

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1267753
OIL & GAS CONSERVATION DIVISION

Form ACO-1
November 2016

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

Gas DH EOR

OG GSW

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 EOR Conv. to SWD
 Plug Back Liner Conv. to GSW Conv. to Producer

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

EOR Permit #: _____

GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: _____

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 Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT I II III Approved by: _____ Date: _____

1267753

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 Geologist Report / Mud Logs <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
--	---

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				

1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
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)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

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>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Cynosure Energy, LLC
Well Name	Leiker 1-25-15-20
Doc ID	1267753

All Electric Logs Run

Dual Induction/ GR
Dual Comp. Porosity Log
Microresistivity
Sonic Log
Cement Bond Log

Form	ACO1 - Well Completion
Operator	Cynosure Energy, LLC
Well Name	Leiker 1-25-15-20
Doc ID	1267753

Tops

Name	Top	Datum
Stone Corral	1324	785
Topeka	3075	-967
Heebner	3358	-1250
Lansing	3404	-1296
BKC	3638	-1530
Marmaton	3652	-1544
Pawnee	3691	-1583
Granite	3725	-1617

1473

SEP 22 2015

1509-AP-248

Date: 9/16/2015
Invoice # 1492

P.O.#:

Due Date: 10/16/2015

Division: Russell



QUALITY OILWELL CEMENTING, INC.
PO Box 32 - 740 West Wichita Ave, Russell KS 67665
Phone: 785-324-1041 fax: 785-483-1087
Email: cementing@ruraltel.net

Invoice

Contact:
CYNOSURE ENERGY LLC
Address/Job Location:
CYNOSURE ENERGY LLC
1125 17th Street, Suite 410
DENVER CO 80113

Well Name: Leiker 1-25-15-20 ✓
AFE No.: KS REM 1009
Line No.: 8200.210
Name: _____
Signature: [Signature] 9-22-15
[Signature] 23 Sep 2015

Reference:
LEIKER 1 25-25 SEC 25-15-20

Description of Work:
PORT COLLAR JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 606.13	No				
Multi Density- 80/20	140	\$ 2,032.06	Yes				
Bulk Truck Matl-Material Service Charge	200	\$ 165.88	No				
Flo Seal	50	\$ 82.94	Yes				
Pump Truck Mileage-Job to Nearest Camp	16	\$ 72.99	No				
Bulk Truck Mileage-Job to Nearest Bulk Plant	16	\$ 46.45	No				

Invoice Terms:

Net 30

SubTotal:	\$	3,006.45
Discount Available <u>ONLY</u> if Invoice is Paid & Received within listed terms of invoice:	\$	(75.16)
SubTotal for Taxable Items:	\$	2,062.13
SubTotal for Non-Taxable Items:	\$	869.17
Total:	\$	2,931.29
Tax:	\$	144.35
Amount Due:	\$	3,075.64
Applied Payments:		
Balance Due:	\$	3,075.64

7.00% Ellis County Sales Tax

Thank You For Your Business!

Past Due Invoices are subject to a service charge (annual rate of 24%)
This does not include any applicable taxes unless it is listed.
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QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

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

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

No. 1492

Date	9.16.15	Sec.	25	Twp.	15	Range	20	County	Eds	State	KS	On Location		Finish	10:15 A.M.
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Location Schoonchen 9 1/2 W Vinto

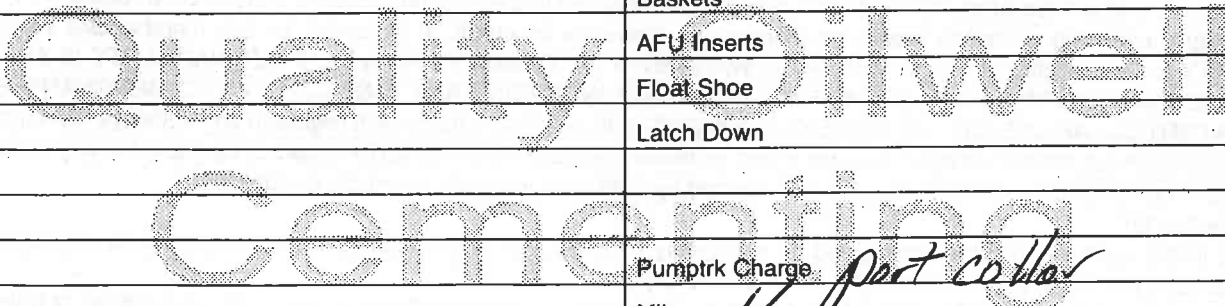
Lease	<u>Leifer #1</u>	Well No.	<u>25-25</u>	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Contractor	<u>Express</u>			Charge To	<u>Cynose Energy</u>
Type Job	<u>Port Collar</u>			Street	
Hole Size	<u>7 7/8</u>	T.D.		City	
Csg.	<u>5 1/2</u>	Depth		State	
Tbg. Size	<u>2 3/8</u>	Depth		The above was done to satisfaction and supervision of owner agent or contractor.	
Tool	<u>Reinhardt's Rick</u>	Depth	<u>1306</u>	Cement Amount Ordered	<u>200 @ 20 Qm DC 1/4 #10</u>
Cement Left in Csg.		Shoe Joint			

Meas Line		Displace		<u>USED 140SK</u>	
EQUIPMENT				Common	#10 <u>200 Qm DC used 140</u>
Pumptrk	<u>20</u>	No.		Poz. Mix	<u>20</u>
		Cement Helper	<u>Craig</u>	Gel.	
Bulktrk		No.		Calcium	
		Driver		Hulls	
Bulktrk	<u>9</u>	No.		Salt	
		Driver	<u>Wick</u>	Flowseal	<u>50#</u>
		Driver		Kol-Seal	

JOB SERVICES & REMARKS				Mud CLR 48	
Remarks:				CFL-117 or CD110 CAF 38	
Rat Hole				Sand	
Mouse Hole	<u>KCC Pat Bedore</u>			Handling	<u>200</u>
Centralizers				Mileage	
Baskets				FLOAT EQUIPMENT	
D/V or Port Collar				Guide Shoe	
	<u>Top 5 1/2 to 700# open</u>			Centralizer	
	<u>total mix 140SK Cement</u>			Baskets	
	<u>Circulated Case Tool test to</u>			AFU Inserts	
	<u>700# Run 5 joints & Wash</u>			Float Shoe	
	<u>Clean</u>			Latch Down	

				Pumptrk Charge	<u>part collar</u>
				Mileage	<u>16</u>

X Signature <u>Terry W. Pishes</u>	Tax	
	Discount	
	Total Charge	



1473



QUALITY OILWELL CEMENTING, INC.
PO Box 32 - 740 West Wichita Ave, Russell KS 67665
Phone: 785-324-1041 fax: 785-483-1087
Email: cementing@ruraltel.net

RECEIVED
SEP 02 2015

Date: 9/2/2015
Invoice # 1617
P.O.#:
Due Date: 10/2/2015
Division: Russell

Invoice

Contact:
CYNOSURE ENERGY LLC
Address/Job Location:
CYNOSURE ENERGY LLC
1125 17th Street, Suite 410
DENVER CO 80113

Well Name: Leiken 1-25-15-20
Acct No.: KS Ram 1009
Line No.: 8200. 210
Name: Leiken 9-9-15
Signature: _____

Leiken

Reference:
~~LIKES~~ 1 SEC 25-15-20

Description of Work:
SURFACE JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 606.13	No				
Common-Class A	145	\$ 1,996.39	Yes				
Calcium Chloride	8	\$ 369.32	Yes				
POZ Mix-Standard	35	\$ 203.21	Yes				
Bulk Truck Matl-Material Service Charge	191	\$ 158.42	No				
Pump Truck Mileage-Job to Nearest Camp	20	\$ 91.24	No				
Bulk Truck Mileage-Job to Nearest Bulk Plant	20	\$ 58.06	No				
8 5/8" Centralizer	1	\$ 53.08	Yes				
Premium Gel (Bentonite)	3	\$ 40.51	Yes				

Invoice Terms:

Net 30

	SubTotal:	\$ 3,576.36
	Discount Available <u>ONLY</u> if Invoice is Paid & Received within listed terms of invoice:	\$ (89.41)
SubTotal for Taxable Items:		\$ 2,595.95
SubTotal for Non-Taxable Items:		\$ 891.00
Total:		\$ 3,486.95
Tax:		\$ 181.72
Amount Due:		\$ 3,668.67
Applied Payments:		
Balance Due:		\$ 3,668.67

Thank You For Your Business!

Past Due Invoices are subject to a service charge (annual rate of 24%)
This does not include any applicable taxes unless it is listed.
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7.00% Ellis County Sales Tax

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

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

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

No. 1617

Date	9-2-15	Sec.	25	Twp.	15	Range	20	County	Ellis	State	Ks	On Location		Finish	2:30 AM
------	--------	------	----	------	----	-------	----	--------	-------	-------	----	-------------	--	--------	---------

Location Schoenchen, Ks - 8 1/2 W, N Kento

Lease	Leiker		Well No.	1	Owner		
Contractor	Duke #1				To Quality Oilwell Cementing, Inc.		
Type Job	Surface				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.	354'		Charge To	Cynosure Energy LLC	
Csg.	8 5/8"	Depth	354'		Street		
Tbg. Size		Depth			City	State	
Tool		Depth			The above was done to satisfaction and supervision of owner agent or contractor.		
Cement Left in Csg.	15'	Shoe Joint	15'		Cement Amount Ordered	180 80/20 342	
Meas Line		Displace	21 1/2 BUS				

EQUIPMENT

Pumptrk	18	No.	Cementer		Common	145
			Helper	Craig	Poz. Mix	35
Bulktrk	9	No.	Driver	Billy	Gel.	3
			Driver	Rick	Calcium	8

JOB SERVICES & REMARKS

Remarks:	Cement did Circulate	Hulls	
Rat Hole		Salt	
Mouse Hole	In Cellar	Flowseal	
Centralizers		Kol-Seal	
Baskets		Mud CLR 48	
D/V or Port Collar		CFL-117 or CD110 CAF 38	
		Sand	
		Handling	191
		Mileage	

FLOAT EQUIPMENT

Guide Shoe	
Centralizer	1
Baskets	
AFU Inserts	
Float Shoe	
Latch Down	
Pumptrk Charge	Surface
Mileage	20

Signature	<i>Mike Seifert</i>	Tax	
		Discount	
		Total Charge	



QUALITY OILWELL CEMENTING, INC.
 PO Box 32 - 740 West Wichita Ave. Russell KS 67665
 Phone: 785-324-1041 fax: 785-483-1087
 Email: cementing@ruraltel.net

Date: 9/7/2015
 Invoice # 1621

P.O.#:
 Due Date: 10/7/2015
 Division: Russell

RECEIVED

NOV 03 2015

Invoice

ENTERED

Contact:
 CYNOSURE ENERGY LLC
Address/Job Location:
 CYNOSURE ENERGY LLC
 1125 17th Street, Suite 410
 DENVER CO 80113

Reference:

Leiker #1

Description of Work:
 PROD STRING

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 644.02	No	Bulk Truck Mileage-Job to Nearest Bulk Plant	20	\$61.69	No
Common-Class A	250	\$ 3,657.19	Yes				
Cement Port Collar, 5 1/2"	1	\$ 2,291.25	Yes				
5 1/2" Turbolizer	8	\$ 408.90	Yes				
Mud Clear	500	\$ 326.06	Yes				
Auto Fill Float Shoe, 5 1/2"	1	\$ 269.66	Yes				
Salt (Fine)	20	\$ 246.05	Yes				
5 1/2" Basket	1	\$ 227.36	Yes				
Bulk Truck Matl-Material Service Charge	270	\$ 237.94	No				
Latch Down Plug & Baffle, 5 1/2"	1	\$ 197.40	Yes				
Pump Truck Mileage-Job to Nearest Camp	20	\$ 96.94	No				

SubTotal: \$ 8,664.45

Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (216.61)

SubTotal for Taxable Items: \$ 7,433.27

SubTotal for Non-Taxable Items: \$ 1,014.57

Total: \$ 8,447.84

Tax: \$ 520.33

Amount Due: \$ 8,968.17

Applied Payments:

Balance Due: \$ 8,968.17

7.00% Ellis County Sales Tax

Thank You For Your Business!

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QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

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

No. 1621

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

Date	9-7-15	Sec.	25	Twp.	15	Range	20	County	Ellis	State	Ks	On Location		Finish	7:55 PM
Lease								Location		Schoenchen, Ks - 8 1/2 W, N into					

Lease	Leiker		Well No.		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.									
Contractor	Duke #1				Charge To	Cynosure Energy									
Type Job	Lining		T.D.	3790'	Street										
Hole Size	7 7/8"		Depth	3794.53'	City	State									
Csg.	15.50 5 1/2" New		Depth		The above was done to satisfaction and supervision of owner agent or contractor.										
Tbg. Size			Depth		Cement Amount Ordered	250 Com 10% Salt									
Tool	Port Collar		Depth	1303'	Displace	89 1/4 BLS									
Cement Left in Csg.	42.96'		Shoe Joint	42.96'	500 gal mud Clear	48									
Meas Line			Displace	89 1/4 BLS	Common	250									

EQUIPMENT

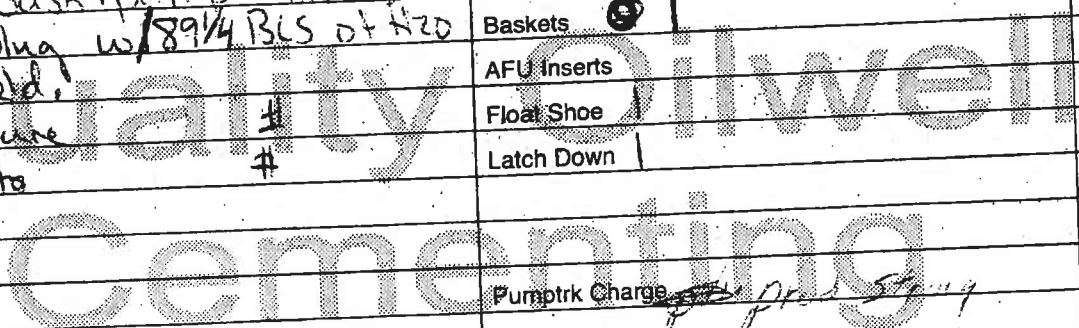
Pumptrk	17	No.	Cement Helper	Travis	Poz. Mix										
Bulktrk	15	No.	Driver	Billy	Calcium										
Bulktrk	14	No.	Driver	Rick	Hulls										

JOB SERVICES & REMARKS

Remarks:	Pipe on bottom break Circulation pump 500 gal mud Clear 48, plug Rat hole w/ 30 sx plug mouse hole w/ 15 sx Cement 5 1/2" casing w/ 205 sx Cement. Shut down wash pump + lines. Displaced plug w/ 89 1/4 BLS of H2O. Released + held. Lift pressure # # Land plug to #														
Rat Hole	Salt 20														
Mouse Hole	Flowseal														
Centralizers	Kol-Seal														
Baskets	Mud CLR 48 500 gal														
D/V of (Port Collar)	CFL-117 or CD110 CAF 38														
	Sand														
	Handling 270														
	Mileage														

FLOAT EQUIPMENT

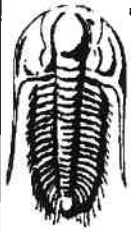
Guide Shoe	Port Collar														
Centralizer	8														
Baskets	1														
AFU Inserts															
Float Shoe															
Latch Down															



Pumptrk Charge \$
Mileage \$

Tax
Discount
Total Charge

Signature: *James W. Pisker*



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Cynosure Energy, LLC

25-15S-20W Ellis, KS

1125 17th St.

Leiker #1-25-15-20

Suite 410

Job Ticket: 34549

DST#: 1

Denver, CO 80202

ATTN: Justin Carter

Test Start: 2015.09.05 @ 06:06:42

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

31 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 50.00 sec/qt

Cushion Volume:

bbl

Water Loss: 8.79 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 5500.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
927.00	GSWMCO, 15%G 5%W 65%O 15%M	13.141
0.00	2475' GIP	0.000
0.00	Sampler: 2000mL O @ 525PSI	0.000

Total Length: 927.00 ft Total Volume: 13.141 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

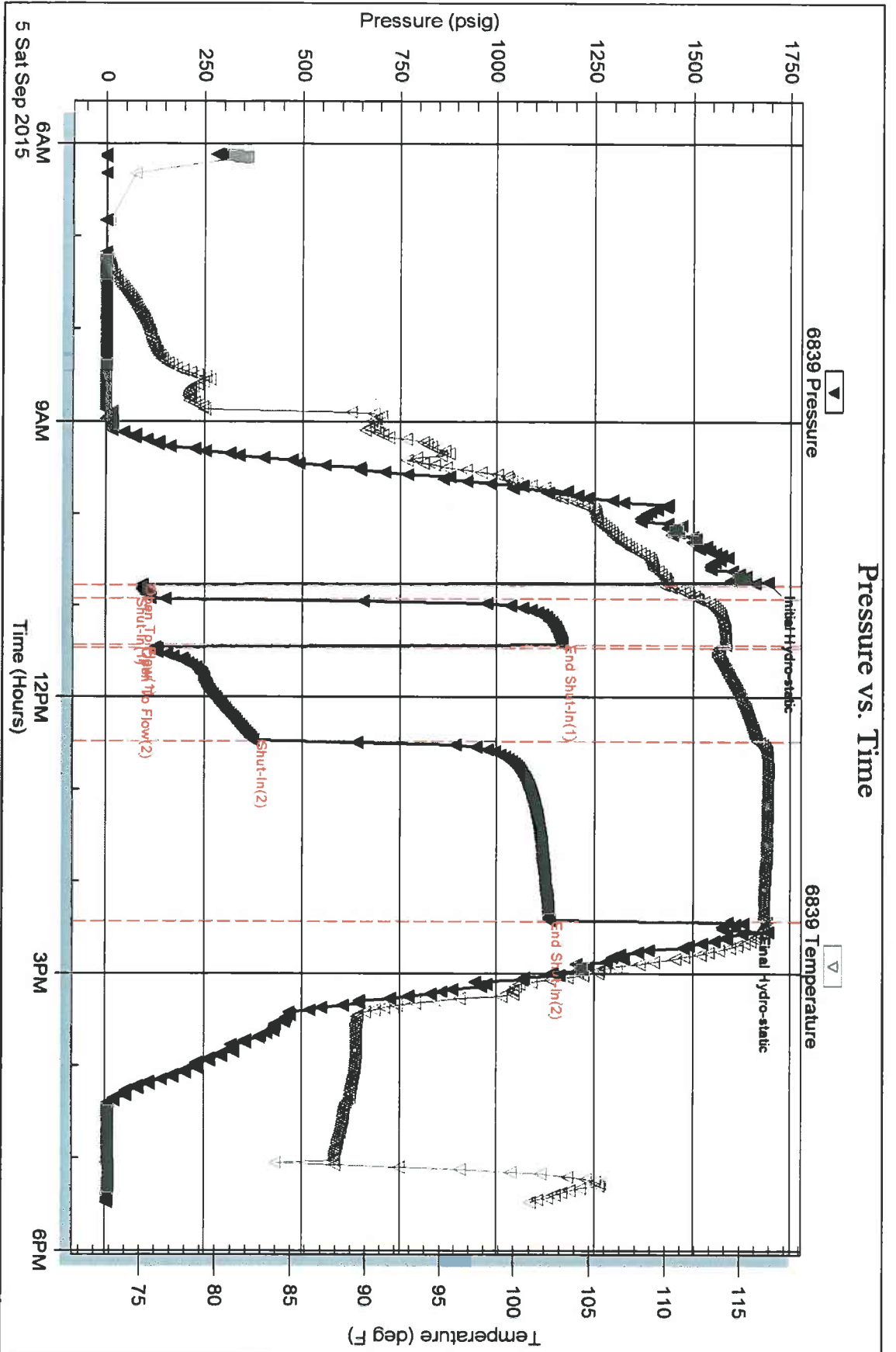
Recovery Comments:

Serial #: 6839

Outside Cynosure Energy, LLC

Leaker #1-25-15-20

DST Test Number: 1



Triobite Testing, Inc

Ref. No: 34549

Printed: 2015.09.05 @ 22:50:44



DRILL STEM TEST REPORT

Prepared For: **Cynosure Energy, LLC**

1125 17th St.
Suite 410
Denver, CO 80202

ATTN: Justin Carter

Leiker #1-25-15-20

25-15S-20W Ellis, KS

Start Date: 2015.09.06 @ 23:40:37

End Date: 2015.09.07 @ 06:45:07

Job Ticket #: 34550 DST #: 2

Trilobite Testing, Inc
PO Box 362 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2015.09.07 @ 07:14:15



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Cynosure Energy, LLC

25-15S-20W Ellis, KS

1125 17th St.
Suite 410
Denver, CO 80202
ATTN: Justin Carter

Leiker #1-25-15-20
Job Ticket: 34550 DST#: 2
Test Start: 2015.09.06 @ 23:40:37

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 55.00 sec/qt	Cushion Volume: bbl		
Water Loss: 11.19 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 7800.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
4.00	M	0.057
1.00	CO	0.014
0.00	Sampler: 2000mL Mw/Ospots @ 50PSI	0.000

Total Length: 5.00 ft Total Volume: 0.071 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:

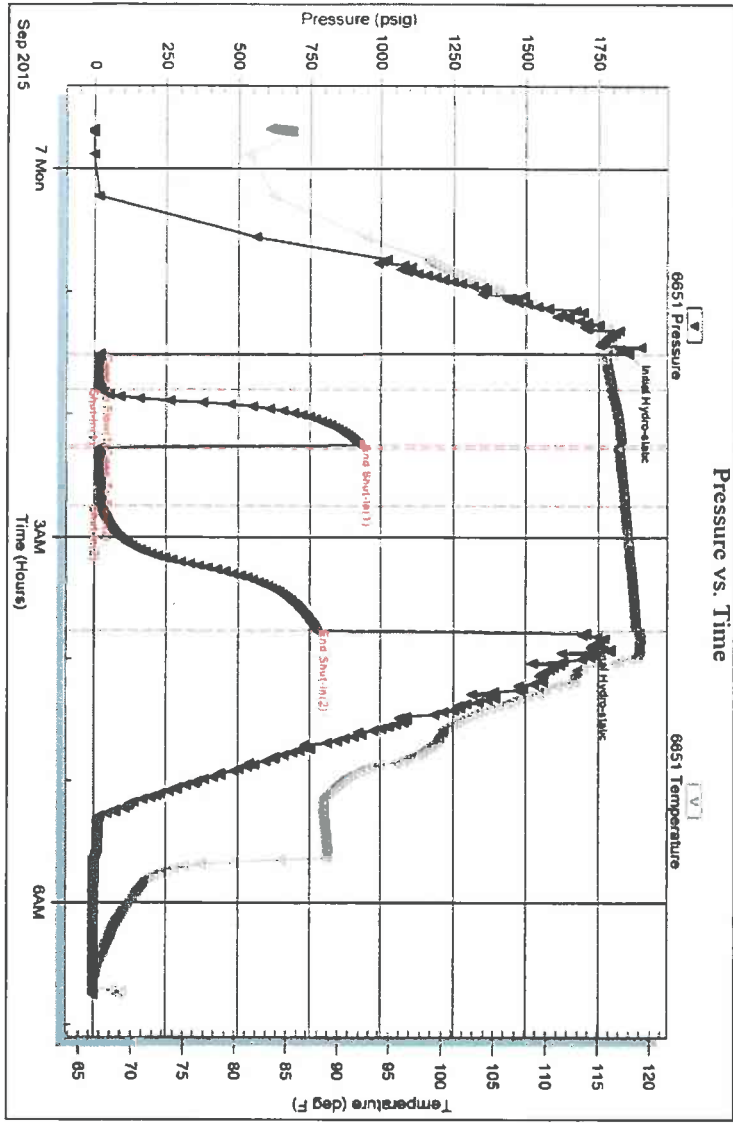
Serial # 6651

Inside

Cynsure Energy, LLC

Letter #1-25-15-20

DST Test Number: 2



Trochle Testing, Inc

Ref No: 34550

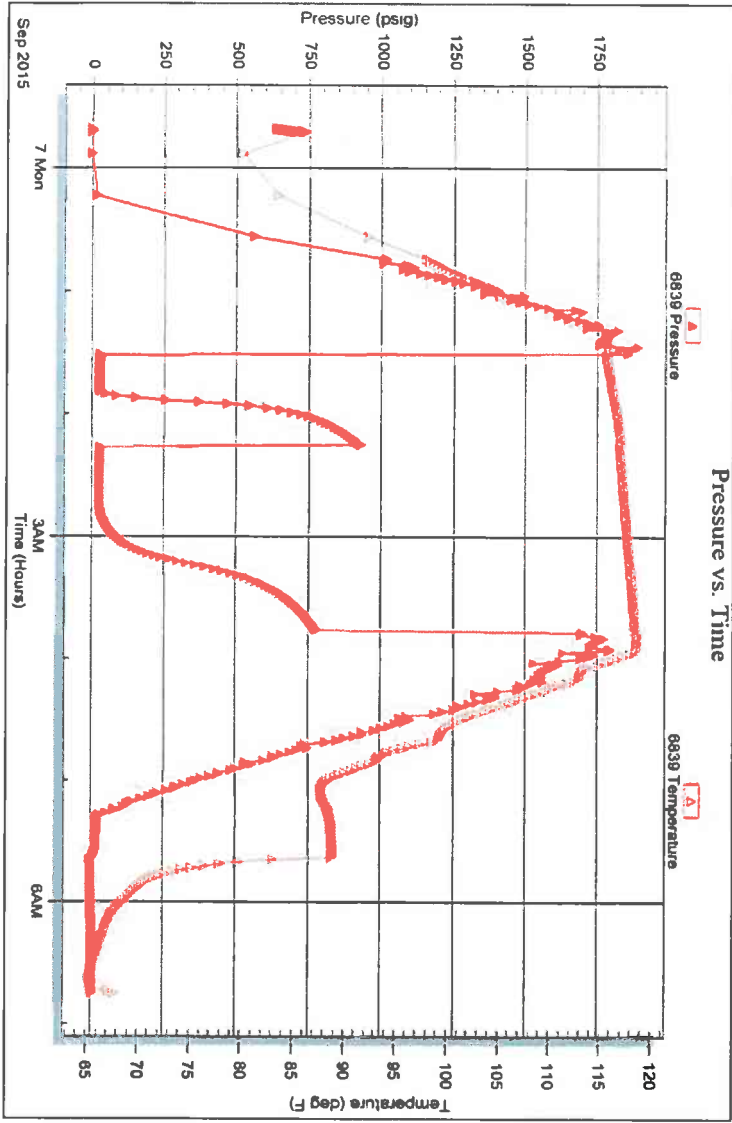
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Serial #: 6839

Outside Cynovue Energy, LLC

Letter #1-25-15-20

DST Test Number: 2



Tridaxx Testing, Inc

Ref No: 34550

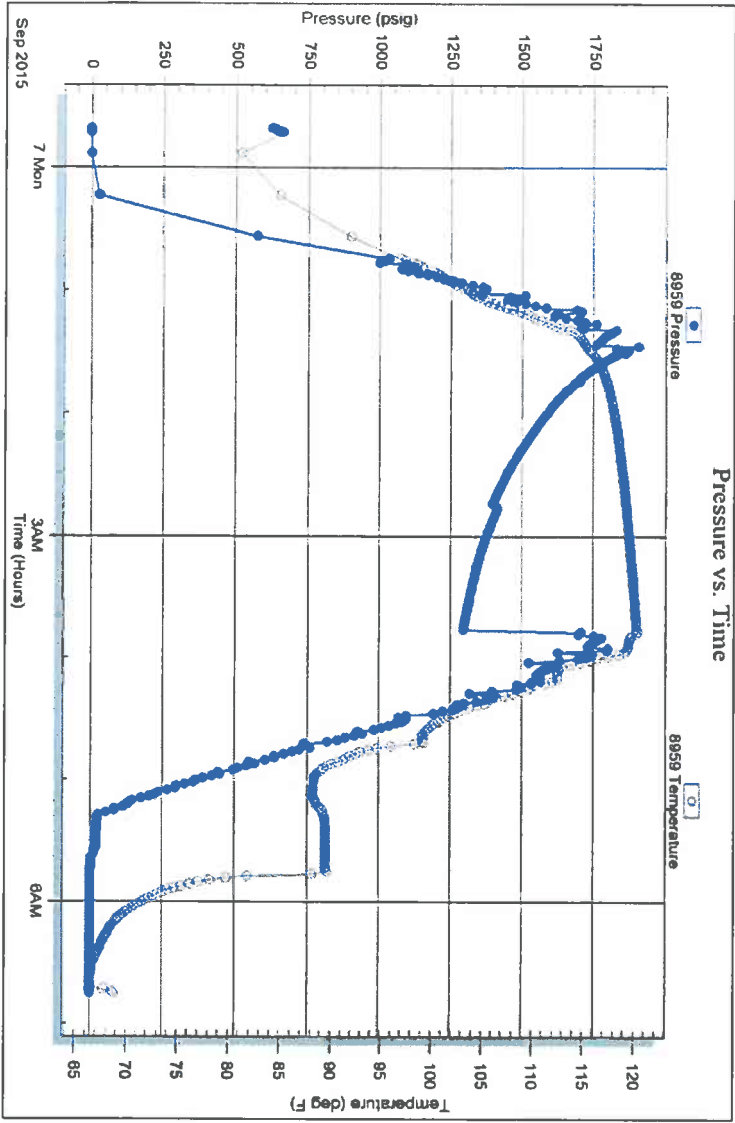
Printed: 2015.09.07 @ 07:14:16

Serial # 8959

Below (Stratigue) Energy, LLC

Letter #1-25-15-20

DST Test Number 2

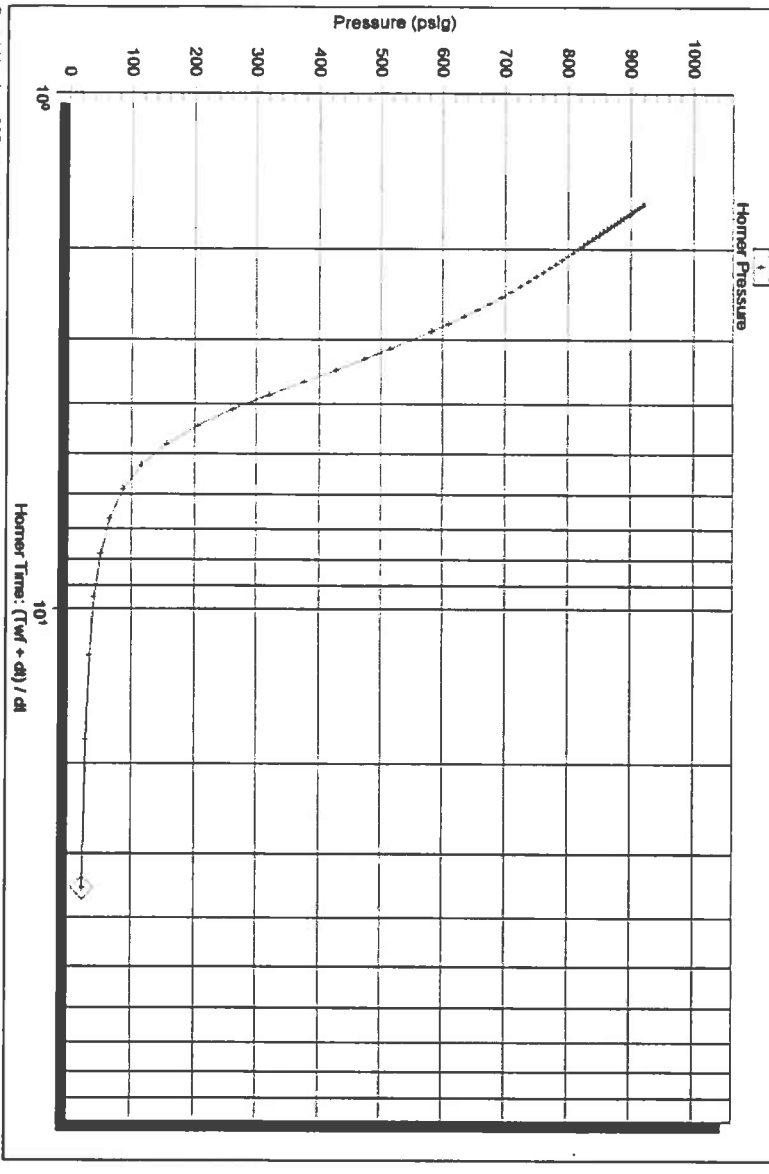


Tracode Testing, Inc

Ref No. 34550

Printed: 2015.09.07 @ 07:14:16

Horner Plot



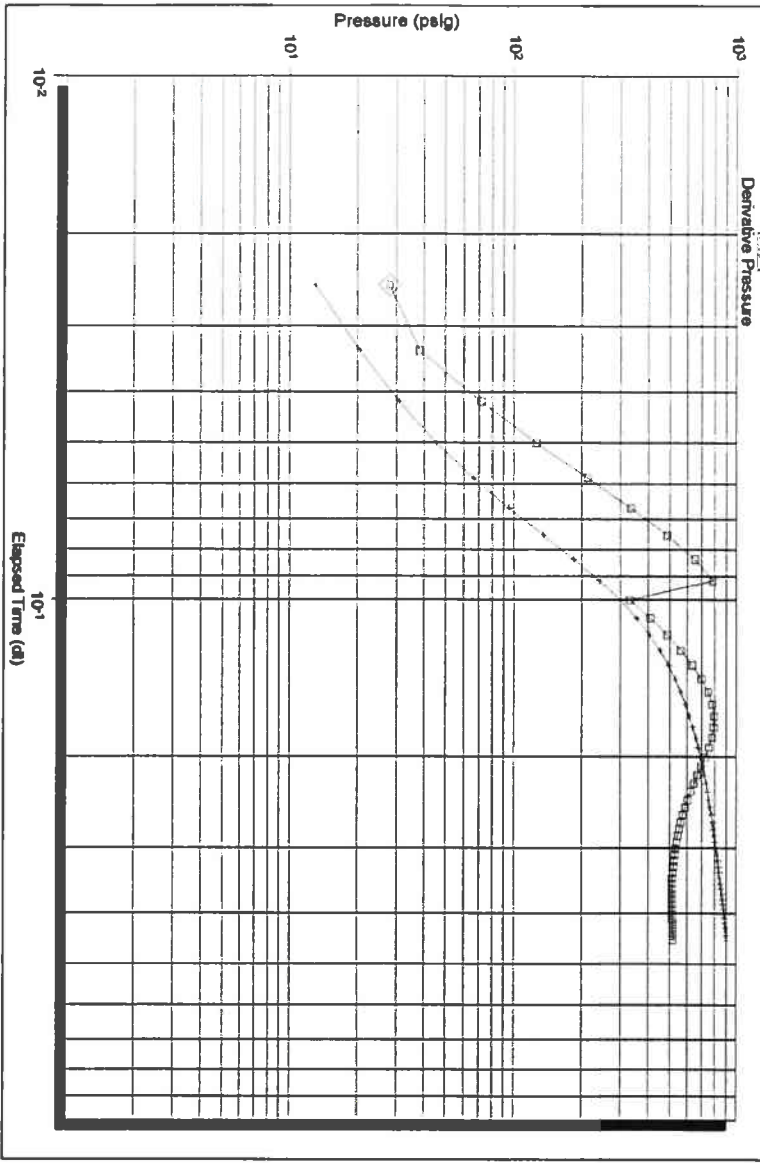
Serial Number: 6651 (Inside)

P = :

Slope (m) : kpa/log cycle

Flow Cycle: 1

Log-Log and Pseudo-Derivative



Serial Number 6651 (inside)

Flow Cycle: 1