

Confidentiality Requested:

Yes No

### Kansas Corporation Commission Oil & Gas Conservation Division

1251375

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 #			API No. 15		
Name:			Spot Description:		
Address 1:			Sec	TwpS. R	East West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from I	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □SE □SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long: _	
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84	
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	W	/ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW	☐ SWD	∐ SIOW □ SIGW	Elevation: Ground:	Kelly Bushing:	:
☐ Gas ☐ D&A	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total C	Depth:
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore, Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		Feet
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	•	NHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
☐ Plug Back	Conv. to G		(Data must be collected from the		
Commingled	Pormit #:		Chloride content:	ppm Fluid volume	e: bbls
Dual Completion			Dewatering method used: _		
SWD			Location of fluid disposal if	hauled offsite	
☐ ENHR			1		
GSW	Permit #:		Operator Name:		
_ <del>_</del>			Lease Name:	License #:_	
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R	East _ West
Recompletion Date		Recompletion Date	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 Approved by: Date:							

Page Two



Operator Name: Lease Name: \_ \_ Well #: \_ 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** No Loa Formation (Top), Depth and Datum Sample | Yes (Attach Additional Sheets) Name Top Datum No Samples Sent to Geological Survey Yes ☐ No Yes
 Yes
 ■
 Yes
 ■
 Yes
 ■
 Nes
 Nes Cores Taken Electric Log Run \_\_\_ Yes No List All E. Logs Run: CASING RECORD New Used Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight Setting Type of # Sacks Type and Percent Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Depth Cement Used Additives ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone Did you perform a hydraulic fracturing treatment on this well? Yes No (If No, skip questions 2 and 3) No Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes (If No, skip question 3) Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? (If No, fill out Page Three of the ACO-1) Yes PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated Depth (Amount and Kind of Material Used) 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** Oil Bbls Gas Mcf Water Bbls. Gas-Oil Ratio Gravity Per 24 Hours METHOD OF COMPLETION: **DISPOSITION OF GAS:** PRODUCTION INTERVAL: Open Hole Perf. Dually Comp. Commingled Vented Sold Used on Lease (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)



CUSTOMER

ADDRESS

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

# 1718 12061 A

CUSTOMER ORDER NO.:

WELL NO.3-/

ERGY SERVICES	PHONE 020-072-120.
IRE PUMPING & WIRELINE	1-65-186

7-2015 DISTRICT Prayales

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

STATE

OLD □ PROD □ INJ □ WDW

LEASE BEHTY

COUNTY

CITY		STATE		SERVICE CE	REW D	grin	Ed, De	sc h	4	
AUTHORIZED B	Υ			JOB TYPE:	CNW	185/8	SUIFE	ce		
EQUIPMENT	# HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALL		PATE	200	ME Co
27463	VZ					ARRIVED AT		3-6		100
19862	1/4					START OPER		3-7		20
						FINISH OPER		3-7	4:0	
			-		-	RELEASED		- 2	Q 5	
			-			MILES FROM	STATION TO	WELL	163	
products, and/or sug	l is authorized to exc opties includes all of	cute this contract as an	agent of the cu Loonditions app	be signed before the job is storner. As such, the under bearing on the front and bac Energy Services LP.	signed agre k of this do	ees and acknowle curnent, No addition	does that this co	terms a	nd/or condition	ns sha
ITEM/PRICE REF. NO.	МА	TERIAL, EQUIPMENT	AND SERVI	CES USED	UNIT	QUANTITY	UNIT PRIC	E	\$ AMOU	NT
CP103	60140 P				SK	300			3,600	00
CC102	Cellout	Ich-			16	75			277	8
CC109		Chlorise			46	774			8/2	70
E100	שומ בומנו	se Cherse -	DICKLES	Shift Dene + Chil	mi'	100			450	00
E 101	HESUV E	GUIRMEN+ M	ilesse	cherses Penne	mi	200			1500	20
E 113	Proposat	SNA BULLE D	elivery	chersee Perna	Thin	1290			3225	95
CF 200	Depan Ch	ocrse 10:500			430	1			1,000	œ
CF240	Blendins	& Mixing &	Service	Cherse	SIC	300			420	20
5003	Service	& MUXING S Super visori	Cirse 8	his on tac.	FS	1			175	00
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			+	MATERIALS		%TAX			34.	
						P. s cou	nee TO	TAL	7,449	13
SERVICE REPRESENTATIV	E Paris	French		E MATERIAL AND SEF BY CUSTOMER AND I	RECEIVE	O BY:	OR CONTRACTO	OR OR A	GENT)	



## TREATMENT REPORT

Customer	D De	Ha	ne T	ac .	L	ease No.				Date						
Lease B	717	11.		ic.	W	/ell # 3	-1					3-7.2015				
Field Order #	Station	1	) (9)	+,10				Casing	85/4	Depth	350	County	Rooks		State 165 -63-18W	
	NU/ 8							N	Fo	mation	σD-3	50	Legal D	oscription /	-63-18W	
PIPE DATA PERFORATING DATA					FLUID	USED				REATMENT	RESUME					
Cashag Siza	Tubing Si	ze	Shots/F	ı			Acid					RATE	PRESS	ISIP		
Depth 350	Depth		From		То		Pre	Pad			Max			5 Min.		
Volume 25	Volume		From		To		Pad				Min			10 Min.		
Max Press	Max Pres	s	From		To		Frac	:			Avg			15 Min.		
Well Connection	on Annulus \	/ol.	From		То						HHP Use			Annulus F		
Plug Pepth	Packer D		From		To		Flus				Gas Volu			Total Load		
Customer Rep				ň		Station	Mana	iger Kc	Vin G	0161	7	Treat	Darin	Frank	clis	
Service Units		1				1										
Driver Names	DSun Casing	E	<b>à</b> ubing	Beso	to)	Besch	1		-							
Time	Pressure		959UTO	Bbls	s. Pum	ped		Rate	-			,	Service Log			
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10244 NE Hwy. 61 P.O. Box 8613 Pratt. Kansas 67124 Phone 620-672-1201

### FIELD SERVICE TICKET 1718 **11512** A

DATE TICKET NO.\_ DATE OF JOB CUSTOMER ORDER NO.: DISTRICT PAN M OLD PROD INJ ☐ WDW **CUSTOMER** WELL NO. **ADDRESS** STATE KS COUNTY CITY SERVICE CREWC STATE **AUTHORIZED BY** JOB TYPE: (1)(4) **EQUIPMENT#** HRS **EQUIPMENT#** HRS **EQUIPMENT#** HRS DATE TIME 4/30 TRUCK CALLED ARRIVED AT JOB START OPERATION AM PM 20 FINISH OPERATION 95 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. hl SIGNED:\_// (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) ITEM/PRICE REF. NO. MATERIAL, EQUIPMENT AND SERVICES USED UNIT QUANTITY UNIT PRICE \$ AMOUNT 150 sk 215 103 60/40 002 04 50 38 102 cc m 816 00//3 705 CC/29 00 201 900 C 102 CC 109 600 31 100 54 950 54 4000 SUB TOTAL CHEMICAL / ACID DATA: SERVICE & EQUIPMENT %TAX ON \$ **MATERIALS** %TAX ON \$ TOTAL

SERVICE REPRESENTATIVE	Ro	bert	6/15

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

FIELD SERVICE ORDER NO.



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

#### FIELD SERVICE TICKET

1718 11513 A

cont

PRESSURE PUMPING & WIRELINE						DATE TICKET NO. 1/5/2							
DATE OF JOB 03-	14-15	DIS	TRICT PRATT	-kc		WELL IX	ÖLD [] F	PROD □INJ	☐ WDW	□8	USTOMER RDER NO	} ::	
CUSTOMER	1.0.	DRI	CC			LEASE &	etty	3	-/		WELL N	10.	
ADDRESS		1				COUNTY	Rook	25	STATE	KC			
CITY STATE						SERVICE CI	REW S	Mund 8	carn, B	ena	14.8	nd	0
AUTHORIZED B	ΙΥ					JOB TYPE:	en	w d	45		1/	1	
EQUIPMENT	TH H	IRS Ì	EQUIPMENT#	HRS	EQU	IPMENT#	HRS	TRUCK CALL	.ED	DAT	E AM PM	TIME	
								ARRIVED AT	JOB		AM		
		_					1	START OPER	RATION		AM PM		_
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		-						RELEASED			AM		
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				J				0	ON \$ TO	HAL.	10,7.	4	5

THE ABOVE MATERIAL AND SERVICE

ORDERED BY CUSTOMER AND RECEIVED BY:

RECEIVED BY: (WELL OWNER OPERATOR CONTRACTOR OR AGENT)



## TREATMENT REPORT

Customer	D. Deil	1.5		L	Lease No.				Date							
.ease 👝	3eth						03-14-15									
Field Order #	Station	RA-H	KS	-			Casing	1/2	Depth	328	Count	Roc	OKS		State	
Type Job	J 5/2		0 5	141	1		-	the street where	ormation				Legal De	scription _	18	
PIPE DATA PERFORATIN				40				D	TREATMENT RESUME							
Casing Sizy	Tubbin Mize	Shela/E	50/			Aci	id				RATE	PRE	SS	S ISIP		
Depth 3828	Depth 43			То		Pre	e Pad			Max				5 Min.		
Volumes	Volume	From		То		Pa	d			Min				10 Min.		
Max Press	Max Press	From		То		Fra	ic			Avg	6			15 Min.	17.1	
Well poppection	A <del>nnulus Vol</del>	From		То						HHP Used	d			Annulus P	ressur <del>e</del>	
Phys Depth	Packer-Dep	th From		То		Flu	sh			Gas Volur				Total Load		
Customer Repr	esentative				Station	Man	ager OAU	5	cort		Trea	ater 2	bedo	11/2	_ ب	
Service Units	37900 3	33708	209	20	1990.		19860	99	40	19862	4_					
Driver Names	allino !	Ergin			SIM	d'a		B	eachy							
Time	Casing Pressure	Prassure	Bbls	s. Pum	ped		Rate	_				Servi	cé Log			
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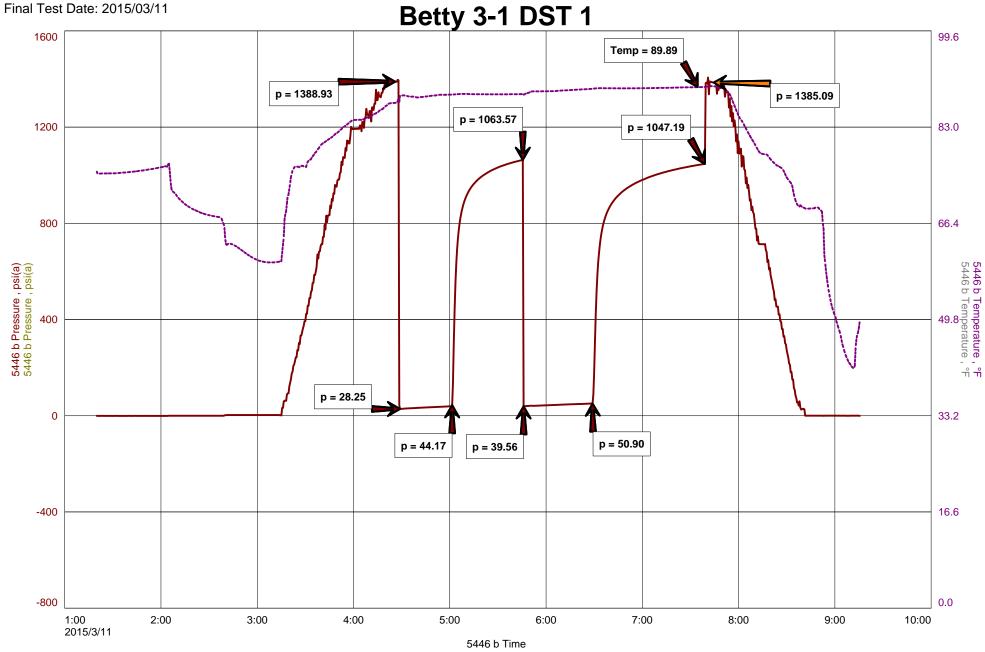
# TREATMENT REPORT

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15 Min.
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Fax (620) 672-5383

LD Drilling DST 1 Lower Topeka 2934-3004 Start Test Date: 2015/03/11

Betty 3-1 Formation: Lower Topeka

Job Number: W174





# **Diamond Testing General Report**

Wilbur Steinbeck TESTER CELL: 620-282-1573

### **General Information**

**Company Name** LD Drilling

Contact Kim Shoemaker Job Number W174 Betty 3-1 Representative Wilbur Steinbeck **Well Name** DST 1 Lower Topeka 2934-3004 Well Operator **Unique Well ID** LD **Surface Location** 1-6s-18w Rooks/Kans Report Date 2015/03/11 Wilbur Steinbeck Field Wildcat Prepared By **Qualified By** Kim Shoemaker

### **Test Information**

Test Type Conventional Formation Lower Topeka Well Fluid Type 01 Oil Test Purpose (AEUB) Initial Test

 Start Test Date
 2015/03/11
 Start Test Time
 01:20:00

 Final Test Date
 2015/03/11
 Final Test Time
 09:20:00

#### **Test Recovery**

Recovery 75' Mud

75' Total Fluid

**Tool Sample Mud** 

15' of fill in hole



#### DIAMOND TESTING P.O. Box 157 HOISINGTON, KANSAS 67544

(800) 542-7313

### **DRILL-STEM TEST TICKET**

FILE: Betty 3-1 DST 1

TIME ON: 1:20 TIME OFF: 9:20

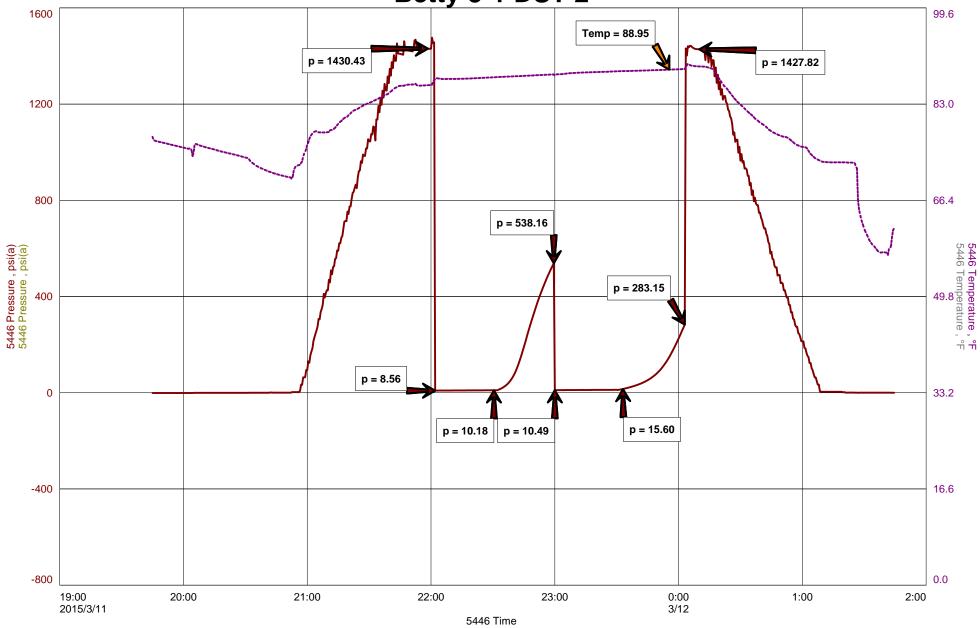
	FILE: Betty 3	3-1 DST 1			
Company_LD Drilling		_Lease & Well NoBe	etty		
Contractor_LD		_ Charge to LD Drillin	g		
Elevation 1872 KB Formation	Lower Topel	a Effective Pay		Ft. Ticket No	W174
Date 3-11-15 Sec. 1 Twp.	6 S R	ange1	8 W County	Rooks St	ate_ KANSAS
Test Approved By Kim Shoemaker		_ Diamond Representati	ve W	/ilbur Steinbecl	(
Formation Test No1 Interval Te	sted from 29	934 ft. to	3004 ft. Total D	Depth	3004 ft.
Packer Depth 2929 ft. Size	6 3/4 in.	Packer depth		ft. Size 6 3/	4 in.
Packer Depth 2934 ft. Size	6 3/4 in.	Packer depth		ft. Size 6 3/	<u>4</u> in.
Depth of Selective Zone Set					
Top Recorder Depth (Inside)	2920 ft.	Recorder Number_	5446	ар	5000 P.S.I.
Bottom Recorder Depth (Outside)	2935 ft.	Recorder Number_	5965	Сар	5,000 P.S.I.
Below Straddle Recorder Depth	ft.	Recorder Number_	c	ар	P.S.I.
Mud Type Chem Viscosity	60	Drill Collar Length_	<u>0</u> ft.	I.D	2 1/4 in.
Weight8.6 Water Loss	5.8cc	Weight Pipe Length	0 <sub>ft</sub>	. I.D	2 7/8 in
Chlorides	400 P.P.M.	Drill Pipe Length	2901 <sub>ft</sub>	I.D	3 1/2 in
Jars: Make STERLING Serial Number	7	Test Tool Length	33 <sub>ft</sub>	Tool Size	3 1/2-IF in
Did Well Flow? Yes Reversed Ou	tNo	Anchor Length	70 <sub>ft</sub>	. Size	4 1/2-FH in
Main Hole Size 7 7/8 Tool Joint Siz	e4_1/2in.	Surface Choke Size	1in	. Bottom Chok	e Size_5/8_in
Blow: 1st Open: Built to 2"	11 10 10 10 10 10 10 10 10 10 10 10 10 1	No Return			
2nd Open: Built to 2 1/2"		No Return			, u
Recovered 75 ft. of Mud					
Recovered 75 ft. of Total Fluid					
Recoveredft. of					
Recoveredft. of					
Recoveredft. of			Pi	ice Job	
Recoveredft. of			les RT o	ther Charges	
Remarks:			In	surance	
Tool Sample Mud					
15' of fill in hole				otal	
Time Set Packer(s) 4:35 A.M. P.M.	Time Started Off Bo	ottom7:35	A.M. P.M. Maxim	um Temperature	90
Initial Hydrostatic Pressure		(A)	1389 P.S.I.		
Initial Flow PeriodMin	utes30	(B)	28 P.S.I. to (C	5)	44 P.S.I.
Initial Closed In Period Mir		(D)	1064 P.S.I.		
Final Flow Period Mir	utes45	(E)	40 P.S.I. to (F	)	51 <sub>P.S.I.</sub>
Final Closed In PeriodMin	utes60	(G)	1047 P.S.I.		
Final Hydrostatic Pressure			1385 <sub>P.S.I.</sub>		
Diamond Testing shall not be liable for damages of any kind to	the property or personnel of th	e one for whom a test is made	or for any loss suffered o	r sustained, directly or	indirectly, through

LD Drilling DST 2 Lan A&B 3037-3099 Start Test Date: 2015/03/11 Final Test Date: 2015/03/12

Betty 3-1 Formation: Lan A&B

Job Number: W175







# **Diamond Testing General Report**

Wilbur Steinbeck TESTER CELL: 620-282-1573

#### **General Information**

**Company Name LD Drilling** 

Contact Kim Shoemaker Job Number W175 **Well Name** Betty 3-1 Representative Wilbur Steinbeck DST 2 Lan A&B 3037-3099 Well Operator Unique Well ID LD **Surface Location** 1-6s-18w Rooks/Kans Report Date 2015/03/11 Wilbur Steinbeck Field Wildcat Prepared By **Qualified By** Kim Shoemaker

### **Test Information**

Test Type Conventional Formation Lan A&B Well Fluid Type 01 Oil Test Purpose (AEUB) Initial Test

 Start Test Date
 2015/03/11 Start Test Time
 19:45:00

 Final Test Date
 2015/03/12 Final Test Time
 01:45:00

#### **Test Recovery**

Recovery 5' Mud

5' Total Fluid

**Tool Sample Mud** 



#### DIAMOND TESTING P.O. Box 157 OISINGTON, KANSAS 6754

HOISINGTON, KANSAS 67544 (800) 542-7313

### **DRILL-STEM TEST TICKET**

FILE: Betty 3-1 DST 2

TIME ON: 19:45
TIME OFF: 1:45

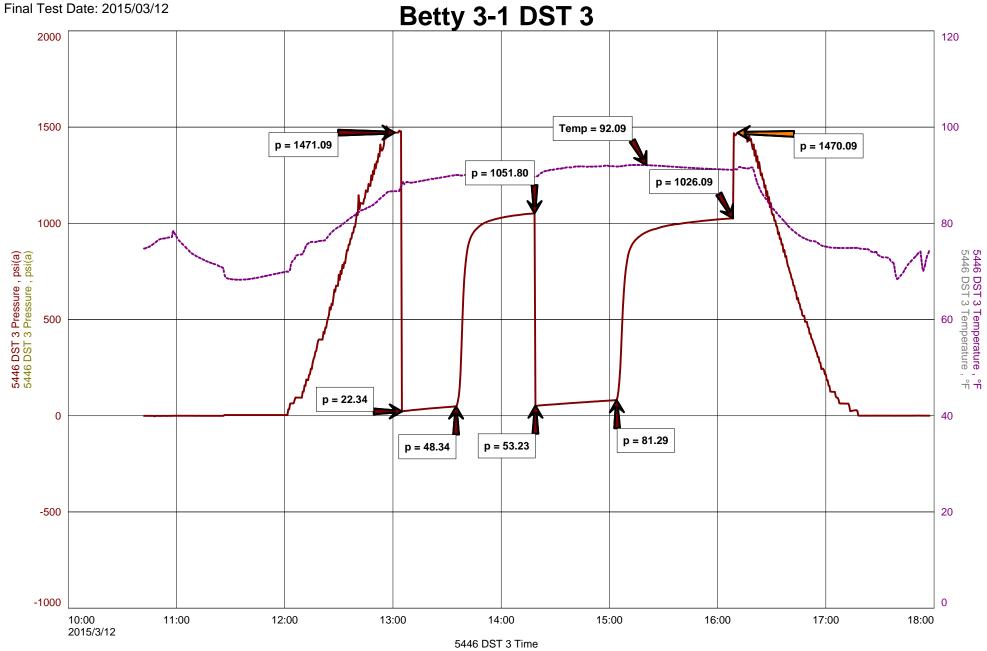
•	elly 3-1 D51 Z
Company LD Drilling	Lease & Well No. Betty 3-1
Contractor_LD	Charge to LD Drilling
Elevation1872 KBFormationLa	n A&B Effective PayFt. Ticket NoW175
Date 3-11-15 Sec. 1 Twp. 6	S Range 18 W County Rooks State_ KANSAS
Test Approved By Kim Shoemaker	Diamond Representative Wilbur Steinbeck
Formation Test No. 2 Interval Tested from	
Packer Depth3032 ft. Size6 3/4in.	
Packer Depth 3037 ft. Size 6 3/4 in.	Packer depthft. Size 6 3/4 in.
Depth of Selective Zone Set	
Top Recorder Depth (Inside) 3023	t. Recorder Number5446 Cap5000 P.S.I.
Bottom Recorder Depth (Outside) 3038	
Below Straddle Recorder Depth	t. Recorder NumberCapP.S.I.
Mud Type Chem Viscosity 50	AND THE PROPERTY AND ADDRESS OF THE PROPERTY O
Weight 9.1 Water Loss 6.2	_cc. Weight Pipe Lengthi
Chlorides 700 p.p.N	. Drill Pipe Length 3004 ft. I.D 3 1/2i
Jars: Make STERLING Serial Number 7	Test Tool Length 33 ft. Tool Size 3 1/2-IF in
Did Well Flow? No Reversed Out No	Anchor Length 62 ft. Size 4 1/2-FH
Main Hole Size 7 7/8 Tool Joint Size 4 1/2	in. Surface Choke Size 1 in. Bottom Choke Size 5/8 i
Blow: 1st Open: Built to 1/2"	No Return
2nd Open: No Blow	No Return
Recovered 5 ft. of Mud	
Recovered 5 ft. of Total Fluid	
Recovered ft. of	
Recoveredft. of	
Recoveredft. of	
Recoveredft. of	30 Miles RT Other Charges
Remarks:	Insurance
Tool Sample Mud	
	Total
Time Set Packer(s) 22:00 A.M. P.M. Time Started 0	Off Bottom 00:00 A.M. P.M. Maximum Temperature 89
Initial Hydrostatic Pressure	(A) 1430 P.S.I.
Initial Flow PeriodMinutes	30 (B) 9 P.S.I. to (C) 10 P.S.I.
Initial Closed In Period Minutes	30 (D) 538 P.S.I.
Final Flow Period Minutes	30 (E) 10 P.S.I. to (F) 16 P.S.I.
Final Closed In PeriodMinutes	30 (G) 283 P.S.I.
Final Hydrostatic Pressure	(H) 1428 <sub>P.S.I.</sub>

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

LD Drilling DST 3 Lan D-G 3097-3163 Start Test Date: 2015/03/12

Betty 3-1 Formation: Lan D-G

Job Number: W176





# **Diamond Testing General Report**

Wilbur Steinbeck TESTER CELL: 620-282-1573

### **General Information**

**Company Name** LD Drilling

Contact Kim Shoemaker Job Number W176 **Well Name** Betty 3-1 Representative Wilbur Steinbeck DST 3 Lan D-G 3097-3163 Well Operator Unique Well ID LD **Surface Location** 1-6s-18w Rooks/Kans Report Date 2015/03/12 Wilbur Steinbeck Field Wildcat Prepared By **Qualified By** Kim Shoemaker

#### **Test Information**

Test Type Conventional Formation Lan D-G Well Fluid Type 01 Oil Test Purpose (AEUB) Initial Test

 Start Test Date
 2015/03/12 Start Test Time
 10:42:00

 Final Test Date
 2015/03/12 Final Test Time
 18:00:00

#### **Test Recovery**

Recovery 30' Gassy Free Oil

135' GMCO 20%G 35%M 45%O

165' Total Fluid 120' G.I.P

Tool Sample GMCO 15%G 40%M 45%O

Corrected Gravity=36.8



# DIAMOND TESTING P.O. Box 157 DISINGTON, KANSAS 6754

HOISINGTON, KANSAS 67544 (800) 542-7313

### **DRILL-STEM TEST TICKET**

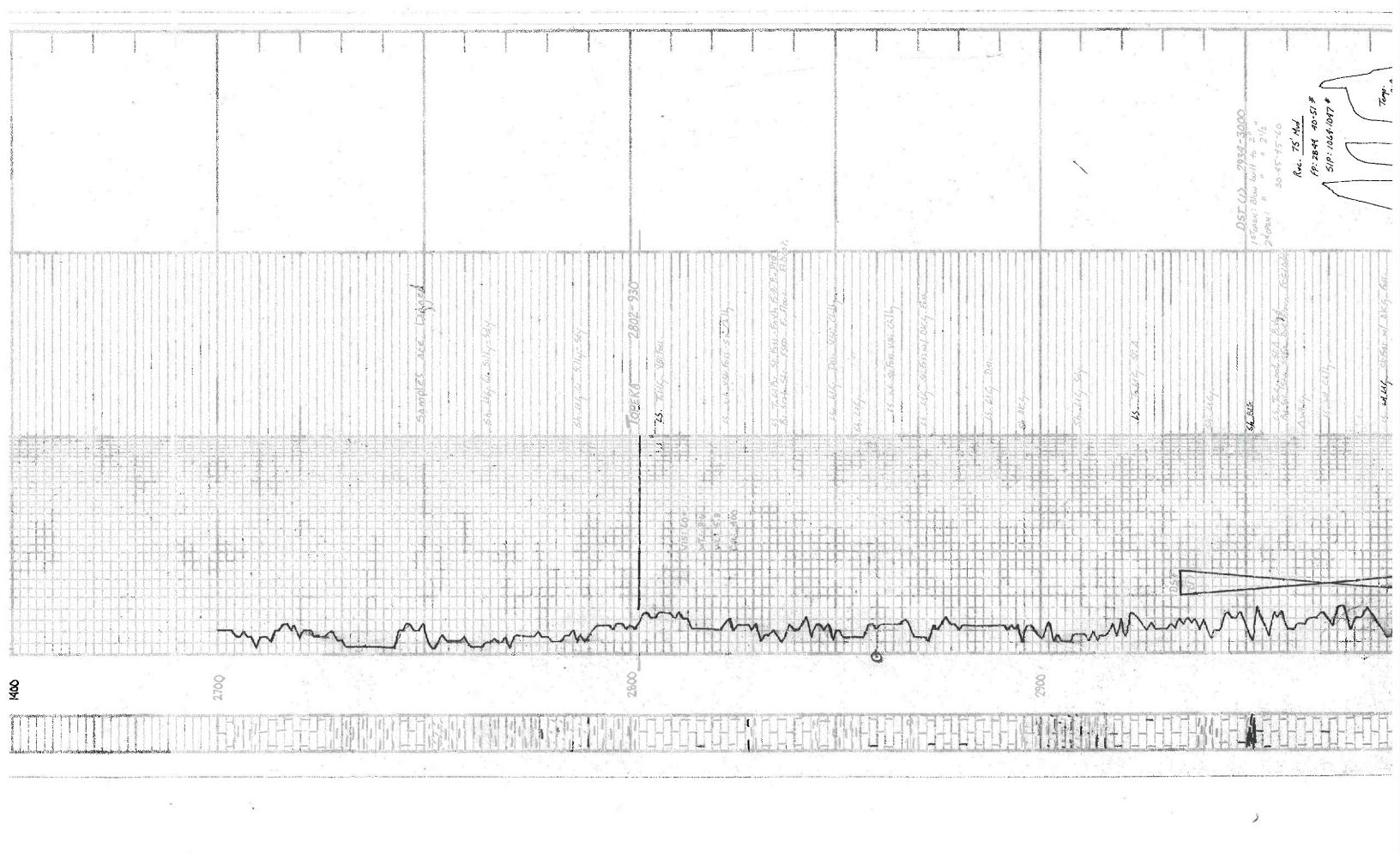
FILE: Betty 3-1 DST 3

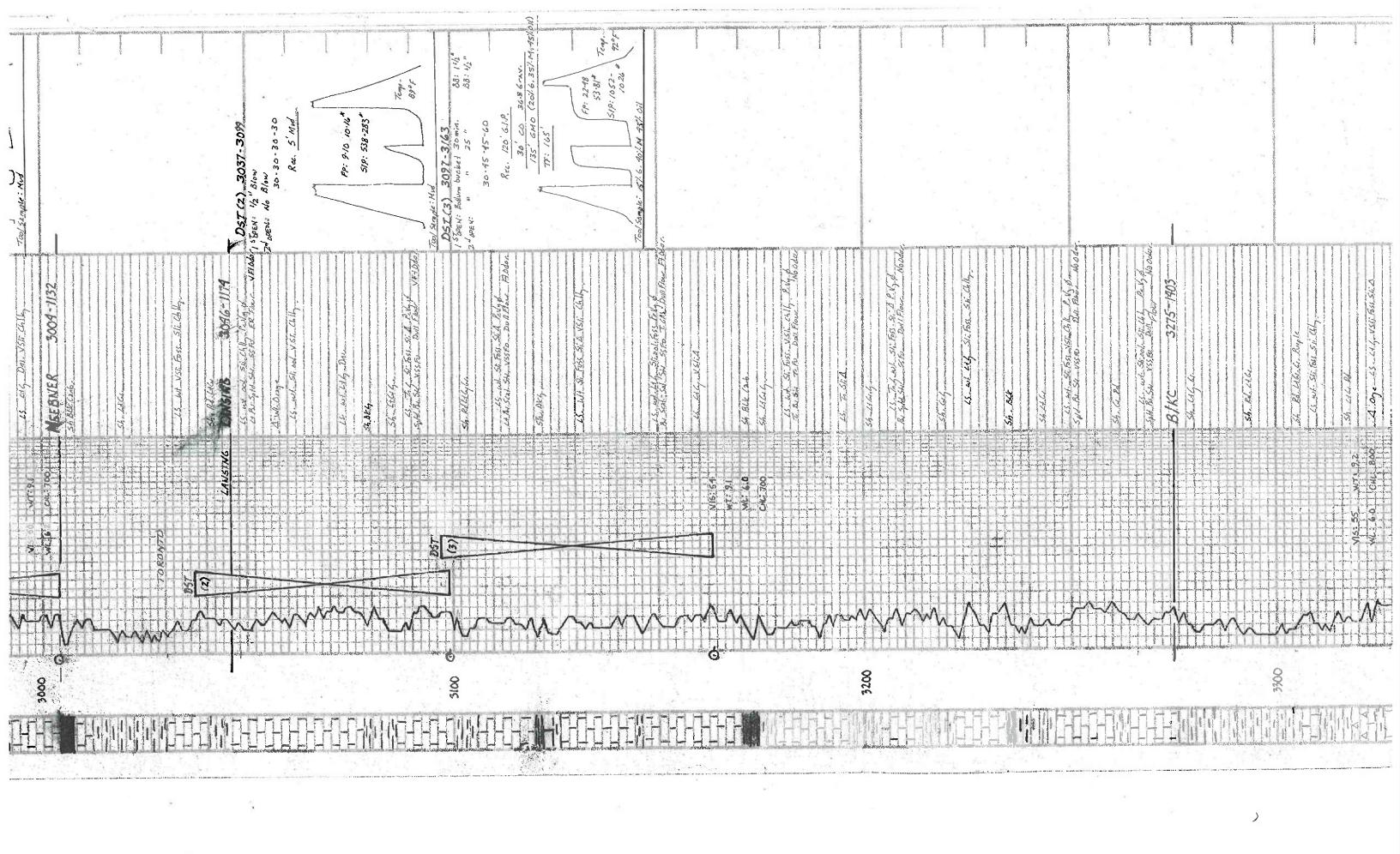
TIME ON: 10:42
TIME OFF: 18:00

FILE: <u>Belly</u>	3-1 051 3
Company_LD Drilling	Lease & Well No. Betty 3-1
Contractor LD	Charge to LD Drilling
Elevation1872 KBFormation Lan D	D-G Effective PayFt. Ticket NoW176
Date 3-12-15 Sec. 1 Twp. 6 S	Range18 W CountyRooksState_KANSAS
Test Approved By Kim Shoemaker	Diamond Representative Wilbur Steinbeck
Formation Test No. 3 Interval Tested from	3097 ft. to 3163 ft. Total Depth 3163 ft.
Packer Depthft. Size6 3/4in.	Packer depthft. Size 6 3/4 in.
Packer Depth 3097 ft. Size 6 3/4 in.	Packer depthft. Size6 3/4in.
Depth of Selective Zone Set	
Top Recorder Depth (Inside) 3082 ft.	Recorder Number5446 Cap5000 P.S.I.
Bottom Recorder Depth (Outside) 3098 ft.	Recorder Number 5965_Cap5,000_ P.S.I.
Below Straddle Recorder Depth ft.	Recorder Number Cap P.S.I.
Mud Type Chem Viscosity 54	Drill Collar Length 0 ft. I.D. 2 1/4 ii
Weight 9.1 Water Loss 6.0 c	c. Weight Pipe Length 0 ft. I.D. 2 7/8
Chlorides 700 P.P.M.	Drill Pipe Length 3064 ft. I.D 3 1/2 i
Jars: Make STERLING Serial Number 7	Test Tool Length 33 ft. Tool Size 3 1/2-IF i
Did Well Flow? Yes Reversed Out No	Anchor Length 66 ft. Size 4 1/2-FH
	Surface Choke Size 1 in. Bottom Choke Size 5/8
Blow: 1st Open: BOB in 30 min	Built to 1 1/2"
<sup>2nd Open:</sup> BOB in 25 min	Built to 1/2
Recovered 30 ft. of Gassy Free Oil	
Recovered 135 ft. of GMCO 20%G 35%M 45%O	
Recovered 165 ft. of Total Fluid	
Recovered 120 ft. of GIP	
Recoveredft. of	Price Job
Recoveredft. of	30 Miles RT Other Charges
Remarks:	Insurance
Tool Sample GMCO 15%G 40%M 45%O	
Corrected Gravity=36.8	Total
Time Set Packer(s) 13:05 A.M. P.M. Time Started Off E	30ttom16:05P.M. Maximum Temperature92
Initial Hydrostatic Pressure	(A)1471_P.S.I.
Initial Flow PeriodMinutes	(B) 22 P.S.I. to (C) 48 P.S.I.
Initial Closed In Period	(D) F.S.I.
Final Flow Period	(L) F.S.I. to (1) F.S.I.
Final Closed In PeriodMinutes60	
Final Hydrostatic Pressure.	
Diamond Testing shall not be liable for damages of any kind to the property or personnel of	the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

KIM B SHOEM  CONSULTING GEOLOG  316-684-9709 * WICH  GEOLOGIST'S RE  PRILING THE AND SWIPLE L	STAKS MACARIT	9: 15-163-24285 was lowered 2 2 2 2 2 1872, KB	Section of the sectio		
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FAUSION  COUNTY ROOKS  CONTRACTOR L.D. DRILLING. INC.  SPUD 3-6:15  CHEMICAL  SAMPLES SAVED FROM  2700  CROLOGICAL SUPERVISON FROM  2700	1867 *  Measurements Are All  From 1872' KB  CASING  358'0.387'  PRODUCTION 5'2'0  DUAL THD., DENS-AL.  3332  10 3332  11 3332				
FORMATION TOPS  ANHYBRITE  J338+534  B/ANH.  1345+627  TOPEKA  LEBNER  LANSING  B/KC  3002-1430  3044-1172  3046-1174  B/KC	2.	3.6.15 5000 3.8 © 623 3.10 © 2787 3.11 © 3355 3.12 © 3355 3.13 © 3332			





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