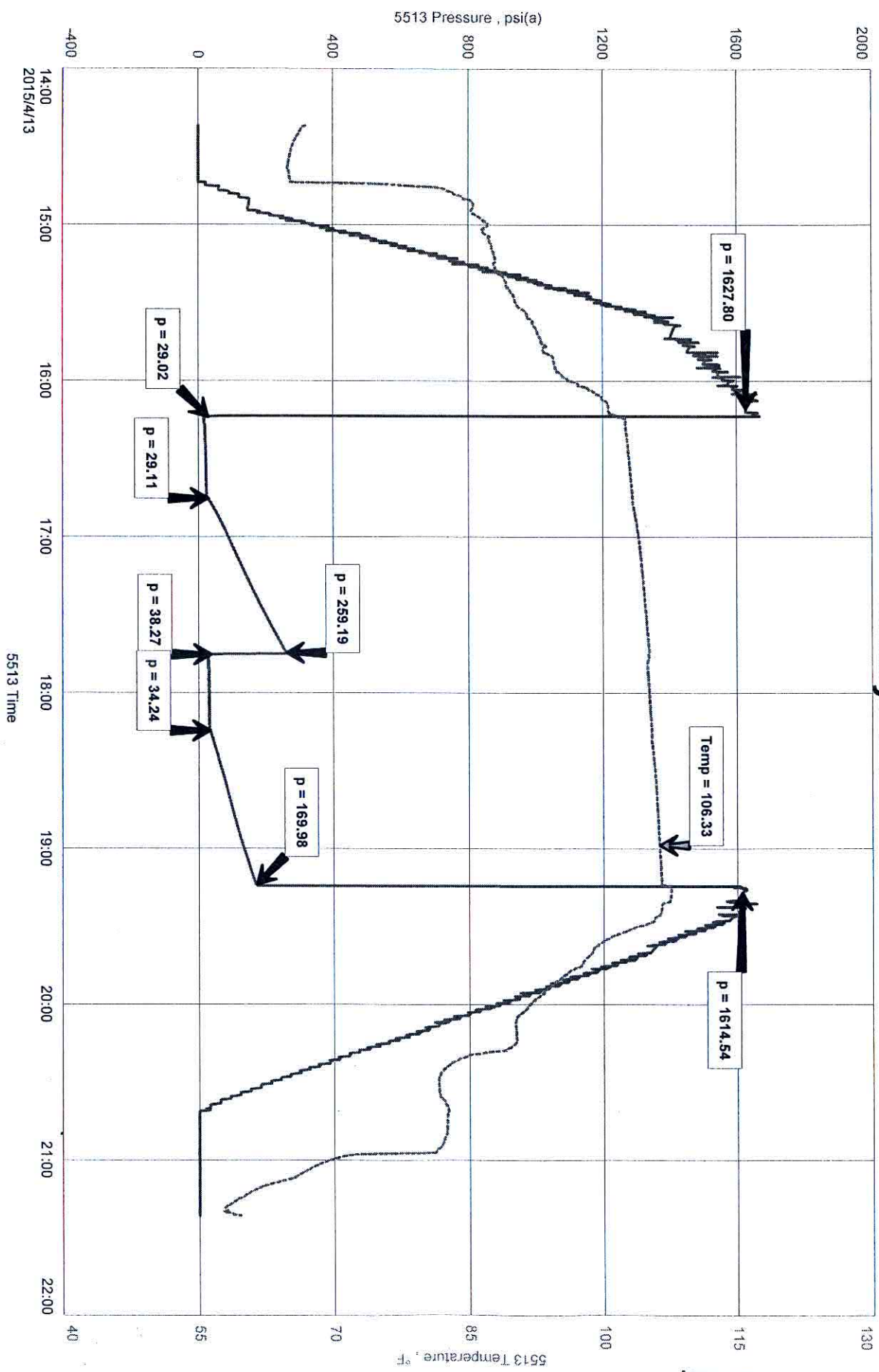
425 Gas In Pipe

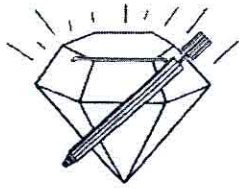


Charles N Griffin  
 DST #1 Snyder Sand 3489-3540  
 Start Test Date: 2015/04/13  
 Final Test Date: 2015/04/13

# Gladys #1

Gladys #1  
 Formation: Snyder Sand  
 Pool: Wildcat  
 Job Number: K235





**DIAMOND TESTING, LLC**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(620) 653-7550 • (800) 542-7313  
1gladysdst2

Company Charles N. Griffin Lease & Well No. Gladys No. 1  
Elevation 1442 GL Formation Swope Effective Pay      Ft. Ticket No. K236  
Date 4-15-15 Sec. 26 Twp. 32S Range 12W County Barber State Kansas  
Test Approved By Bruce A. Reed Diamond Representative Jason McLemore

Formation Test No. 2 Interval Tested from 4,073 ft. to 4,110 ft. Total Depth 4,110 ft.  
Packer Depth 4,068 ft. Size 6 3/4 in. Packer Depth      ft. Size      in.  
Packer Depth 4,073 ft. Size 6 3/4 in. Packer Depth      ft. Size      in.  
Depth of Selective Zone Set      ft.

Top Recorder Depth (Inside) 4,054 ft. Recorder Number 5513 Cap. 5,000 psi.  
Bottom Recorder Depth (Outside) 4,055 ft. Recorder Number 5588 Cap. 6,000 psi.  
Below Straddle Recorder Depth      ft. Recorder Number      Cap.      psi.

Drilling Contractor Maverick Drilling, LLC - Rig 106 Drill Collar Length      ft I.D.      in.  
Mud Type Chemical Viscosity 53 Weight Pipe Length      ft I.D.      in.  
Weight 9.2 Water Loss 9.6 cc. Drill Pipe Length 4,040 ft I.D. 3 1/2 in.  
Chlorides 6,000 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.  
Jars: Make Sterling Serial Number 6 Anchor Length 37 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 1 min. 45 secs. No blow back during shut-in.

2nd Open: Off bottom of bucket immediately. No blow back during shut-in.

Recovered 2,280 ft. of gas in pipe  
Recovered 120 ft. of gassy, oil cut mud = 1.707600 bbls. (Grind out: 45%-gas; 25%-oil; 30%-mud)  
Recovered 120 ft. of TOTAL FLUID = 1.707600 bbls.  
Recovered      ft. of       
Recovered      ft. of       
Recovered      ft. of     

Remarks     

Time Set Packer(s) 4:22 A.M. Time Started off Bottom 6:52 A.M. Maximum Temperature 115°  
Initial Hydrostatic Pressure.....(A) 1966 P.S.I.  
Initial Flow Period.....Minutes 30 (B) 28 P.S.I. to (C) 35 P.S.I.  
Initial Closed In Period.....Minutes 45 (D) 1441 P.S.I.  
Final Flow Period.....Minutes 30 (E) 47 P.S.I. to (F) 57 P.S.I.  
Final Closed In Period.....Minutes 45 (G) 1378 P.S.I.  
Final Hydrostatic Pressure.....(H) 1936 P.S.I.





**JASON MCLEMORE**

**CELL # 620-617-0527**

**General Information**

Company Name	Charles N Griffin	Contact	Charles N Griffin	Job Number	K236
Well Name	Gladys #1	Representative	Jason McLemore		
Unique Well ID	DST #2 Swope 4073-4110	Well Operator	Charles N Griffin		
Surface Location	26-32s-12w-Barber	Prepared By	Jason McLemore		
Field	Toni-Mike Northeast	Qualified By	Bruce Reed		
Well Type	Vertical	Test Unit	6		

**Test Information**

Test Type	Drill Stem Test	Representative	Jason McLemore
Formation	Swope	Well Operator	Charles N Griffin
Well Fluid Type	01 Oil	Report Date	2015/04/15
Test Purpose (AEUB)	Initial Test	Prepared By	Jason McLemore

Start Test Date	2015/04/15	Start Test Time	01:32:00
Final Test Date	2015/04/15	Final Test Time	09:25:00

**Test Results**

**RECOVERED:**

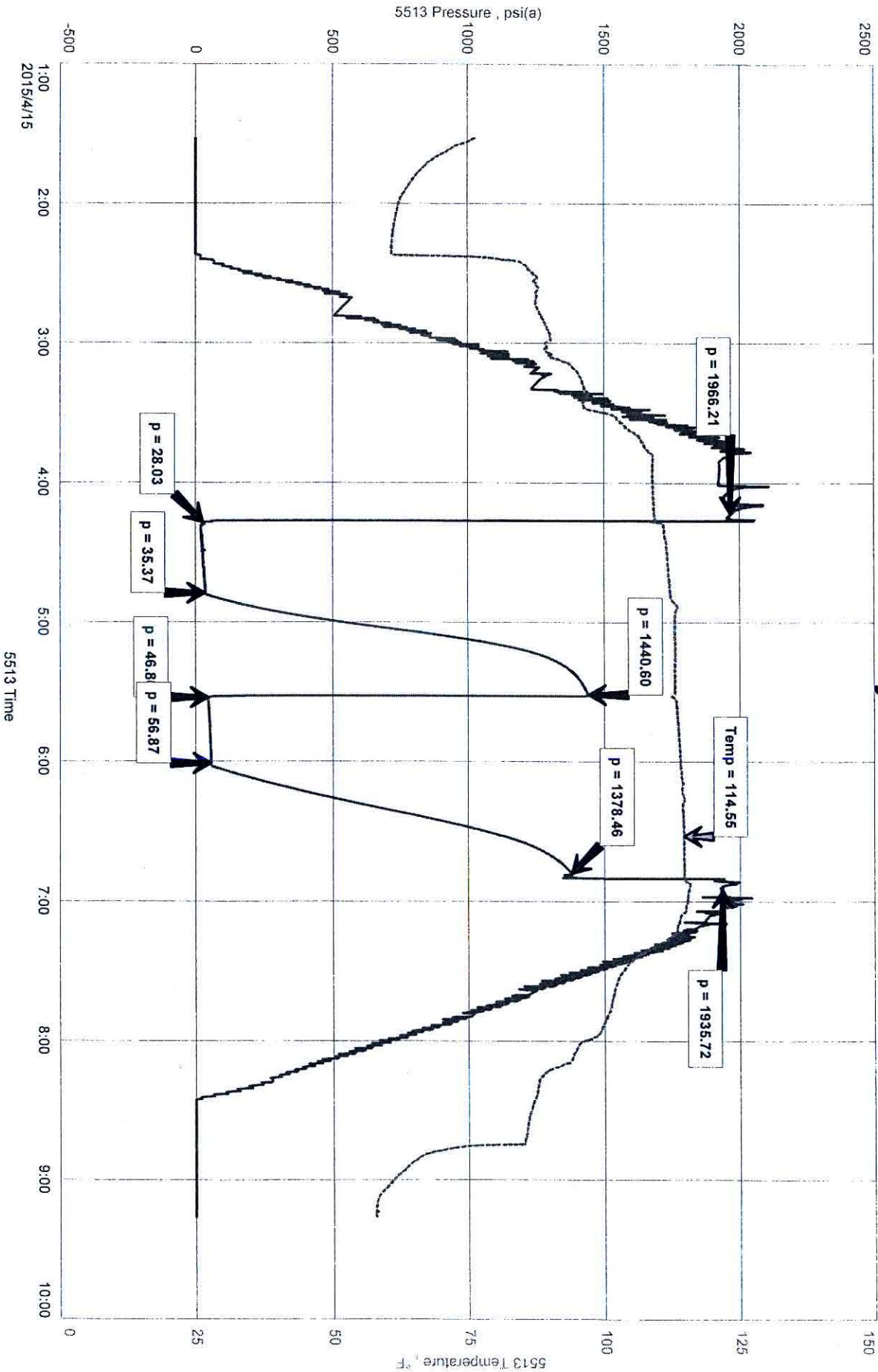
120 Gassy Oil Cut Mud, 45% Gas, 25% Oil, 30% Mud  
 120 TOTAL FLUID

2280' Gas In Pipe

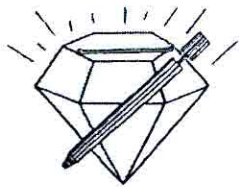
Charles N Griffin  
DST #2 Swope 4073-4110  
Start Test Date: 2015/04/15  
Final Test Date: 2015/04/15

# Gladys #1

Gladys #1  
Formation: Swope  
Pool: Wildcat  
Job Number: K236







**DIAMOND TESTING, LLC**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(620) 653-7550 • (800) 542-7313  
1gladysdst3

Company Charles N. Griffin Lease & Well No. Gladys No. 1  
Elevation 1442 GL Formation Viola Effective Pay \_\_\_\_\_ Ft. Ticket No. K237  
Date 4-16-15 Sec. 26 Twp. 32S Range 12W County Barber State Kansas  
Test Approved By Bruce A. Reed Diamond Representative Jason McLemore

Formation Test No. 3 Interval Tested from 4,572 ft. to 4,586 ft. Total Depth 4,586 ft.  
Packer Depth 4,567 ft. Size 6 3/4 in. Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in.  
Packer Depth 4,572 ft. Size 6 3/4 in. Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in.  
Depth of Selective Zone Set \_\_\_\_\_ ft.

Top Recorder Depth (Inside) 4,553 ft. Recorder Number 5513 Cap. 5,000 psi.  
Bottom Recorder Depth (Outside) 4,554 ft. Recorder Number 5588 Cap. 6,000 psi.  
Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ psi.

Drilling Contractor Maverick Drilling, LLC - Rig 106 Drill Collar Length \_\_\_\_\_ ft. I.D. \_\_\_\_\_ in.  
Mud Type Chemical Viscosity 59 Weight Pipe Length \_\_\_\_\_ ft. I.D. \_\_\_\_\_ in.  
Weight 9.4 Water Loss 9.8 cc. Drill Pipe Length 4,539 ft. I.D. 3 1/2 in.  
Chlorides 9,000 P.P.M. Test Tool Length 33 ft. Tool Size 3 1/2-IF in.  
Jars: Make Sterling Serial Number 6 Anchor Length 14 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, surface blow, Died in 15 mins. No blow back during shut-in.

2nd Open: No blow. No blow back during shut-in.

Recovered 1 ft. of mud w/oil specks = .014230 bbls. (Grind out: <1%-oil; >99%-mud)

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Remarks \_\_\_\_\_

Time Set Packer(s) 4:36 P.M. Time Started off Bottom 6:36 P.M. Maximum Temperature 119°  
Initial Hydrostatic Pressure.....(A) 2287 P.S.I.  
Initial Flow Period.....Minutes 30 (B) 8 P.S.I. to (C) 15 P.S.I.  
Initial Closed In Period.....Minutes 30 (D) 43 P.S.I.  
Final Flow Period.....Minutes 30 (E) 15 P.S.I. to (F) 17 P.S.I.  
Final Closed In Period.....Minutes 30 (G) 32 P.S.I.  
Final Hydrostatic Pressure.....(H) 2280 P.S.I.



JASON MCLEMORE

CELL # 620-617-0527

**General Information**

Company Name	Charles N Griffin	Job Number	K237
Contact	Charles N Griffin	Representative	Jason McLemore
Well Name	Gladys #1	Well Operator	Charles N Griffin
Unique Well ID	DST #3 Viola 4572-4587	Prepared By	Jason McLemore
Surface Location	26-32s-12w-Barber	Qualified By	Bruce Reed
Field	Toni-Mike Northeast	Test Unit	6
Well Type	Vertical		

**Test Information**

Test Type	Drill Stem Test	Representative	Jason McLemore
Formation	Viola	Well Operator	Charles N Griffin
Well Fluid Type	01 Oil	Report Date	2015/04/16
Test Purpose (AEUB)	Initial Test	Prepared By	Jason McLemore
Start Test Date	2015/04/16	Start Test Time	14:15:00
Final Test Date	2015/04/16	Final Test Time	21:21:00

**Test Results**

RECOVERED:

1	Mud With Oil Specks, <1% Oil, >99% Mud
1	TOTAL FLUID



Charles N Griffin  
 DST #3 Viola 4572-4587  
 Start Test Date: 2015/04/16  
 Final Test Date: 2015/04/16

# Gladys #1

Gladys #1  
 Formation: Viola  
 Pool: Wildcat  
 Job Number: K237

