



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1261593  
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: \_\_\_\_\_



1261593

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:  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

<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> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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# ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. #20-5975804

065551

REMIT TO P.O. BOX 93999  
SOUTHLAKE, TEXAS 76092

SERVICE POINT:

DATE <u>4-3-15</u>	SEC. <u>15</u>	TWP. <u>19S</u>	RANGE <u>14W</u>	CALLED OUT	ON LOCATION <u>4-2-15</u> <u>11:00am</u>	JOB START <u>4-3-15</u> <u>11:30am</u>	JOB FINISH <u>5:30AM</u>
LEASE <u>Chism - Conner unit</u>	WELL # <u>1</u>	LOCATION <u>Great Bend JCS W on 96</u>			COUNTY <u>Parson</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="checkbox"/> NEW (Circle one)				<u>to 50 ft 1/2 5 FINTO</u>			

CONTRACTOR Winnescab OWNER \_\_\_\_\_

TYPE OF JOB Rotary Plug

HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_

CASING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE 4 1/2 DEPTH 3580

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT Freshwater

EQUIPMENT

PUMP TRUCK # 395 CEMENTER Dustin Chambers

HELPER Ben Newell

BULK TRUCK # 610-170 DRIVER Marlyn Spawenburg

BULK TRUCK # \_\_\_\_\_ DRIVER \_\_\_\_\_

CEMENT

AMOUNT ORDERED 235 gals 60% Class A

4041002 441921 1/4 Flt

COMMON \_\_\_\_\_ @ \_\_\_\_\_

POZMIX \_\_\_\_\_ @ \_\_\_\_\_

GEL \_\_\_\_\_ @ \_\_\_\_\_

CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_

ASC \_\_\_\_\_ @ \_\_\_\_\_

235 gal @ 18.92 = 4,312.25

Flt Seal 59 @ 2.97 = 175.23

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL 4,487.48

DISCOUNT 45% 2,019.37

REMARKS:

Full Hole with Rig Record

1. 3580 - 50 gals

2. 950 - 50 gals

3. 350 - 40 gals

4. 10 - 10 gals

5. RH - 30 gals

6. MH - 15 gals

Plug Down 5:15 AM

CHARGE TO: LB Exploration

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE

HANDLING 252.40 @ 2.48 635.95

MILEAGE 10.66 x 5 x 2.75 146.58

DEPTH OF JOB 3580

PUMP TRUCK CHARGE 1512.25

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

HV MILEAGE 5 @ 7.70 38.50

LV MILEAGE 5 @ 4.40 22.00

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL 2,345.28

DISCOUNT 45% 1,055.38

PLUG & FLOAT EQUIPMENT

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

DISCOUNT \_\_\_\_\_ %

To: Allied Oil & Gas Services, LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME X

SIGNATURE [Signature]

Thank You!

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES 6,832.76

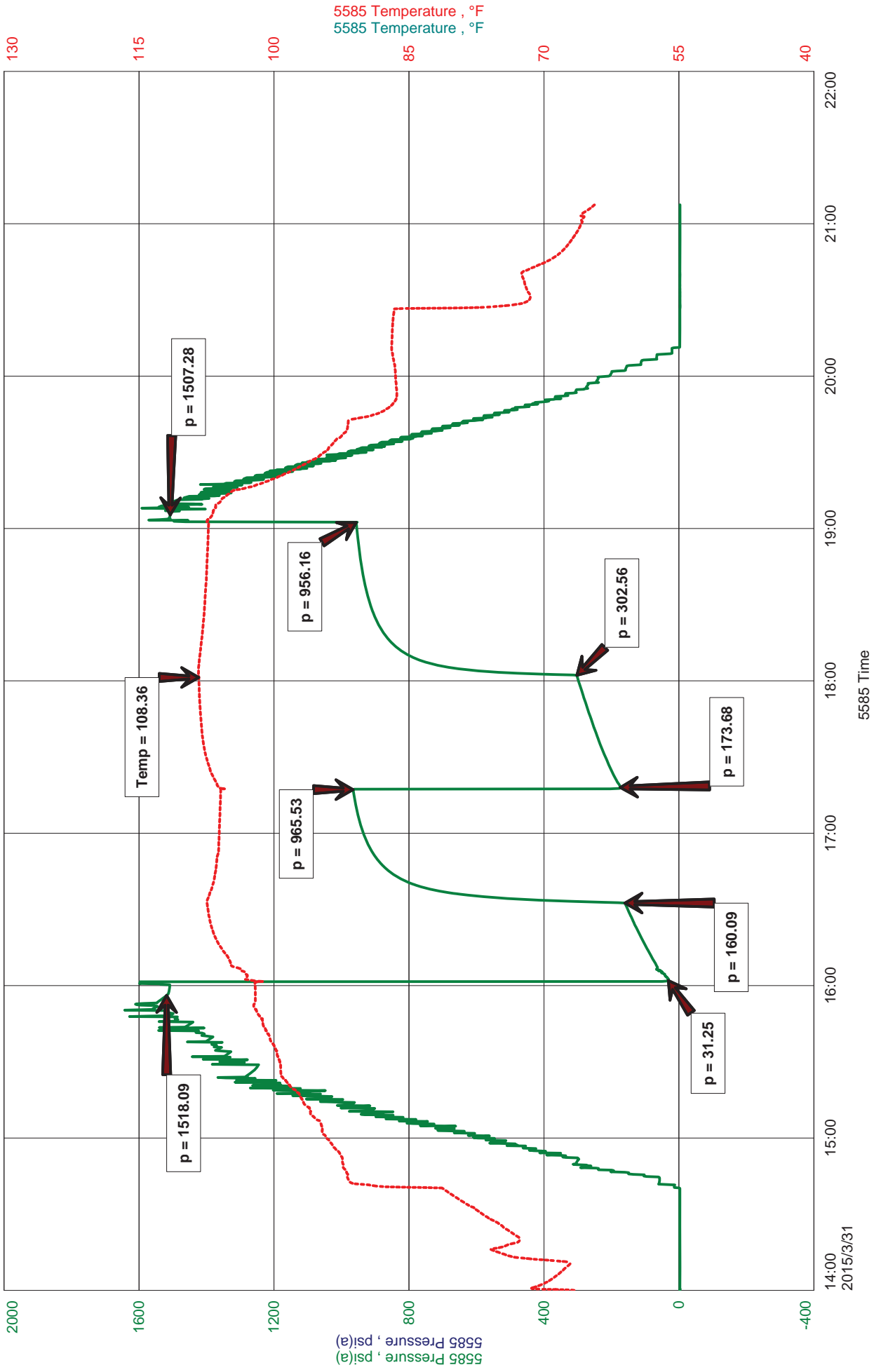
DISCOUNT 3,874.24 IF PAID IN 30 DAYS

NET TOTAL: 3,758.02 IF PAID IN 30 DAYS

LB EXPLORATION  
DST1 LANS A-F 3252-3328  
Start Test Date: 2015/03/31  
Final Test Date: 2015/03/31

CHISM-CONNER UNIT 1  
Formation: DST1 LANS A-F 3252-3328  
Pool: WILDCAT  
Job Number: A156

# CHISM-CONNER UNIT 1



# DIAMOND TESTING, LLC

TESTER : ANDY CARREIRA  
CELL # 620-617-7202

## General Information

Company Name	LB EXPLORATION	Contact	MICHAEL PETERMANN	Job Number	A156
Well Name	CHISM-CONNER UNIT 1	Representative	ANDY CARREIRA	Well Operator	LB EXPLORATION
Unique Well ID	DST1 LANS A-F 3252-3328	Report Date	2015/03/31	Prepared By	ANDY CARREIRA
Surface Location	SEC 15-19S-14W BARTON CNTY,KS	Field	WILDCAT	Well Type	Vertical

## Test Information

Test Type	CONVENTIONAL
Formation	DST1 LANS A-F 3252-3328
Well Fluid Type	01 Oil
Test Purpose	Initial Test

Start Test Date	2015/03/31	Start Test Time	14:00:00
Final Test Date	2015/03/31	Final Test Time	21:07:00

Gauge Name	5585
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## Test Results

RECOVERY:	15' GIP	
	110' GOCMW 5%G, 5%O, 50%W, 40%M	
	189' SOSGMW 3%G, TRACE OIL,85%W, 12%M	
	315' GW 2%G, 98%W	
	614' TOTAL FLUID	CHLORIDES: 70000 PPM
		RW: .11 @ 70
		PH: 7

TOOL SAMPLE: 5% OIL, 95% WATER



**DIAMOND TESTING**  
 P.O. Box 157  
 HOISINGTON, KANSAS 67544  
 (800) 542-7313

TIME ON: 14:00  
 TIME OFF: 21:07

**DRILL-STEM TEST TICKET**  
 FILE: CHISM-CONNER 1 DST1

Company LB EXPLORATION Lease & Well No. CHISM-CONNER UNIT 1  
 Contractor NINNESCAH DRILLING Charge to LB EXPLORATION  
 Elevation 1911 KB Formation LANS A-F Effective Pay \_\_\_\_\_ Ft. Ticket No. A156  
 Date 3-31-15 Sec. 15 Twp. 19 S Range 14 W County BARTON State KANSAS  
 Test Approved By KURT TALBOTT Diamond Representative ANDY CARREIRA

Formation Test No. 1 Interval Tested from 3252 ft. to 3328 ft. Total Depth 3328 ft.  
 Packer Depth 3247 ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.  
 Packer Depth 3252 ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.

Depth of Selective Zone Set \_\_\_\_\_

Top Recorder Depth (Inside) 3242 ft. Recorder Number 5585 Cap. 5000 P.S.I.  
 Bottom Recorder Depth (Outside) 3254 ft. Recorder Number 8471 Cap. 10000 P.S.I.  
 Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.

Mud Type CHEMICAL Viscosity 56 Drill Collar Length 0 ft. I.D. 2 1/4 in.  
 Weight 9.1 Water Loss 8 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.  
 Chlorides 3000 P.P.M. Drill Pipe Length 3227 ft. I.D. 3 1/2 in.  
 Jars: Make STERLING Serial Number N/A Test Tool Length 25 ft. Tool Size 3 1/2-IF in.  
 Did Well Flow? NO Reversed Out NO Anchor Length 76 ft. Size 4 1/2-FH in.  
 Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: BOB IN 5 MIN. (NObb)  
 2nd Open: BOB IN 10 MIN. (NObb)

Recovered <u>15 ft.</u> of <u>GIP</u>		
Recovered <u>110 ft.</u> of <u>GOCMW 5%G, 5%O, 50%W, 40%M</u>		
Recovered <u>189 ft.</u> of <u>SOSGMW 3%G, TRACE OIL, 85%W, 12%M</u>		
Recovered <u>315 ft.</u> of <u>GW 2%G, 98%W</u>	<u>CHLORIDES: 70000 PPM</u>	
Recovered <u>614 ft.</u> of <u>TOTAL FLUID</u>	<u>RW: .11 @ 70</u>	<u>Price Job</u>
Recovered _____ ft. of _____	<u>PH: 7</u>	<u>Other Charges</u>
Remarks: _____		<u>Insurance</u>
<u>TOOL SAMPLE: 5% OIL, 95% WATER</u>		<u>Total</u>

Time Set Packer(s) 4:02 PM A.M. P.M. Time Started Off Bottom 7:02 PM A.M. P.M. Maximum Temperature 108

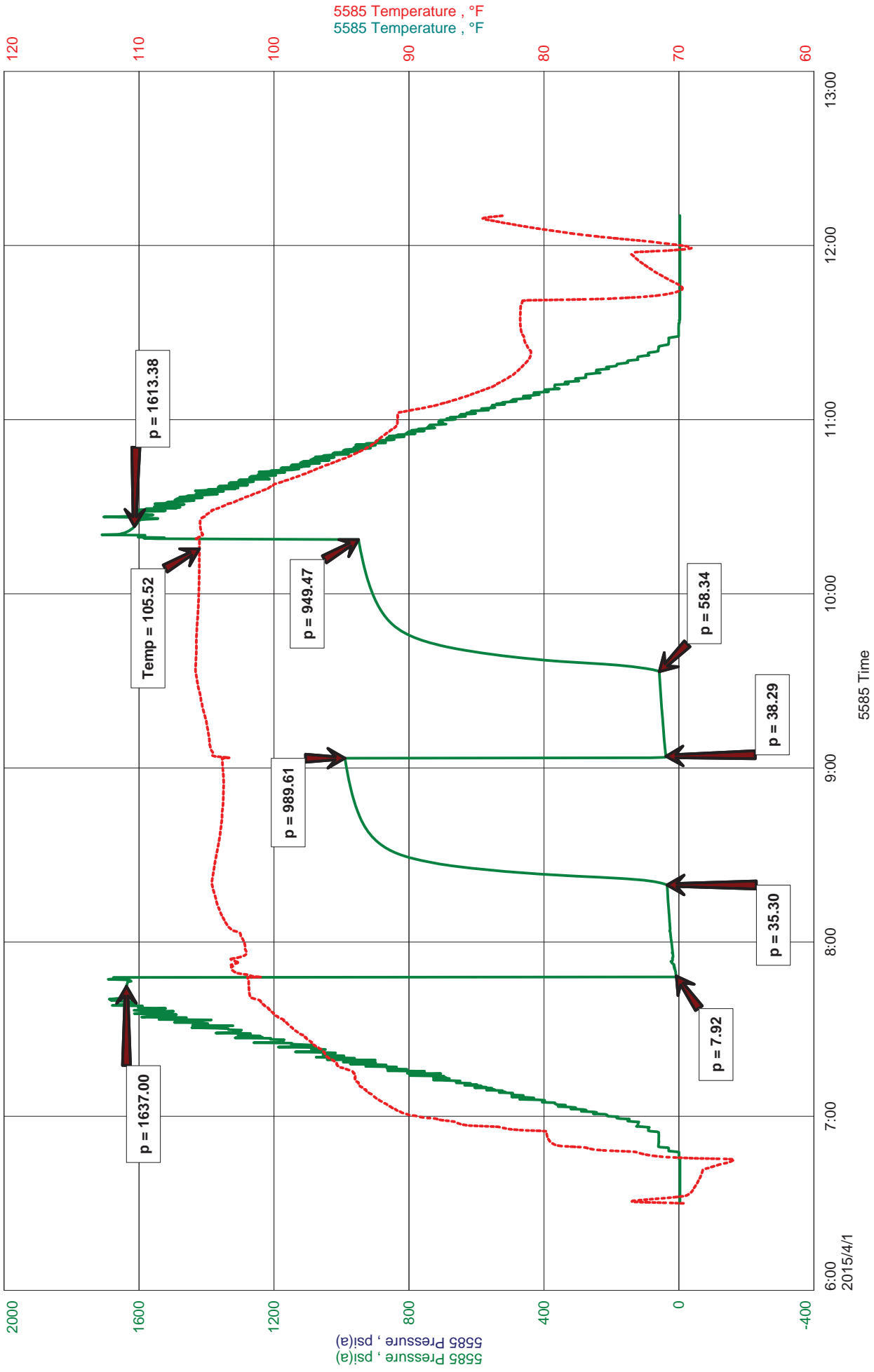
Initial Hydrostatic Pressure..... (A) 1518 P.S.I.  
 Initial Flow Period..... Minutes 30 (B) 31 P.S.I. to (C) 160 P.S.I.  
 Initial Closed In Period..... Minutes 45 (D) 966 P.S.I.  
 Final Flow Period..... Minutes 45 (E) 174 P.S.I. to (F) 303 P.S.I.  
 Final Closed In Period..... Minutes 60 (G) 956 P.S.I.  
 Final Hydrostatic Pressure..... (H) 1507 P.S.I.

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.

LB EXPLORATION  
DST2 LANS H-I-J 3379-3437  
Start Test Date: 2015/04/01  
Final Test Date: 2015/04/01

CHISM-CONNER UNIT 1  
Formation: DST2 LANS H-I-J 3379-3437  
Pool: WILDCAT  
Job Number: A157

# CHISM-CONNER UNIT 1





# DIAMOND TESTING, LLC

TESTER : ANDY CARREIRA  
CELL # 620-617-7202

## General Information

Company Name	LB EXPLORATION	Contact	MICHAEL PETERMANN	Job Number	A157
Well Name	CHISM-CONNER UNIT 1	Representative	ANDY CARREIRA	Well Operator	LB EXPLORATION
Unique Well ID	DST2 LANS H-I-J 3379-3437	Report Date	2015/04/01	Prepared By	ANDY C
Surface Location	SEC 15-19S-14W BARTON CNTY,KS	Field	WILDCAT	Well Type	Vertical

## Test Information

Test Type	CONVENTIONAL
Formation	DST2 LANS H-I-J 3379-3437
Well Fluid Type	01 Oil
Test Purpose	Initial Test

Start Test Date	2015/04/01	Start Test Time	06:30:00
Final Test Date	2015/04/01	Final Test Time	12:10:00

Gauge Name	5585
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## Test Results

RECOVERY: 113' SOSMW TRACE OIL, 60%W, 40%M  
113' TOTAL FLUID

CHLORIDES: 48000 PPM  
RW: .15 @ 70  
PH: 7

TOOL SAMPLE: TRACE OIL, WATER



**DIAMOND TESTING**  
 P.O. Box 157  
 HOISINGTON, KANSAS 67544  
 (800) 542-7313

TIME ON: 06:30  
 TIME OFF: 12:10

**DRILL-STEM TEST TICKET**  
 FILE: CHISM-CONNER 1 DST2

Company LB EXPLORATION Lease & Well No. CHISM-CONNER UNIT 1  
 Contractor NINNESCAH DRILLING Charge to LB EXPLORATION  
 Elevation 1911 KB Formation LANS H-I-J Effective Pay \_\_\_\_\_ Ft. Ticket No. A157  
 Date 4-1-15 Sec. 15 Twp. 19 S Range 14 W County BARTON State KANSAS  
 Test Approved By KURT TALBOTT Diamond Representative ANDY CARREIRA

Formation Test No. 2 Interval Tested from 3379 ft. to 3437 ft. Total Depth 3437 ft.  
 Packer Depth 3374 ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.  
 Packer Depth 3381 ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.

Depth of Selective Zone Set \_\_\_\_\_

Top Recorder Depth (Inside) 3369 ft. Recorder Number 5585 Cap. 5000 P.S.I.  
 Bottom Recorder Depth (Outside) 3381 ft. Recorder Number 8471 Cap. 10000 P.S.I.  
 Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.

Mud Type CHEMICAL Viscosity 56 Drill Collar Length 0 ft. I.D. 2 1/4 in.  
 Weight 9.1 Water Loss 8 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.  
 Chlorides 3000 P.P.M. Drill Pipe Length 3354 ft. I.D. 3 1/2 in.  
 Jars: Make STERLING Serial Number N/A Test Tool Length 25 ft. Tool Size 3 1/2-IF in.  
 Did Well Flow? NO Reversed Out NO Anchor Length 58 ft. Size 4 1/2-FH in.  
 Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: SLOW BUILD TO 5" (NObb)  
 2nd Open: SLOW BUILD TO 3.5" (NObb)

Recovered 113 ft. of SOSMW TRACE OIL, 60%W, 40%M  
 Recovered 113 ft. of TOTAL FLUID  
 Recovered \_\_\_\_\_ ft. of CHLORIDES: 48000 PPM

Recovered _____ ft. of _____	RW: .15 @ 70	Price Job
Recovered _____ ft. of _____	PH: 7	Other Charges
Recovered _____ ft. of _____		Insurance
Remarks: _____		
TOOL SAMPLE: TRACE OIL, WATER		Total

Time Set Packer(s) 7:48 AM A.M. P.M. Time Started Off Bottom 10:18 AM A.M. P.M. Maximum Temperature 106

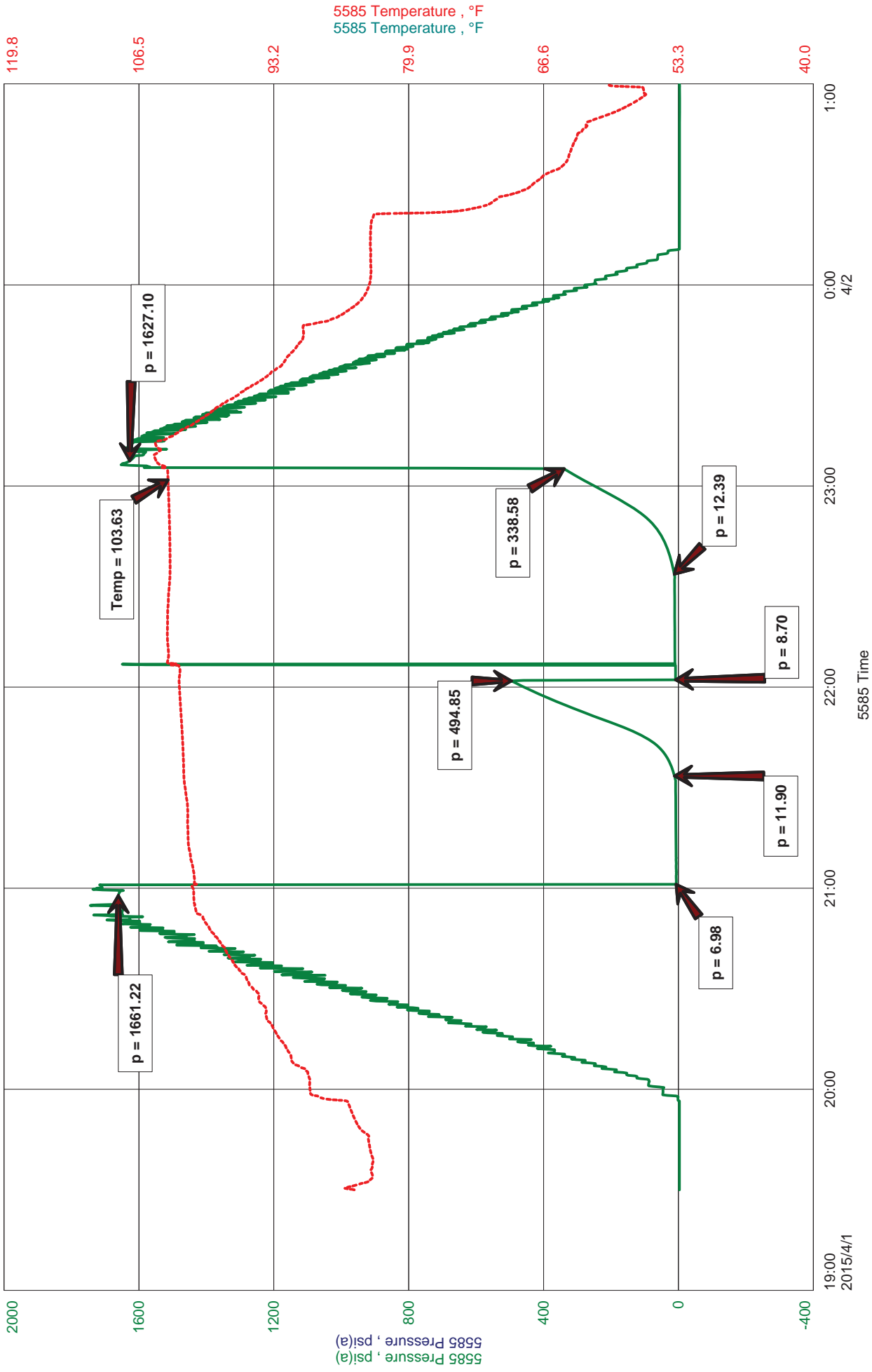
Initial Hydrostatic Pressure..... (A) 1637 P.S.I.  
 Initial Flow Period..... Minutes 30 (B) 8 P.S.I. to (C) 35 P.S.I.  
 Initial Closed In Period..... Minutes 45 (D) 990 P.S.I.  
 Final Flow Period..... Minutes 30 (E) 38 P.S.I. to (F) 58 P.S.I.  
 Final Closed In Period..... Minutes 45 (G) 949 P.S.I.  
 Final Hydrostatic Pressure..... (H) 1613 P.S.I.

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.

LB EXPLORATION  
 DST3 LANS K 3434-3480  
 Start Test Date: 2015/04/01  
 Final Test Date: 2015/04/02

CHISM-CONNER UNIT 1  
 Formation: DST3 LANS K 3434-3480  
 Pool: WILDCAT  
 Job Number: A158

# CHISM-CONNER UNIT 1



# DIAMOND TESTING, LLC

TESTER : ANDY CARREIRA  
CELL # 620-617-7202

## General Information

Company Name	LB EXPLORATION	Contact	MICHAEL PETERMANN	Job Number	A158
Well Name	CHISM-CONNER UNIT 1	Representative	ANDT CARREIRA	Well Operator	LB EXPLORATION
Unique Well ID	DST3 LANS K 3434-3480	Report Date	2015/04/01	Prepared By	ANDY CARREIRA
Surface Location	SEC 15-19S-14W BARTON CNTY,KS	Field	WILDCAT	Well Type	Vertical

## Test Information

Test Type	CONVENTIONAL
Formation	DST3 LANS K 3434-3480
Well Fluid Type	01 Oil
Test Purpose	Initial Test

Start Test Date	2015/04/01	Start Test Time	19:30:00
Final Test Date	2015/04/02	Final Test Time	01:00:00

Gauge Name	5585
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## Test Results

RECOVERY: 5' SOSM LESS THAN 1% OIL, MUD

TOOL SAMPLE: TRACE OIL, MUD



**DIAMOND TESTING**  
 P.O. Box 157  
 HOISINGTON, KANSAS 67544  
 (800) 542-7313

TIME ON: 19:30  
 TIME OFF: 01:00

**DRILL-STEM TEST TICKET**  
 FILE: CHISM-CONNER 1 DST3

Company LB EXPLORATION Lease & Well No. CHISM-CONNER UNIT 1  
 Contractor NINNESCAH DRILLING Charge to LB EXPLORATION  
 Elevation 1911 KB Formation LANS K Effective Pay \_\_\_\_\_ Ft. Ticket No. A158  
 Date 4-1-15 Sec. 15 Twp. \_\_\_\_\_ 19 S Range \_\_\_\_\_ 14 W County BARTON State KANSAS  
 Test Approved By KURT TALBOTT Diamond Representative ANDY CARREIRA

Formation Test No. 3 Interval Tested from 3434 ft. to 3480 ft. Total Depth 3480 ft.  
 Packer Depth 3429 ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.  
 Packer Depth 3434 ft. Size 6 3/4 in. Packer depth \_\_\_\_\_ ft. Size 6 3/4 in.

Depth of Selective Zone Set \_\_\_\_\_  
 Top Recorder Depth (Inside) 3424 ft. Recorder Number 5585 Cap. 5000 P.S.I.  
 Bottom Recorder Depth (Outside) 3436 ft. Recorder Number 8471 Cap. 10000 P.S.I.  
 Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.

Mud Type CHEMICAL Viscosity 56 Drill Collar Length \_\_\_\_\_ ft. I.D. 2 1/4 in.  
 Weight 9.1 Water Loss 8 cc. Weight Pipe Length \_\_\_\_\_ ft. I.D. 2 7/8 in.  
 Chlorides 3000 P.P.M. Drill Pipe Length 3409 ft. I.D. 3 1/2 in.  
 Jars: Make STERLING Serial Number N/A Test Tool Length 25 ft. Tool Size 3 1/2-IF in.  
 Did Well Flow? NO Reversed Out NO Anchor Length 46 ft. Size 4 1/2-FH in.  
 Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: WEAK SURFACE BLOW. DEAD IN 5 MIN. (NObb)  
 2nd Open: NO BLOW, FLUSHED, SURGED, NO BLOW (NObb)

Recovered 5 ft. of SOSM LESS THAN 1% OIL, MUD  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Recovered \_\_\_\_\_ ft. of \_\_\_\_\_  
 Remarks: \_\_\_\_\_  
 Price Job \_\_\_\_\_  
 Other Charges \_\_\_\_\_  
 Insurance \_\_\_\_\_  
 Total \_\_\_\_\_

TOOL SAMPLE: TRACE OIL, MUD  
 Time Set Packer(s) 9:02 PM A.M. P.M. Time Started Off Bottom 11:02 PM A.M. P.M. Maximum Temperature 104  
 Initial Hydrostatic Pressure..... (A) 1661 P.S.I.  
 Initial Flow Period..... Minutes 30 (B) 7 P.S.I. to (C) 12 P.S.I.  
 Initial Closed In Period..... Minutes 30 (D) 495 P.S.I.  
 Final Flow Period..... Minutes 30 (E) 9 P.S.I. to (F) 12 P.S.I.  
 Final Closed In Period..... Minutes 30 (G) 339 P.S.I.  
 Final Hydrostatic Pressure..... (H) 1627 P.S.I.

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.