



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1262728  
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: \_\_\_\_\_



1262728

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](mailto: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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	SCHLESSIGER/HICKEL 1-7
Doc ID	1262728

Tops

Name	Top	Datum
ANHYDRITE	858	1112
BASE ANHYDRITE	883	1087
HOWARD	2770	-800
TOPEKA	2808	-838
HEEBNER	3094	-1124
BROWN LIME	3184	-1214
LANSING	3204	-1234
BASE KANSAS CITY	3430	-1460
ARBUCKLE	3444	-1474



# Diamond Testing General Report

**John Riedl**  
**TESTER**  
**CELL: 620-793-0550**

## General Information

<b>Company Name</b>	L D DRILLING INC	<b>Job Number</b>	J3356
<b>Contact</b>	L D DAVIS	<b>Representative</b>	JOHN RIEDL
<b>Well Name</b>	SCHLESSINGER/HICKEL #2	<b>Well Operator</b>	L D DRILLING INC
<b>Unique Well ID</b>		<b>Report Date</b>	2015/08/10
<b>Surface Location</b>	S7/17S/12W	<b>Prepared By</b>	JOHN RIEDL
<b>Field</b>		<b>Qualified By</b>	KIM SHOEMAKER

## Test Information

<b>Test Type</b>	DST #3 CONVENTIONAL
<b>Formation</b>	ARBUCKLE
<b>Well Fluid Type</b>	
<b>Test Purpose</b>	

<b>Start Test Date</b>	2915/08/10	<b>Start Test Time</b>	13:00:00
<b>Final Test Date</b>	2015/08/10	<b>Final Test Time</b>	18:30:00

## Test Recovery

RECOVERY: 340' GAS CUT OIL (10%GAS 90%OIL)





**DIAMOND TESTING**  
 P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
 (800) 542-7313  
**DRILL-STEM TEST TICKET**  
 FILE: \_\_\_\_\_

TIME ON: \_\_\_\_\_  
 TIME OFF: \_\_\_\_\_

Company \_\_\_\_\_ Lease & Well No. \_\_\_\_\_  
 Contractor \_\_\_\_\_ Charge to \_\_\_\_\_  
 Elevation \_\_\_\_\_ Formation \_\_\_\_\_ Effective Pay \_\_\_\_\_ Ft. Ticket No. \_\_\_\_\_  
 Date \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Range \_\_\_\_\_ W County \_\_\_\_\_ State **KANSAS**  
 Test Approved By \_\_\_\_\_ Diamond Representative \_\_\_\_\_

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

Top Recorder Depth (Inside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
 Bottom Recorder Depth (Outside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
 Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.

Mud Type \_\_\_\_\_ Viscosity \_\_\_\_\_ Drill Collar Length \_\_\_\_\_ ft. I.D. 2 1/4 in.  
 Weight \_\_\_\_\_ Water Loss \_\_\_\_\_ cc. Weight Pipe Length \_\_\_\_\_ ft. I.D. 2 7/8 in.  
 Chlorides \_\_\_\_\_ P.P.M. Drill Pipe Length \_\_\_\_\_ ft. I.D. 3 1/2 in.  
 Jars: Make STERLING Serial Number \_\_\_\_\_ Test Tool Length \_\_\_\_\_ ft. Tool Size 3 1/2-IF in.  
 Did Well Flow? \_\_\_\_\_ Reversed Out \_\_\_\_\_ Anchor Length \_\_\_\_\_ ft. Size 4 1/2-FH in.  
 Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: \_\_\_\_\_  
 2nd Open: \_\_\_\_\_

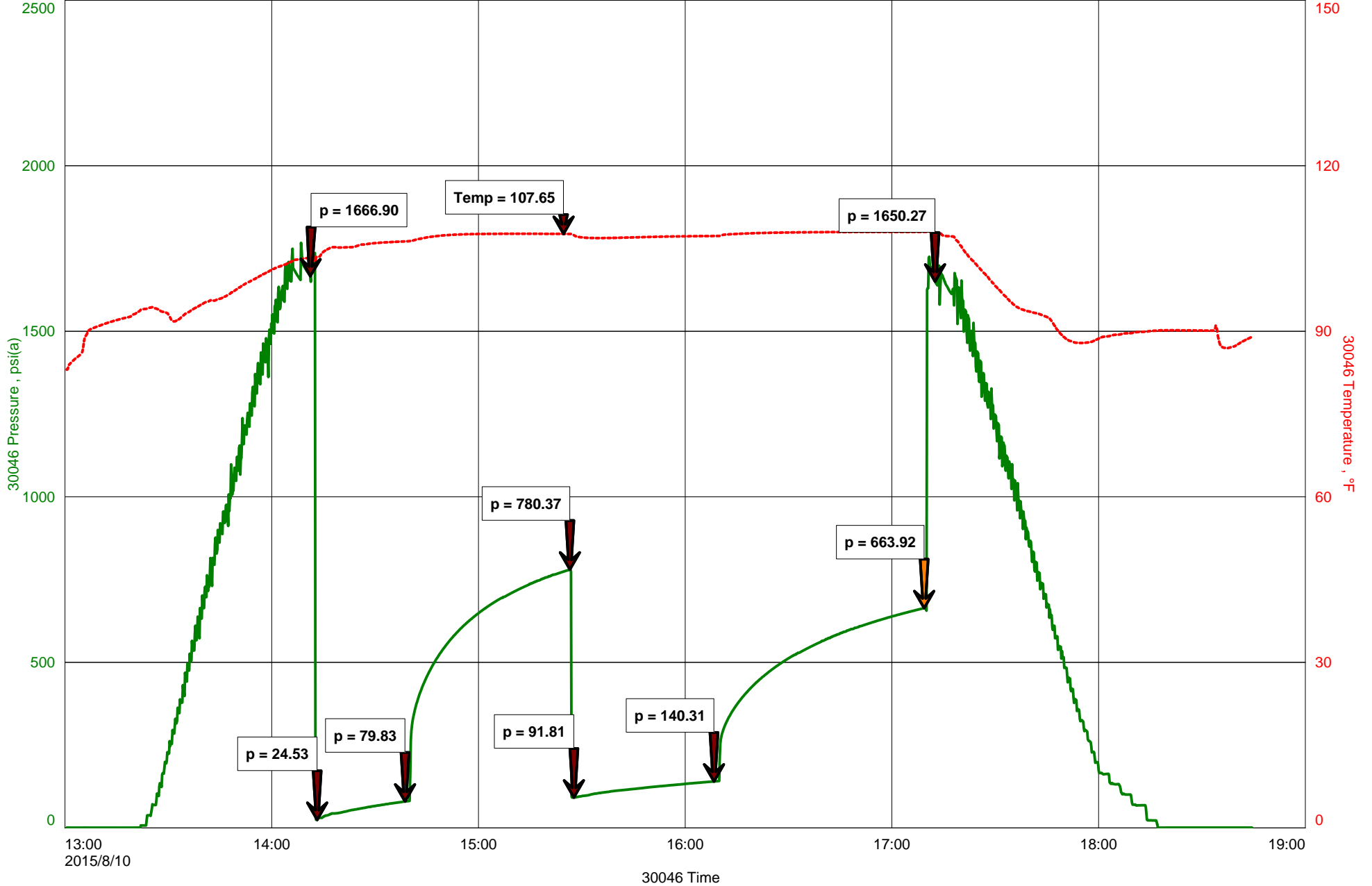
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
	Total

Time Set Packer(s) \_\_\_\_\_ A.M. P.M. Time Started Off Bottom \_\_\_\_\_ A.M. P.M. Maximum Temperature \_\_\_\_\_  
 Initial Hydrostatic Pressure..... (A) \_\_\_\_\_ P.S.I.  
 Initial Flow Period..... Minutes \_\_\_\_\_ (B) \_\_\_\_\_ P.S.I. to (C) \_\_\_\_\_ P.S.I.  
 Initial Closed In Period..... Minutes \_\_\_\_\_ (D) \_\_\_\_\_ P.S.I.  
 Final Flow Period..... Minutes \_\_\_\_\_ (E) \_\_\_\_\_ P.S.I. to (F) \_\_\_\_\_ P.S.I.  
 Final Closed In Period..... Minutes \_\_\_\_\_ (G) \_\_\_\_\_ P.S.I.  
 Final Hydrostatic Pressure..... (H) \_\_\_\_\_ 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.



# SCHLESSINGER/HICKEL #2





# Diamond Testing General Report

**John Riedl**  
**TESTER**  
**CELL: 620-793-0550**

## General Information

<b>Company Name</b>	L D DRILLING INC	<b>Job Number</b>	J3355
<b>Contact</b>	L D DAVIS	<b>Representative</b>	JOHN RIEDL
<b>Well Name</b>	SCHLESSINGER/HICKEL #1	<b>Well Operator</b>	L D DRILLING INC
<b>Unique Well ID</b>		<b>Report Date</b>	2015/08/10
<b>Surface Location</b>	S7/17S/12W	<b>Prepared By</b>	JOHN RIEDL
<b>Field</b>		<b>Qualified By</b>	KIM SHOEMAKER

## Test Information

<b>Test Type</b>	DST #2 CONVENTIONAL
<b>Formation</b>	LKC H-L
<b>Well Fluid Type</b>	
<b>Test Purpose</b>	

<b>Start Test Date</b>	2015/08/10	<b>Start Test Time</b>	01:00:00
<b>Final Test Date</b>	2015/08/10	<b>Final Test Time</b>	05:40:00

## Test Recovery

RECOVERY: 15' HVY OIL SPECKED MUD





**DIAMOND TESTING**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(800) 542-7313  
**DRILL-STEM TEST TICKET**  
FILE: \_\_\_\_\_

TIME ON: \_\_\_\_\_  
TIME OFF: \_\_\_\_\_

Company \_\_\_\_\_ Lease & Well No. \_\_\_\_\_  
Contractor \_\_\_\_\_ Charge to \_\_\_\_\_  
Elevation \_\_\_\_\_ Formation \_\_\_\_\_ Effective Pay \_\_\_\_\_ Ft. Ticket No. \_\_\_\_\_  
Date \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Range \_\_\_\_\_ W County \_\_\_\_\_ State **KANSAS**  
Test Approved By \_\_\_\_\_ Diamond Representative \_\_\_\_\_

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

Top Recorder Depth (Inside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Bottom Recorder Depth (Outside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.

Mud Type \_\_\_\_\_ Viscosity \_\_\_\_\_ Drill Collar Length \_\_\_\_\_ ft. I.D. 2 1/4 in.  
Weight \_\_\_\_\_ Water Loss \_\_\_\_\_ cc. Weight Pipe Length \_\_\_\_\_ ft. I.D. 2 7/8 in.  
Chlorides \_\_\_\_\_ P.P.M. Drill Pipe Length \_\_\_\_\_ ft. I.D. 3 1/2 in.  
Jars: Make STERLING Serial Number \_\_\_\_\_ Test Tool Length \_\_\_\_\_ ft. Tool Size 3 1/2-IF in.  
Did Well Flow? \_\_\_\_\_ Reversed Out \_\_\_\_\_ Anchor Length \_\_\_\_\_ ft. Size 4 1/2-FH in.  
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: \_\_\_\_\_  
2nd Open: \_\_\_\_\_

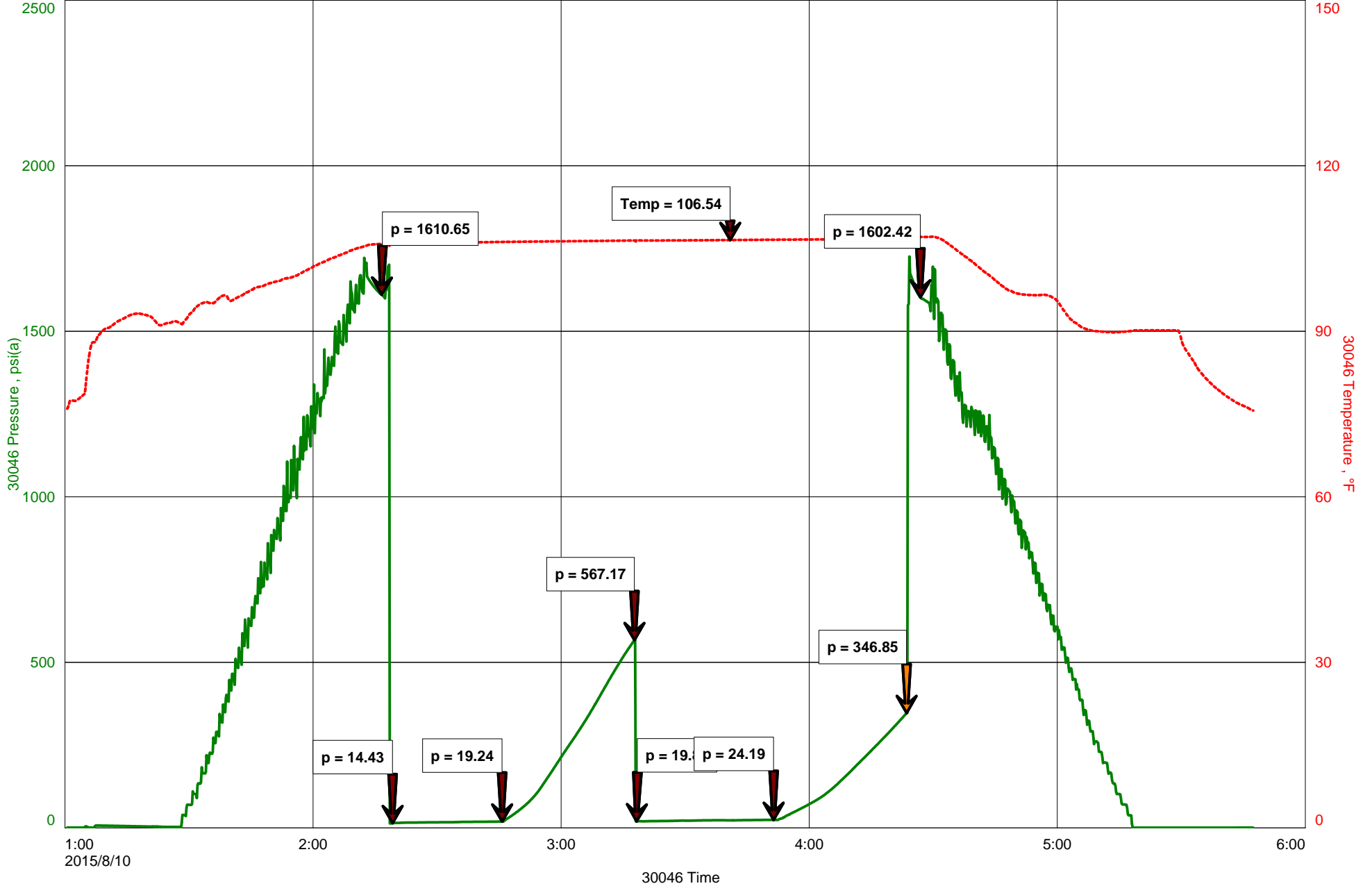
Recovered _____ ft. of _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

Time Set Packer(s) \_\_\_\_\_ A.M. P.M. Time Started Off Bottom \_\_\_\_\_ A.M. P.M. Maximum Temperature \_\_\_\_\_  
Initial Hydrostatic Pressure..... (A) \_\_\_\_\_ P.S.I.  
Initial Flow Period..... Minutes \_\_\_\_\_ (B) \_\_\_\_\_ P.S.I. to (C) \_\_\_\_\_ P.S.I.  
Initial Closed In Period..... Minutes \_\_\_\_\_ (D) \_\_\_\_\_ P.S.I.  
Final Flow Period..... Minutes \_\_\_\_\_ (E) \_\_\_\_\_ P.S.I. to (F) \_\_\_\_\_ P.S.I.  
Final Closed In Period..... Minutes \_\_\_\_\_ (G) \_\_\_\_\_ P.S.I.  
Final Hydrostatic Pressure..... (H) \_\_\_\_\_ P.S.I.

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# SCHLESSINGER/HICKEL #1





# Diamond Testing General Report

**John Riedl**  
**TESTER**  
**CELL: 620-793-0550**

## General Information

<b>Company Name</b>	L D DRILLING INC	<b>Job Number</b>	J3354
<b>Contact</b>	L D DAVIS	<b>Representative</b>	JOHN RIEDL
<b>Well Name</b>	SCHLESSINGER/HICKEL #1	<b>Well Operator</b>	L D DRILLING INC
<b>Unique Well ID</b>		<b>Report Date</b>	2015/08/09
<b>Surface Location</b>	S7/17S/12W	<b>Prepared By</b>	JOHN RIEDL
<b>Field</b>		<b>Qualified By</b>	KIM SHOEMAKER

## Test Information

<b>Test Type</b>	DST #2 CONVENTIONAL
<b>Formation</b>	LANS A-F
<b>Well Fluid Type</b>	
<b>Test Purpose</b>	

<b>Start Test Date</b>	2015/08/09	<b>Start Test Time</b>	06:00:00
<b>Final Test Date</b>	2015/08/09	<b>Final Test Time</b>	10:40:00

## Test Recovery

RECOVERY: 15' DRILLING MUD WITH OIL SPECKS





**DIAMOND TESTING**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(800) 542-7313  
**DRILL-STEM TEST TICKET**  
FILE: \_\_\_\_\_

TIME ON: \_\_\_\_\_  
TIME OFF: \_\_\_\_\_

Company \_\_\_\_\_ Lease & Well No. \_\_\_\_\_  
Contractor \_\_\_\_\_ Charge to \_\_\_\_\_  
Elevation \_\_\_\_\_ Formation \_\_\_\_\_ Effective Pay \_\_\_\_\_ Ft. Ticket No. \_\_\_\_\_  
Date \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Range \_\_\_\_\_ W County \_\_\_\_\_ State **KANSAS**  
Test Approved By \_\_\_\_\_ Diamond Representative \_\_\_\_\_

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

Top Recorder Depth (Inside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Bottom Recorder Depth (Outside) \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.  
Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_ P.S.I.

Mud Type \_\_\_\_\_ Viscosity \_\_\_\_\_ Drill Collar Length \_\_\_\_\_ ft. I.D. 2 1/4 in.  
Weight \_\_\_\_\_ Water Loss \_\_\_\_\_ cc. Weight Pipe Length \_\_\_\_\_ ft. I.D. 2 7/8 in.  
Chlorides \_\_\_\_\_ P.P.M. Drill Pipe Length \_\_\_\_\_ ft. I.D. 3 1/2 in.  
Jars: Make STERLING Serial Number \_\_\_\_\_ Test Tool Length \_\_\_\_\_ ft. Tool Size 3 1/2-IF in.  
Did Well Flow? \_\_\_\_\_ Reversed Out \_\_\_\_\_ Anchor Length \_\_\_\_\_ ft. Size 4 1/2-FH in.  
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: \_\_\_\_\_  
2nd Open: \_\_\_\_\_

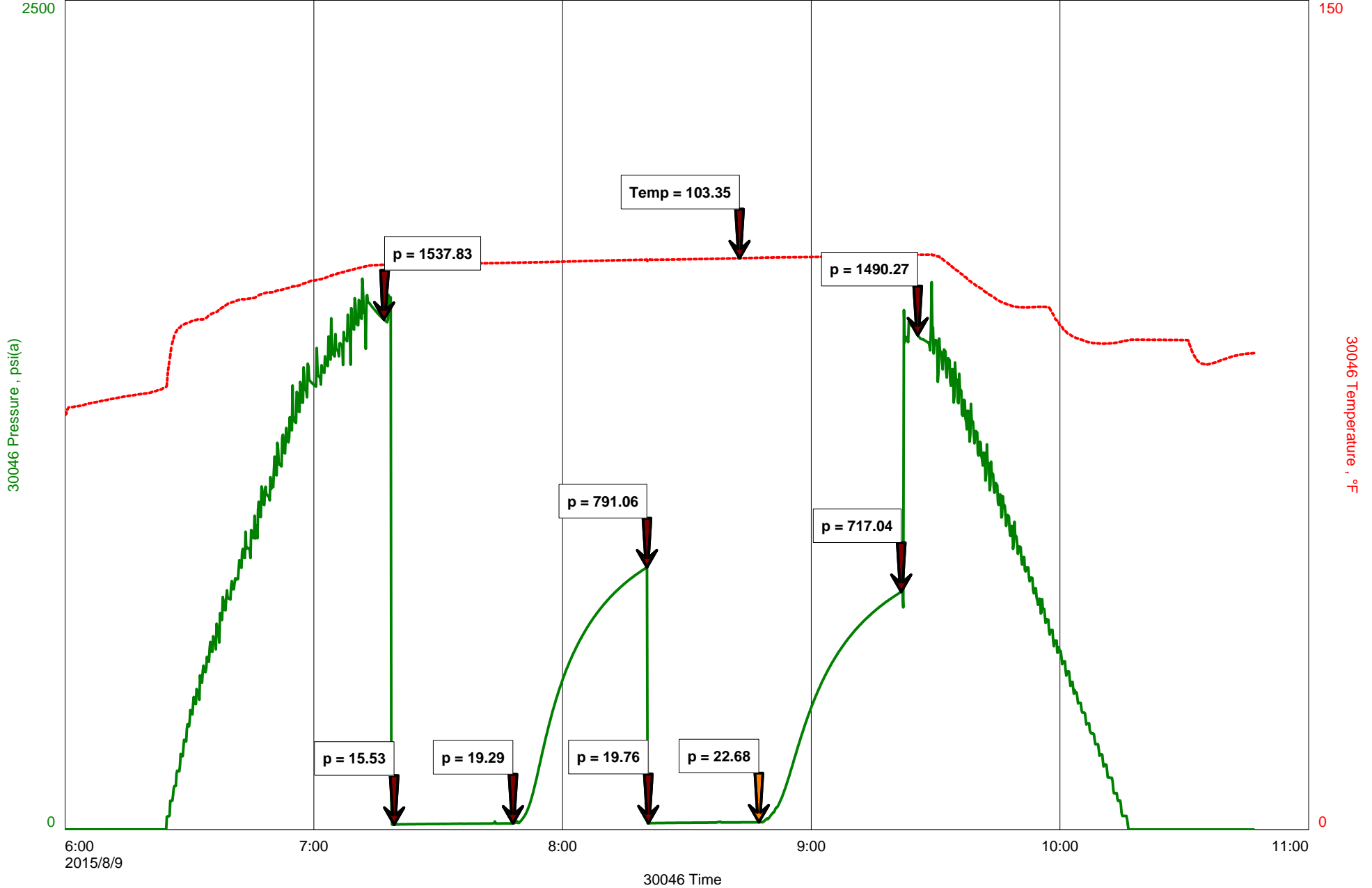
Recovered _____ ft. of _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

Time Set Packer(s) \_\_\_\_\_ A.M. P.M. Time Started Off Bottom \_\_\_\_\_ A.M. P.M. Maximum Temperature \_\_\_\_\_  
Initial Hydrostatic Pressure..... (A) \_\_\_\_\_ P.S.I.  
Initial Flow Period..... Minutes \_\_\_\_\_ (B) \_\_\_\_\_ P.S.I. to (C) \_\_\_\_\_ P.S.I.  
Initial Closed In Period..... Minutes \_\_\_\_\_ (D) \_\_\_\_\_ P.S.I.  
Final Flow Period..... Minutes \_\_\_\_\_ (E) \_\_\_\_\_ P.S.I. to (F) \_\_\_\_\_ P.S.I.  
Final Closed In Period..... Minutes \_\_\_\_\_ (G) \_\_\_\_\_ P.S.I.  
Final Hydrostatic Pressure..... (H) \_\_\_\_\_ P.S.I.

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# SCHLESSINGER/HICKEL #1





**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 12755 A

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

DATE OF JOB <b>08-11-15</b> DISTRICT <b>Pratt ks</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>L.D. Drilling</b>		LEASE <b>Schlosser-Hickel 1-7</b> WELL NO.				
ADDRESS		COUNTY <b>Barton</b> STATE <b>KS</b>				
CITY STATE		SERVICE CREW <b>Bullinao, McPherson, Adams</b>				
AUTHORIZED BY		JOB TYPE <b>cow 5 1/2 long run</b>				
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <b>8-11-15</b> DATE <b>AM PM</b> TIME <b>8:30</b>
<b>20920</b>	<b>30</b>	<b>mm</b>				ARRIVED AT JOB <b>AM PM</b> <b>1:20</b>
<b>21010</b>	<b>10</b>	<b>mm</b>				START OPERATION <b>AM PM</b> <b>2:50</b>
						FINISH OPERATION <b>AM PM</b> <b>3:30</b>
						RELEASED <b>AM PM</b> <b>3:45</b>
						MILES FROM STATION TO WELL <b>65</b>

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: **L.D. Davis** By **DL Scott**  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA-2 cmt	SK	150		2,550.00
CP 103	60/40 102 cmt	SK	30		360.00
CC 102	CellFate	16	38		140.00
CC 111	SALT	16	816		409.00
CC 113	Gypsum	16	705		528.75
CC 129	12A-322	15	113		847.50
CC 201	D. Isopit	16	980		603.00
CF 607	Latch Down, Ply & Baffle 5" C	SA	1		400.00
CF 1251	Auto Fill Float Valve	SA	1		360.00
CF 1651	Turbodrill	SA	6		1660.00
CF 1901	BASKET	SA	1		290.00
CC 151	Mud Wash	JAL	4000		1,500.00
E 100	Hookup rd	WD	65		292.50
E 101	Head, Egnit	WD	130		975.00
E 113	Bulk Egnit	WM	543		1,356.88
PE 204	APL Chgs 3000-4000	SR	1		2,160.00
PE 240	Bleed Off Mixer	SK	180		252.00
SE 03	Seam Separator	SA	1		175.00
CE 504	Ply Container	SA	1		250.00
SUB TOTAL					14,109.23

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
DISCOUNT TOTAL		9,171.00

SERVICE REPRESENTATIVE **Robert [Signature]** THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: \_\_\_\_\_  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. \_\_\_\_\_



Customer <i>L.D. Drilling</i>	Lease No.	Date <i>08-11-15</i>	
Lease <i>Schlesinger/Hicks</i>	Well # <i>1-7</i>		
Field Order # <i>12955</i>	Station <i>Pratt #</i>	Casing <i>5 1/2</i>	Depth <i>3542</i>
Type Job <i>CMD 5 1/2 Comp Log</i>	Formation	County <i>Barton</i>	State <i>KS</i>
		Legal Description <i>7-17-12</i>	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
<i>5 1/2</i>							
Depth <i>3542</i>	Depth	From	To	Pre Pad	Max		5 Min.
Volume <i>86</i>	Volume	From	To	Pad	Min		10 Min.
Max Press <i>2,000</i>	Max Press	From	To	Frac	Avg		15 Min.
Well Connection <i>P.C</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth <i>3542</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative	Station Manager <i>DAVE SWAN</i>	Treater <i>Robert Fuller</i>
Service Units <i>37900 33708 20920 19959 21010</i>		
Driver Names <i>Sullivan McGrath Adams</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>1:00</i>					<i>on loc</i>
					<i>cmd 5 1/2 14 csp</i>
					<i>cont. 1, 3, 5, 7, 9, 11 basket on 5</i>
					<i>Casing on Bottom</i>
<i>1:50</i>					<i>hook rig circ esp.</i>
<i>2:50</i>			<i>5</i>	<i>3.5</i>	<i>st spacer</i>
			<i>24</i>		<i>mid fluid</i>
			<i>5</i>		<i>spacer</i>
			<i>41</i>	<i>4.5</i>	<i>mix cont 150 sk AA-2 mix @ 14.8 ppf</i>
					<i>cont mix d shot down wash lining, pump</i>
					<i>Release Plug</i>
				<i>4</i>	<i>st dump</i>
	<i>250</i>				<i>lift 15'</i>
	<i>550</i>			<i>3.0</i>	<i>low rate</i>
<i>3:30</i>	<i>1,500</i>		<i>86</i>		<i>plug down</i>
			<i>7</i>		<i>plug mid of 30 sk</i>
					<i>503 complete</i>



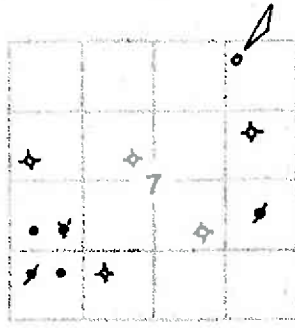
KIM B. SHOEMAKER  
CONSULTING GEOLOGIST  
316-884-9709 \* WICHITA, KS

GEOLOGIST'S REPORT  
DRILLING TIME AND SAMPLE LOG

COMPANY L. D. DRILLING, INC.  
LEASE \*1-7 SCHLESSIGER / HICKEL  
FIELD WILDCAT  
LOCATION 361' FNL & 1236' FEL  
SEC 7 TWP 17s RGE 12W  
COUNTY BARTON STATE KANSAS  
CONTRACTOR ROYAL DRILLING  
SPUD 8-4-15 COMP 8-11-15  
RTD 3550 LTD 3553  
MUD UP 2600 TYPE MUD CHEMICAL

ELEVATIONS  
KB 1970  
DF \_\_\_\_\_  
CL 1964  
Measurements Are All From 1970 KB  
CASING  
SURFACE 8 5/8" @ 432'  
PRODUCTION 5 1/2" @  
ELECTRICAL SURVEYS  
DUAL IND., DENS-N., MICRO

FORMATION TOPS	LOG	SAMPLES
ANHYDRITE	858+1112	860+1110
BLANK	883+1087	885+1085
HOWARD	2770-800	2769-799
TOPEKA	2808-838	2808-838
HEEBNER	3094-1129	3093-1123
BROWN LIME	3184-1214	3182-1212
LANSING	3204-1234	3199-1229
B/KC	3430-1460	3428-1458
ARBUCKLE	3444-1474	3438-1468

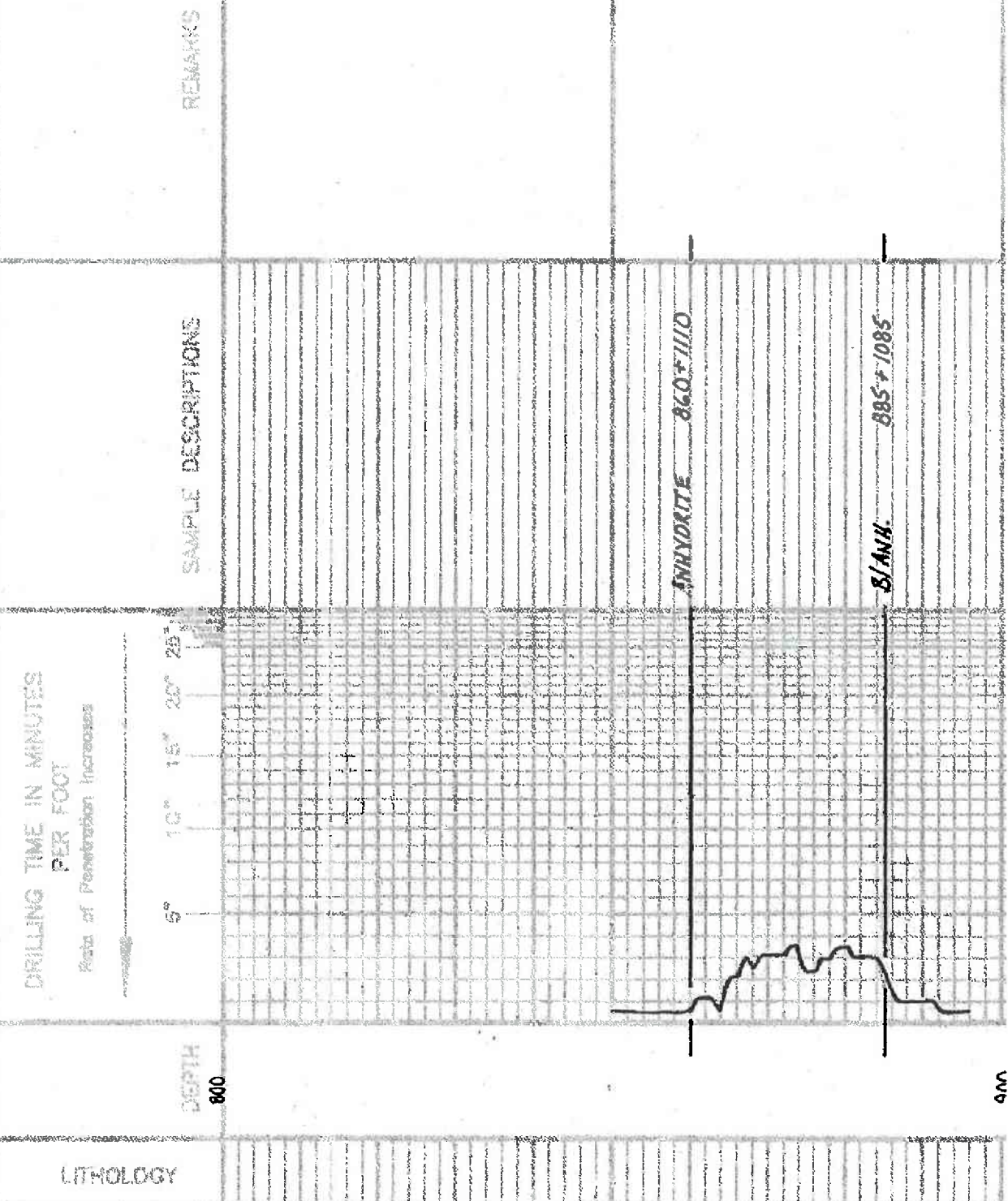


API: 15-009-26106

REMARKS  
8-4-15 SPUD  
8-5 @ 432'  
8-4 @ 1500'  
8-7 @ 2375'  
8-8 @ 2955'  
8-9 @ 3280'  
8-10 @ 3424'  
8-11 @ 3550'

LEGEND

- Dolomite
- Chert
- Col. Lime
- Limestone
- Carb. sh.
- Shale
- Sandstone
- Salt
- Anhydrite

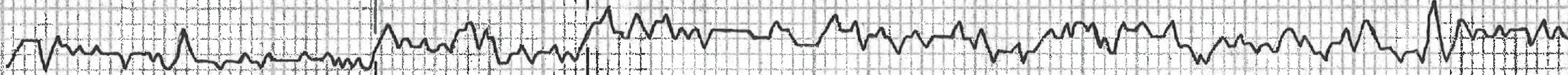




Vis. Co. WTR. 87

W.C. 102 CR 1000  
@ 7632

2700



2800

2900

HOWARD 2769-791

Samples are logged

Sh. clay Silty

TOPEKA 2808-838

ls. Bdy. St. foss.

ls. wt. Foss. St. Foss. Srd

ls. wt. Foss. Sh. Chly.

ls. wt. Chly.

ls. wt. Foss. Chly.

Sh. G.

ls. clay. 150-160

ls. wt. Foss.

1 in. Foss.

St. Oxy.

Sh. G.

ls. To. G. St. Foss.

Sh. G.

ls. To. G. St. Foss.

Sh. G.



3000

3100

3200

3300

VIS: 47  
WT: 9.2  
NWL: 8.8  
CWT: 400

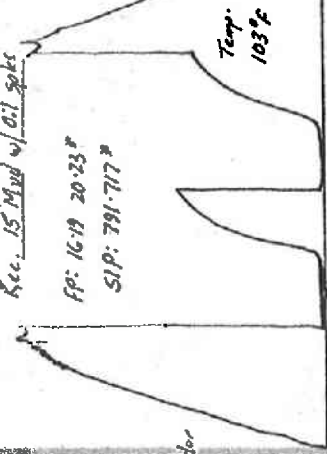
VIS: 50  
WT: 8.4  
NWL: 8.8  
CWT: 5000

TORONTO

PARIS

DST (1)

DST (2)



LS. T.OL. Bl. Sil. Pass

Sh. Blk. G. A. G.

LS. T. G. and Sil. G. Lith.

LS. T. G. Sil. Pass

LS. T.OL. Bl. and

LS. wt. XSLI. Pass. Sil. Call.

LS. T. G. V. Sil. A

LS. wt. Sil. Pass. w/ Fe. spks

HEEBNER 3093-1123  
SH. BLK. Conc.

LS. G. Bl. XSLI. Pass

Sh. Sil. G.

LS. wt. XSLI. Pass. Sil. A

Sh. Blk. R.

Sh. G. G. Sil. G.

Sh. Sil. G. Silly. Silly

BROWN LIME 3182-1212

LS. G. Bl. XSLI. Pass

Sh. Blk. G.

LANSING 3199-1219

LS. T. wt. 0.00. Sil. 0.00. of 145

LS. T. wt. Sil. Pass. Sil. Call. R. V. G. of  
DE. Bl. Sil. Pass. No Floor. No Oil

LS. T. wt. Sil. Call.

Sh. Sil. G.

LS. wt. XSLI. Pass. Sil. A. T. G. of  
DE. Bl. Sil. Pass. No Floor. No Oil

LS. T. G. Sil. Pass

LS. Blk. Bl. Sil. Pass

LS. wt. Sil. Pass. Sil. Call. R. V. G. of  
DE. Bl. Sil. Pass. No Floor. No Oil

LS. G. Sil. Pass. w/ Blk. G. Pass

Sh. Sil. G.

LS. G. XSLI. Pass

LS. wt. Call.

LS. T. wt. 0.00-0.00. of 0.00. of NS.

LS. wt. Chilly

LS. Call. XSLI. Pass

Sh. Blk. Sil. A

Sh. Sil. G.









**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 12684 A

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

DATE OF JOB <u>8/20/15</u> DISTRICT _____		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>L.P. Drilling, Inc</u>		LEASE <u>Schlessiger/Hickel</u>		WELL NO. <u>17</u>						
ADDRESS _____		COUNTY <u>Benton</u>		STATE <u>Ks</u>						
CITY _____ STATE _____		SERVICE CREW <u>Scotly, Scotly, Mike &amp; Ed</u>								
AUTHORIZED BY <u>L.D. Davis</u>		JOB TYPE: <u>Squeeze Probs (CNU)</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>19905</u>	<u>2</u>									
<u>73768</u>	<u>.25</u>									
						ARRIVED AT JOB	<u>8/20/15</u>	AM	PM	<u>12:00</u>
						START OPERATION	<u>8/20/15</u>	AM	PM	<u>3:00</u>
						FINISH OPERATION	<u>8/20/15</u>	AM	PM	<u>5:00</u>
						RELEASED	<u>8/20/15</u>	AM	PM	<u>5:45</u>
						MILES FROM STATION TO WELL _____				

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

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SIGNED: L.D. Davis By D. Scott  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<u>CP100C</u>	<u>Common Cement</u>	<u>SK</u>	<u>75</u>		<u>1725.00</u>
<u>CC 135</u>	<u>C-18 Fluid loss</u>	<u>Gal</u>	<u>5</u>		<u>740.00</u>
<u>E 100</u>	<u>Light Mileage Charge Pickups</u>	<u>MI</u>	<u>65</u>		<u>292.50</u>
<u>E 101</u>	<u>Heavy Equipment Mileage</u>	<u>MI</u>	<u>130</u>		<u>975.00</u>
<u>E 113</u>	<u>Prop &amp; Bulk Delivery Charge</u>	<u>TM</u>	<u>231</u>		<u>576.88</u>
<u>CE 204</u>	<u>Depth Charge 500' - 4000'</u>	<u>ft</u>	<u>1</u>		<u>2160.00</u>
<u>CE 240</u>	<u>Blending &amp; Mixing Service Chg</u>	<u>SK</u>	<u>75</u>		<u>105.00</u>
<u>CE 500</u>	<u>Cement Squeeze Material</u>	<u>EA</u>	<u>1</u>		<u>500.00</u>
<u>S003</u>	<u>Service Supervision Hour &amp; hrs</u>	<u>EA</u>	<u>1</u>		<u>175.00</u>
SUB TOTAL					<u>6224.38</u>

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		<u>4,045.84</u>

SERVICE REPRESENTATIVE <u>[Signature]</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>L.D. Davis By D. Scott</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
---	--

FIELD SERVICE ORDER NO. \_\_\_\_\_

Customer <i>L.D. Dalling, Inc</i>		Lease No.		Date <i>8/26/15</i>	
Lease <i>Schlosser / Hubel</i>		Well # <i>1-7</i>			
Field Order # <i>126811A</i>	Station <i>Pratt KS</i>	Casing <i>2 1/2</i>	Depth	County <i>Barton</i>	State <i>KS</i>
Type Job <i>Squeeze Pumps</i>			Formation <i>crin</i>	Legal Description <i>7-17-12</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>2 1/2</i>	<i>2 1/8</i>	From	To	Pre Pad	Max		5 Min.	
<i>2 1/2</i>	<i>2 1/8</i>	From	To	Pad	Min		10 Min.	
Max Press <i>2000</i>	Max Press <i>2000</i>	From	To	Frac	Avg		15 Min.	
Well Connection <i>2 1/2</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative	Station Manager <i>Karen Goodley</i>	Treater <i>Scott Gwynne</i>
-------------------------	---	--------------------------------

Service Units	<i>35970</i>	<i>77656</i>	<i>76154</i>	<i>73765</i>						
Driver Names	<i>Scott</i>	<i>Mark</i>	<i>Solby</i>	<i>Scotty</i>						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>12:00</i>					<i>On location Solby Meeting Rig up</i>
<i>3:00</i>		<i>2000</i>			<i>Pressure Test</i>
<i>3:15</i>		<i>500</i>	<i>5</i>	<i>2.5</i>	<i>Load annulus</i>
<i>3:20</i>		<i>500</i>		<i>2.25</i>	<i>Set injector rate</i>
<i>3:35</i>		<i>500</i>		<i>2.75</i>	<i>Mix 25 st's Luvamon with fluid to</i>
<i>3:38</i>		<i>300</i>	<i>5</i>	<i>2.25</i>	<i>Mix 50 st's Luvamon</i>
<i>3:44</i>		<i>250</i>	<i>11</i>		<i>Shut down</i>
					<i>Wash pump &amp; lines</i>
<i>3:46</i>		<i>250</i>		<i>2.1</i>	<i>Start Displacement</i>
<i>3:50</i>		<i>700</i>	<i>7</i>	<i>2.1</i>	<i>Pressure increase 100000 on pads</i>
<i>3:55</i>		<i>2000</i>	<i>7</i>		<i>Shut down</i>
<i>3:55</i>		<i>2000</i>			<i>Stage</i>
<i>4:01</i>		<i>500</i>		<i>1.1</i>	<i>Reverse out</i>
<i>4:19</i>		<i>0</i>	<i>76</i>		<i>Shut down</i>
<i>4:25</i>		<i>1000</i>			<i>Run in 3 tanks pressure up to 1000</i>
<i>4:27</i>				<i>2</i>	<i>Reverse out tubing casing clear</i>
<i>5:00</i>		<i>250</i>	<i>56</i>		<i>Shut down</i>
					<i>Job complete</i>





**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 12611 A

T-1TS-12W

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

DATE OF JOB	8-5-15	DISTRICT	Pratt, Kansas	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	L.D. Drilling, Inc.			LEASE	Schlessinger/Hickel			WELL NO.	1-7		
ADDRESS				COUNTY	Barton			STATE	Kansas		
CITY				STATE	Kansas						
AUTHORIZED BY				SERVICE CREW	C. Messick; M. McGraw; M. Sparks						
				JOB TYPE:	C.N.W. - Surface						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	8-4-15	DATE	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	TIME	9:00
19,905	.75					ARRIVED AT JOB	8-4-15	DATE	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	TIME	11:45
T3768	.75					START OPERATION	8-5-15	DATE	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	TIME	12:50
						FINISH OPERATION	8-5-15	DATE	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	TIME	1:35
						RELEASED	8-5-15	DATE	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	TIME	1:45
						MILES FROM STATION TO WELL	65				

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

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SIGNED: Tom Blake  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 103	60/40 Poz	sk	300	\$	3,600 00
CC 102	Cell plate	Lb	75	\$	277 50
CC 109	Calcium Chloride	Lb	774	\$	812 70
CF 153	Wooden Cement Plug, 8 5/8"	Ea	1	\$	160 00
E 100	Unit Mileage Charge - Pickups, small vans & cars	mi	65	\$	292 50
E 101	Heavy Equipment Charge	mi	130	\$	975 00
E 113	Proppant & Built Delivery	Tm	839	\$	2,096 25
CE 200	Depth Charge 0 Feet To 500 Feet	4	4 Hr	\$	1,000 00
CE 240	Blending & Mixing Service	sk	300	\$	420 00
S 003	Service Supervisor	Ea	1	\$	175 00
CE 504	Plug Container	Job	1	\$	250 00

SUB TOTAL \$10,058 95

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		\$6,538 32

SERVICE REPRESENTATIVE: <u>Janice R. [Signature]</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Tom Blake</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
--	---

FIELD SERVICE ORDER NO.



Customer L.D. Drilling, Inc.	Lease No.	Date 8-5-15	
Lease Schlessinger/Hickel	Well # 1-7		
Field Order # 12,611	Station Pratt, Kansas	Casing 8 5/8" 23Lb.	Depth 432 Feet
Type Job C.N.W. - Surface	County Barton	State Kansas	Legal Description 7-175-12W

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8 5/8" 23Lb./Ft.	Tubing Size 2 3/8" 11.3Lb./Ft.	Shots/Ft	300 sacks	Acid	60/40 Poz with	RATE	PRESS	ISIP
Depth 432 Feet	Depth	From	To	Pre-Flush	28 Total Gal, 38 Calcium Chloride, .25 Lb./St. cell plate			5 Min.
Volume 27.6 Bbl.	Volume	From	To	Pre-Flush	14.8 Lb./Gal., 1.21 Gal./St., 5.18 Gal./St.			10 Min.
Max Press 300 PSI	Max Press	From	To	Pre-Flush				15 Min.
Well Connection Plug Container	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth 417 Feet	Packer Depth	From	To	Flush	26.5 Bbl. Fresh Water	Gas Volume		Total Load

Customer Representative Doug Buttig	Station Manager Kevin Gordley	Treater Clarence R. Messich
Service Units 37,216	77,686	19,905
Driver Names Messich	McGraw	Sparks

Time P.M.	Casing Pressure	Tubing Pressure	Bbbs. Pumped	Rate	Service Log
11:45	8.4-15				Trucks on location and hold safety meeting.
11:45					Royal Drilling start to run 10 Joints 23 Lb./Ft. 8 5/8" casing.
12:41					Casing in well. Circulate for 5 minutes.
12:50	200			5	Start Fresh water Pre-Flush.
	200		10	5	Start mixing 300sacks 60/40 Poz.
			<del>66</del> 75		Release wooden Plug.
	100			5	Start Fresh water Displacement
1:15	300		26.5		Plugdown. Shut in well.
					Circulated 10 sacks cement to pit.
					Wash up pump truck.
					Job Complete.
					Thank You.
					Clarence, Mike, Mathew