



1254179

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
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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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DRILL STEM TEST REPORT

D Oil INC.

20-13s-17w Ellis,KS

PO Box 259
Victoria KS 67671

Younger B #7

Job Ticket: 60524

DST#:1

ATTN: Randy Kilian

Test Start: 2014.10.23 @ 02:21:30

GENERAL INFORMATION:

Formation: **Arbuckle**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 04:52:50
 Time Test Ended: 10:51:30
 Interval: **3609.00 ft (KB) To 3623.00 ft (KB) (TVD)**
 Total Depth: 3680.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good

Test Type: Conventional Straddle (Initial)
 Tester: Tate Lang
 Unit No: 77
 Reference Elevations: 2080.00 ft (KB)
 2075.00 ft (CF)
 5.00 ft
 KB to GR/CF:

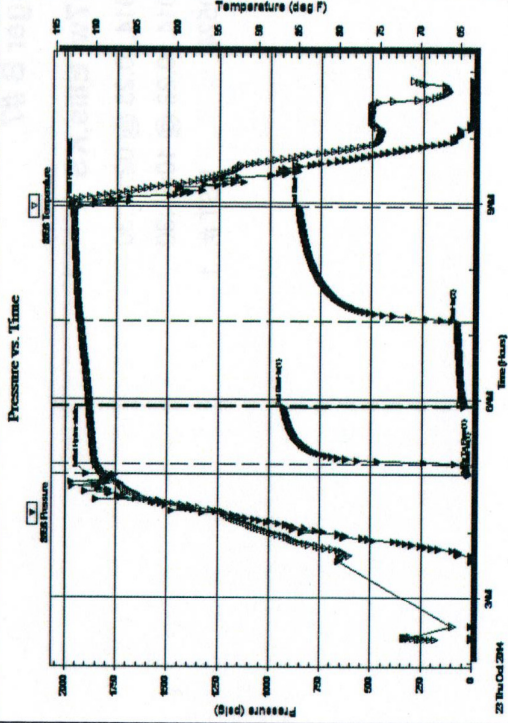
Serial #: 8898

Outside

Press@RunDepth: 77.64 psig @ 3610.00 ft (KB)
 Start Date: 2014.10.23
 Start Time: 02:21:31
 End Date: 2014.10.23
 End Time: 10:51:30

Capacity: 8000.00 psig
 Last Calib.: 2014.10.23
 Time On Btm: 2014.10.23 @ 04:52:30
 Time Off Btm: 2014.10.23 @ 08:57:20

TEST COMMENT: 5-Weak surface blow built to 2 in
 60-Dead no blow back
 75-Strong blow built to 10 in
 105-Dead no blow back



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1895.01	108.79	Initial Hydro-static
1	19.63	108.20	Open To Flow (1)
10	43.92	109.77	Shut-In(1)
62	929.12	110.67	End Shut-In(1)
62	41.17	110.61	Open To Flow (2)
139	77.64	111.79	Shut-In(2)
244	859.46	112.70	End Shut-In(2)
245	1932.93	113.02	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
62.00	MCO 50%M 50%O	0.30
102.00	CGO 20% 80%O	0.87
0.00	20 GIP	0.00

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcfd)

Date	10-23-14	Sec.	20	Twp.	13	Range	17	County	Ellis	State	KS	On Location	4.30pm	Finish	9:00pm
Lease	Younger B														
Contractor	W W 6														
Type Job	long string														
Hole Size	778														
Csg.	5 1/2														
Tbg. Size	368354														
Location	Fouland F70 2N Y4 E Sinto														

Owner: To Quality Oilwell Cementing, Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Charge To: D Oil Inc
 Street: _____ State: _____
 City: _____

The above was done to satisfaction and supervision of owner agent or contractor.
 Cement Amount Ordered: 200 Com 10% Silt

EQUIPMENT

Pumptrk	No.	Cementor	Helper
1	No.	Driver	Driver
Bulktrk	No.	Driver	Driver
Bulktrk	No.	Driver	Driver

JOB SERVICES & REMARKS

Remarks: _____

Rat Hole: 30 SPS

Mouse Hole: _____

Centralizers: 1, 2, 45, 10, 55

Baskets: # 55

Port Collar: # 56 1780

Dropped Ball Circulated

30 min Ben mud flush

Plugged Rat hole mid hole

170 down hole Displaced with water

Kit 600 PST

Land 500 PST

Common: 200

Poz. Mix: _____

Gel: _____

Calcium: _____

Hulls: _____

Salt: 17

Flowseal: _____

Kol-Seal: _____

Mud CLR 48: 500 gal

CFL-117 or CD110 CAF 38: _____

Sand: _____

Handling: 217

Mileage: _____

Guide Shoe: _____

Centralizer: Turbos 6

Baskets: 1

AFU Inserts: _____

Float Shoe: 1

Latch Down: 1

port Collar

Pumptrk Charge: prod string

Mileage: 7

Tax: _____

Discount: _____

Total Charge: _____

X Signature: Arroyo w. Paskar

Phone 785-483-2025 Home Office P.O. Box 32 Russell, KS 67665 Cell 785-324-1041

Date	11-3-14	Sec.	Range	County	State	On Location	Finish
Lease	Yangor B	Well No.	7	Ellis	Ks		10.30 a.m.
Contractor	Express Well						
Type Job	Port Collar						
Hole Size	7 7/8						
Csg.	5 1/2						
Tbg. Size	2 3/8						
Tool	Quality Port Collar						
Cement Left in Csg.							

Owner
To Quality Oilwell Cementing, Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Charge To D Oil

Street _____ State _____

City _____ State _____

The above was done to satisfaction and supervision of owner agent or contractor.

Cement Amount Ordered 200 8mde 1/4 # F10

Meas Line	Displace	<u>3 1/2 BCL</u>
EQUIPMENT		
Pumptrk No.	Cemented	<u>Exp's</u>
Helper	Driver	<u>Wick</u>
Bulktrk No.	Driver	
Bulktrk No.	Driver	<u>Doug</u>

JOB SERVICES & REMARKS

Remarks: _____

Rat Hole KCC Pat Slab

Mouse Hole _____

Centralizers _____

Baskets _____

DW or Port Collar _____

Test to spot on Teel/F3+

Spudiation Mix 150SR Cement

Circulator Close Teel 9 Pressure

to spot. Run 5 joints Wash Clean

Handling	<u>200</u>
Mileage	<u>150 QMBC</u>
Guide Shoe	
Centralizer	
Baskets	
AFU Inserts	
Float Shoe	
Latch Down	

Pumptrk Charge	<u>part collar</u>
Mileage	<u>8</u>
Tax	
Discount	
Total Charge	

Signature George W. Piesher

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

Date	10-18-14	Sec.	20	Twp.	13	Range	17	County	Ellis	State	KS	On Location	10:30 PM
Location <i>Toulon T 20 24 East into 14 E S 10</i>													

Lease *Younger B* Well No. *7*

Contractor *Wulfe*

Type Job *Surface*

Hole Size *12 1/4* T.D.

Csg. *8 5/8* Depth *220*

Tbg. Size Depth

Tool Depth

Cement Left in Csg. *15* Shoe Joint

Meas Line Displace *13 Bl*

Owner
To Quality Oilwell Cementing, Inc.
You are hereby requested to rent cementing equipment and furnish
cement and helper to assist owner or contractor to do work as listed.

Charge To *D Oil*

Street

City

State

The above was done to satisfaction and supervision of owner agent or contractor.

Cement Amount Ordered *150000 3/CC 2/91*

EQUIPMENT		
Pumptrk	No. <i>16</i>	Cementite Helper <i>Craig</i>
Bulktrk	No.	Driver
Bulktrk	No. <i>14</i>	Driver <i>Tyson</i>
Bulktrk	No.	Driver
Bulktrk	No.	Driver

JOB SERVICES & REMARKS

Remarks:

Rat Hole

Mouse Hole

Centralizers

Baskets

DN or Port Collar

8 5/8 on bottom 2550 Circulation

MIX 150000 3/CC 2/91

FLOAT EQUIPMENT

Guide Shoe

Centralizer

Baskets

AFU Inserts

Float Shoe

Latch Down

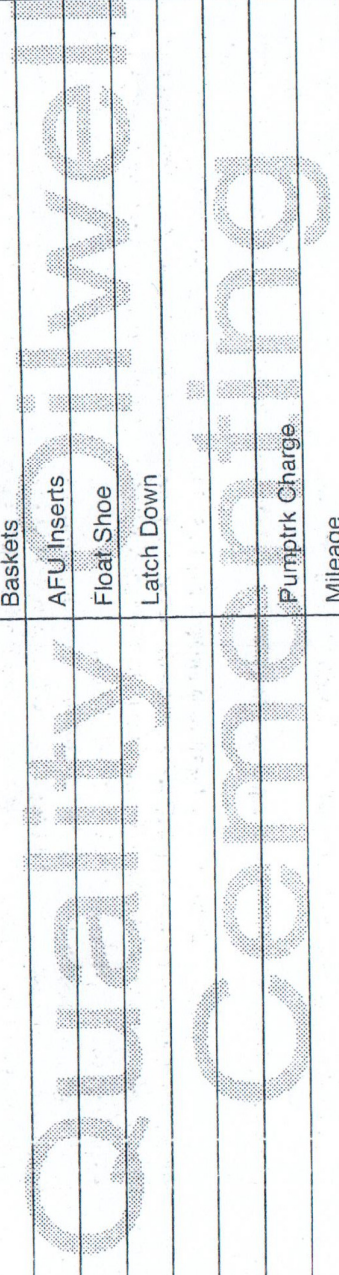
Pumptrk Charge

Mileage

Tax

Discount

Total Charge



X Signature *M. Russ*