



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1271544
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
-----------------------------------	-----------------	---

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: _____



1271544

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
--	---

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
----------------	-------	---------	------------	---

Date of First, Resumed Production, SWD or ENHR.	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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--	--	---

Form	ACO1 - Well Completion
Operator	Palomino Petroleum, Inc.
Well Name	H3 1
Doc ID	1271544

All Electric Logs Run

Compensated Density Neutron
Micro Resistivity
Dual Induction
Borehole Compensated Sonic

Form	ACO1 - Well Completion
Operator	Palomino Petroleum, Inc.
Well Name	H3 1
Doc ID	1271544

Tops

Name	Top	Datum
Anhy.	1807	(+714)
Base Anhy.	1846	(+675)
Heebner	3856	(-1335)
BKC	4224	(-1703)
Marmaton	4280	(-1759)
Ft. Scott	4410	(-1889)
Miss.	4509	(-1988)
LTD	4650	(-2129)



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

OCT 22 2015

Date: 10/20/2015
 Invoice # 1905 1852

P.O.#:

Due Date: 11/19/2015

Division: Russell

Invoice

Contact:

Palomino Petroleum Inc
Address/Job Location:
 Palomino Petroleum Inc
 4924 SE 84th
 Newton Ks 67114

Reference:

H 3 1

Description of Work:

SURFACE JOB

Services / Items Included:

	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 606.13	No				
Common-Class A	120	\$ 1,652.19	Yes				
Calcium Chloride	6	\$ 276.99	Yes				
POZ Mix-Standard	30	\$ 174.18	Yes				
Bulk Truck Matl-Material Service Charge	159	\$ 131.88	No				
Pump Truck Mileage-Job to Nearest Camp	11	\$ 50.18	No				
Premium Gel (Bentonite)	3	\$ 40.51	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	11	\$ 31.93	No				

Invoice Terms:

Net 30

SubTotal: \$ 2,963.99

Discount Available ONLY if Invoice is Paid & Received
 within listed terms of invoice: \$ (74.10)

SubTotal for Taxable Items: \$ 2,090.27

SubTotal for Non-Taxable Items: \$ 799.62

Total: \$ 2,889.89

Tax: \$ 156.77

7.50% Ness County Sales Tax

Amount Due: \$ 3,046.66

Applied Payments:

Balance Due: \$ 3,046.66

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

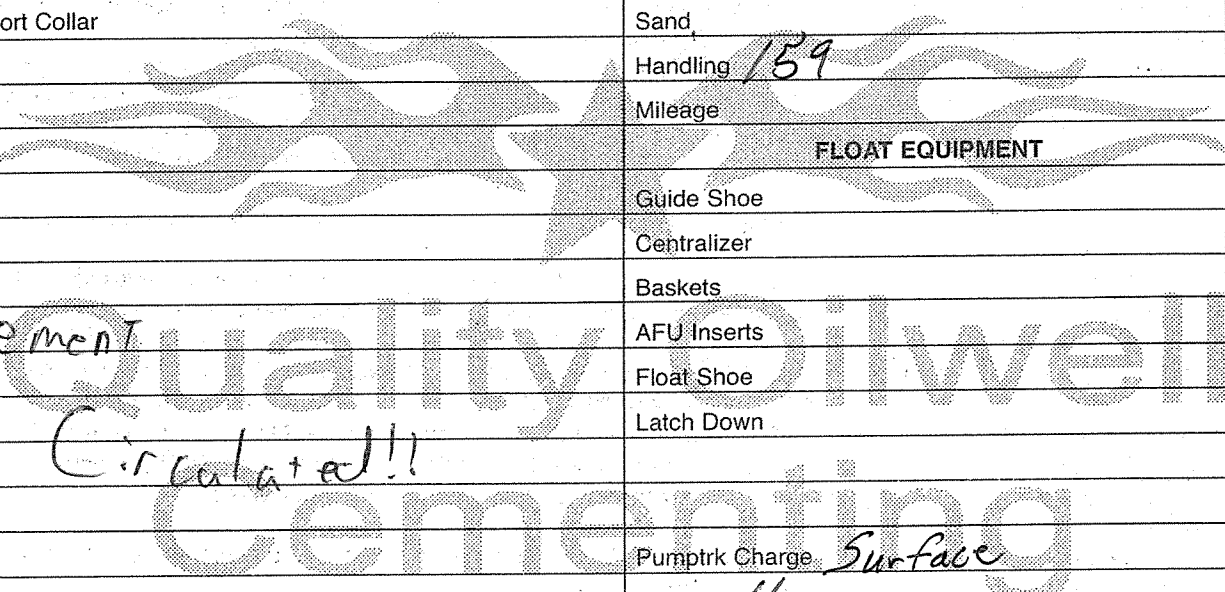
Home Office P.O. Box 32 Russell, KS 67665

No. 1852

Date	Sec.	Twp.	Range	County	State	On Location	Finish
10-20-15	5	19	25	Ness	KS		1:30 PM
Lease #3				Well No. #1		Location Ness City 8W 1/2 S 1W S on Trail	
Contractor WW				Owner		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. 216'		Charge To		Palomino Petroleum	
Csg. 8 5/8		Depth 216'		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. 20'		Shoe Joint		Cement Amount Ordered 150 can 3% cc 2% Gal			
Meas Line		Displace 13 bbl					
EQUIPMENT				Common 120			
Pumptrk 18 No.		Cement Helper Travis		Poz. Mix 30			
Bulktrk 15 No.		Driver Billy		Gel. 3			
Bulktrk PU No.		Driver Brett		Calcium 6			
JOB SERVICES & REMARKS				Hulls			
Remarks:				Salt			
Rat Hole				Flowseal			
Mouse Hole				Kol-Seal			
Centralizers				Mud CLR 48			
Baskets				CFL-117 or CD110 CAF 38			
D/V or Port Collar				Sand			
				Handling 159			
				Mileage			
				FLOAT EQUIPMENT			
				Guide Shoe			
				Centralizer			
				Baskets			
				AFU Inserts			
				Float Shoe			
				Latch Down			
				Pumptrk Charge Surface			
				Mileage 11			
				Tax			
				Discount			
				Total Charge			
X Signature <i>[Signature]</i>							

Cement

Circulated!!



RECEIVED

OCT 30 2015

Date: 10/27/2015
Invoice # 1647

P.O.#:

Due Date: 11/26/2015

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:

Palomino Petroleum Inc

Address/Job Location:

Palomino Petroleum Inc

4924 SE 84th

Newton Ks 67114

Reference:

H 3 1

Description of Work:

PLUG JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 606.13	Yes				
Common-Class A	138	\$ 1,900.02	Yes				
POZ Mix-Standard	92	\$ 534.14	Yes				
Bulk Truck Matl-Material Service Charge	238	\$ 197.40	Yes				
Premium Gel (Bentonite)	8	\$ 108.02	Yes				
Flo Seal	57	\$ 94.55	Yes				
Pump Truck Mileage-Job to Nearest Camp	11	\$ 50.18	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	11	\$ 31.93	Yes				

Invoice Terms:

Net 30

SubTotal: \$ 3,522.38

Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (88.06)

SubTotal for Taxable Items: \$ 3,434.32

SubTotal for Non-Taxable Items: \$ -

Total: \$ 3,434.32

Tax: \$ 257.57

7.50% Ness County Sales Tax

Amount Due: \$ 3,691.89

Applied Payments:

Balance Due: \$ 3,691.89

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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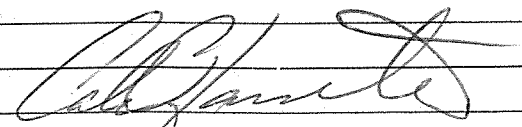
QUALITY OILWELL CEMENTING, INC.

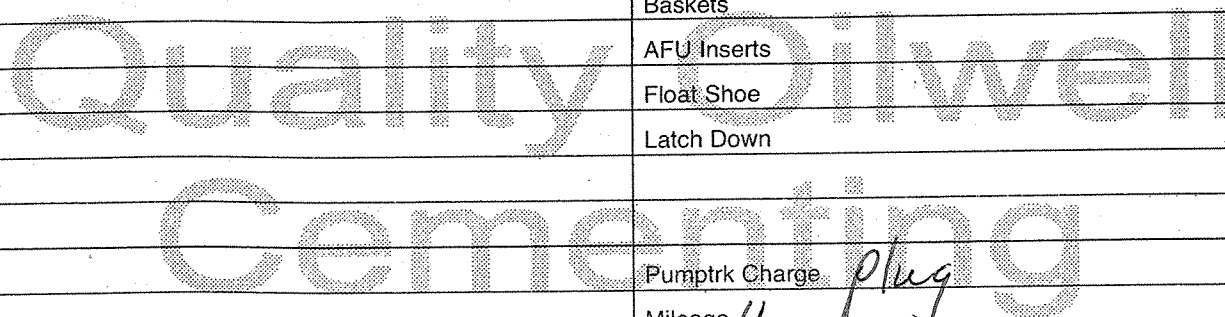
Federal Tax I.D.# 20-2886107

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

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

No. 1647

Date	10-27-15	Sec.	5	Twp.	19	Range	25	County	Ness	State	Ks	On Location		Finish	11:00 am
Lease	H3		Well No.	1		Owner	WIS Follow trail to Rig 4.9 miles								
Contractor	WW 12					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.									
Type Job	Plug					Charge To	Palamino Petroleum								
Hole Size	17 7/8"		T.D.	4650'		Street									
Csg.			Depth			City	State								
Tbg. Size	4 1/2" D.P.		Depth	1860'		The above was done to satisfaction and supervision of owner agent or contractor.									
Tool			Depth			Cement Amount Ordered	230 5x 60/40 4% Gel 1/4# 1/2#								
Cement Left in Csg.			Shoe Joint												
Meas Line			Displace	H20/mud											
EQUIPMENT						Common	138								
Pumptrk	18	No.	Cement Helper	Travis		Poz. Mix	92								
Bulktrk	9	No.	Driver	Rick		Gel.	8								
Bulktrk	p.u.	No.	Driver	Craig		Calcium									
JOB SERVICES & REMARKS						Hulls									
Remarks:	1860' - 50 5x					Salt									
Rat Hole	1020' - 80 5x					Flowseal	57#								
Mouse Hole	270' - 50 5x					Kol-Seal									
Centralizers	60' - 20 5x					Mud CLR 48'									
Baskets	Rathole - 30 5x					CFL-117 or CD110 CAF 38									
D/V or Port Collar						Sand									
Cement did Circulate						Handling	238								
						Mileage									
FLOAT EQUIPMENT						Guide Shoe									
						Centralizer									
						Baskets									
						AFU Inserts									
						Float Shoe									
						Latch Down									
						Pumptrk Charge	plug								
						Mileage	11								
						Tax									
						Discount									
						Total Charge									



DIAMOND TESTING

General Information Report

General Information

Company Name PALOMINO PETROLEUM, INC.
Contact KLEE WATCHOUS
Well Name H3 #1
Unique Well ID DST #1, MISSISSIPPIAN, 4434-4523
Surface Location SEC 5-19S-25W, NESS CO. KS.
Field WILDCAT
Well Type Vertical
Test Type CONVENTIONAL
Formation DST #1, MISSISSIPPIAN
Well Fluid Type 01 Oil

Representative TIM VENTERS
Well Operator PALOMINO PETROLEUM, INC.
Report Date 2015/10/26
Prepared By TIM VENTERS
Qualified By AARON YOUNG

Start Test Date 2015/10/26
Final Test Date 2015/10/26

Start Test Time 01:51:00
Final Test Time 10:49:00

Test Recovery:

RECOVERED: 175' GAS IN PIPE

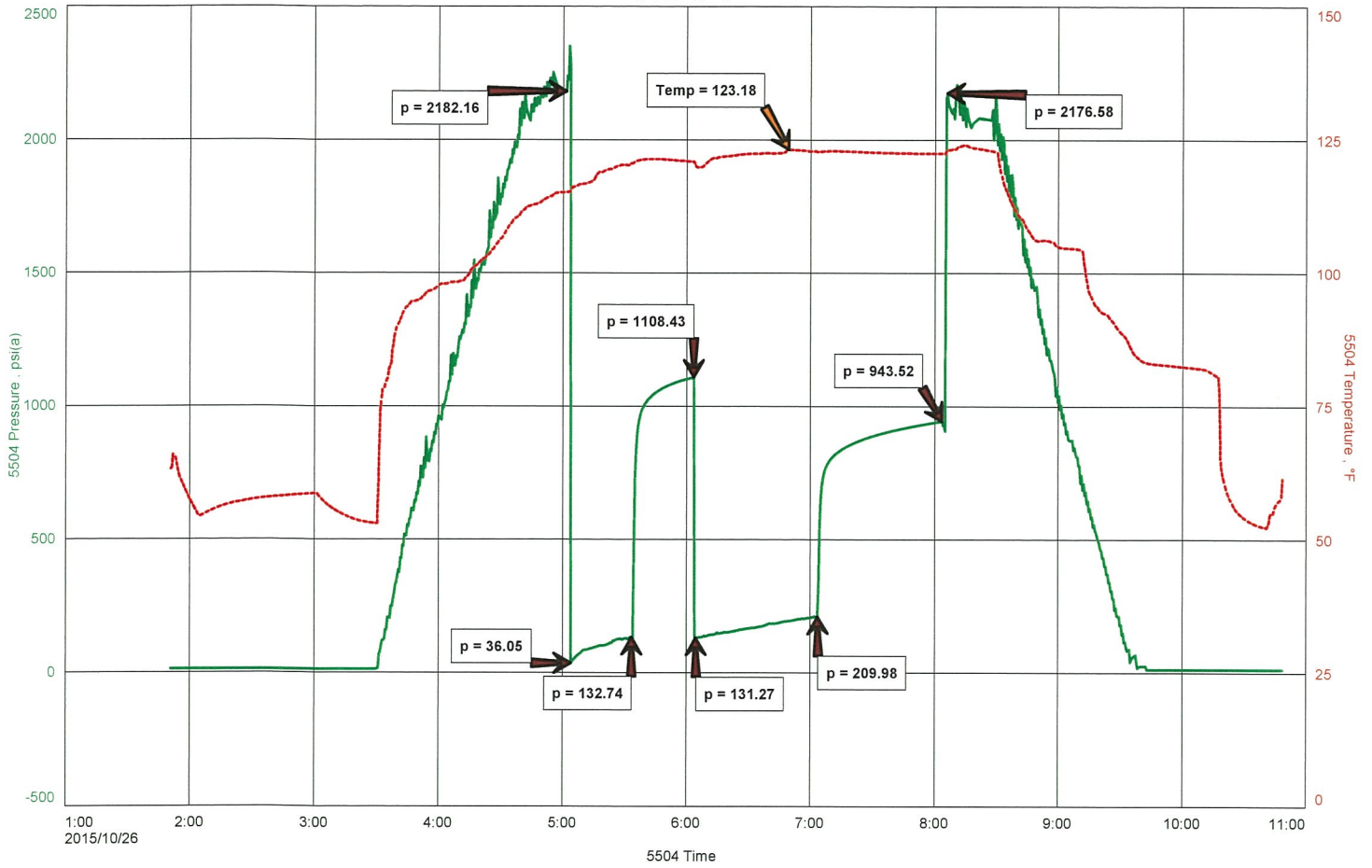
160' GO, 3% GAS, 97% OIL, GRAVITY: 38
110' G,OCM, 5% GAS, 29% OIL, 66% MUD
185' G,HMCO, 13% GAS, 52% OIL, 35% MUD
455' TOTAL FLUID

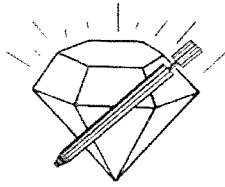
TOOL SAMPLE: 10% GAS, 35% OIL, 55% MUD

PALOMINO PETROLEUM, INC.
DST #1, MISSISSIPPIAN, 4434-4523
Start Test Date: 2015/10/26
Final Test Date: 2015/10/26

H3 #1
Formation: DST #1, MISSISSIPPIAN
Pool: WILDCAT
Job Number: T508

H3 #1





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: H31DST1

TIME ON: 01:51
TIME OFF: 10:49

Company PALOMINO PETROLEUM, INC. Lease & Well No. H3 #1
Contractor VW DRILLING, LLC RIG #12 Charge to PALOMINO PETROLEUM, INC.
Elevation 2521 KB Formation MISSISSIPPIAN Effective Pay _____ Ft. Ticket No. T508
Date 10-26-15 Sec. 5 Twp. 19 S Range 25 W County NESS State KANSAS
Test Approved By AARON YOUNG Diamond Representative TIMOTHY T. VENTERS

Formation Test No. 1 Interval Tested from 4434 ft. to 4523 ft. Total Depth 4523 ft.
Packer Depth 4429 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth 4434 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4415 ft. Recorder Number 5504 Cap. 5,000 P.S.I.
Bottom Recorder Depth (Outside) 4520 ft. Recorder Number 11029 Cap. 5,025 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEMICAL Viscosity 51 Drill Collar Length 122 ft. I.D. 2 1/4 in.
Weight 9.6 Water Loss 9.2 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
Chlorides 3,400 P.P.M. Drill Pipe Length 4279 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number 2 Test Tool Length 33 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NO Reversed Out NO Anchor Length 26 ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. ^{63' DP IN ANCHOR} Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: WEAK 1/2 INCH BLOW, BUILDING, REACHING BOB 27 MIN. (NO BB)
2nd Open: WEAK SURFACE BLOW, BUILDING, REACHING BOB 24 MIN. (NO BB)

Recovered 175 ft. of GAS IN PIPE
Recovered 160 ft. of GO, 3% GAS, 97% OIL, GRAVITY: 38
Recovered 110 ft. of G,OCM, 5% GAS, 29% OIL, 66% MUD
Recovered 185 ft. of G,HMCO, 13% GAS, 52% OIL, 35% MUD

Recovered <u>455</u> ft. of <u>TOTAL FLUID</u>	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
TOOL SAMPLE: <u>10% GAS, 35% OIL, 55% MUD</u>	Total

Time Set Packer(s) 5:03 AM ^{A.M.} P.M. Time Started Off Bottom 8:03 AM ^{A.M.} P.M. Maximum Temperature 123 deg.
Initial Hydrostatic Pressure..... (A) 2182 P.S.I.
Initial Flow Period..... Minutes 30 (B) 36 P.S.I. to (C) 133 P.S.I.
Initial Closed In Period..... Minutes 30 (D) 1108 P.S.I.
Final Flow Period..... Minutes 60 (E) 131 P.S.I. to (F) 210 P.S.I.
Final Closed In Period..... Minutes 60 (G) 944 P.S.I.
Final Hydrostatic Pressure..... (H) 2177 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.

DIAMOND TESTING

General Information Report

General Information

Company Name PALOMINO PETROLEUM, INC.
Contact KLEE WATCHOUS
Well Name H3 #1
Unique Well ID DST #2, MISSISSIPPIAN, 4520-4531
Surface Location SEC 5-19S-25W, NESS CO. KS.
Field WILDCAT
Well Type Vertical
Test Type CONVENTIONAL
Formation DST #2, MISSISSIPPIAN, 4520-4531
Well Fluid Type 01 Oil

Representative TIM VENTERS
Well Operator PALOMINO PETROLEUM, INC.
Report Date 2015/10/27
Prepared By TIM VENTERS
Qualified By AARON YOUNG

Start Test Date 2015/10/26
Final Test Date 2015/10/27

Start Test Time 17:18:00
Final Test Time 01:21:00

Test Recovery:

RECOVERED: 125' SMCO, 98% OIL, 2% MUD
20' O&MCW, 22% OIL, 52% WATER, 26% MUD
170' SO&MCW, 4% OIL, 85% WATER, 11% MUD
315' TOTAL FLUID

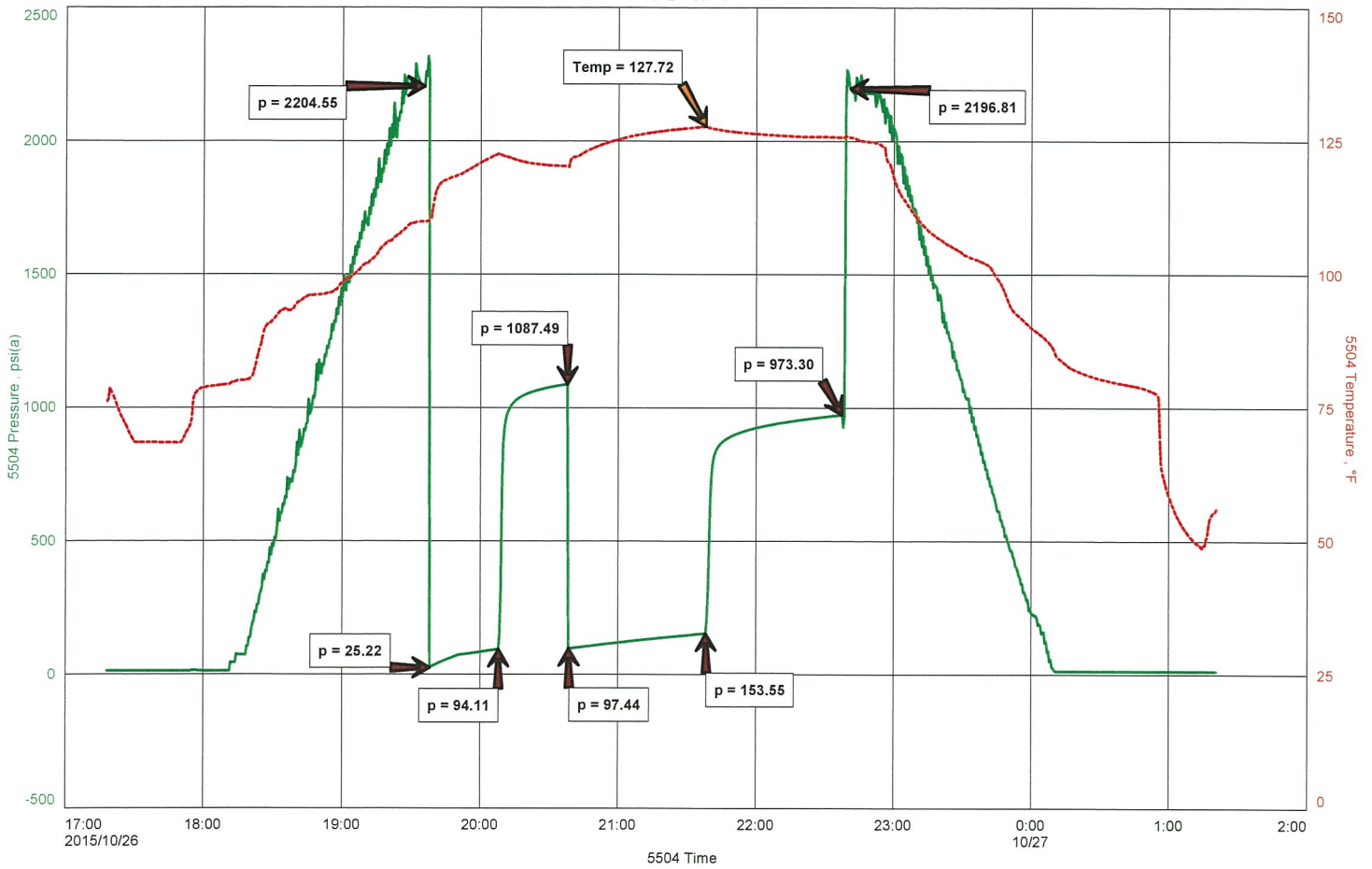
TOOL SAMPLE: 50% OIL, 32% WATER, 18% MUD

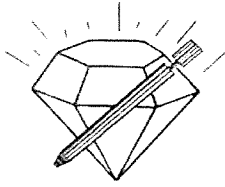
CHLORIDES: 15,000 ppm
PH: 7.0
RW: .57 @ 65 deg.

PALOMINO PETROLEUM, INC.
DST #2, MISSISSIPPIAN, 4520-4531
Start Test Date: 2015/10/26
Final Test Date: 2015/10/27

H3 #1
Formation: DST #2, MISSISSIPPIAN, 4520-4531
Pool: WILDCAT
Job Number: T509

H3 #1





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: H31DST2

TIME ON: 17:18 10-26-15
TIME OFF: 01:21 10-27-15

Company PALOMINO PETROLEUM, INC. Lease & Well No. H3 #1
Contractor VW DRILLING, LLC RIG #12 Charge to PALOMINO PETROLEUM, INC.
Elevation 2521 KB Formation MISSISSIPPIAN Effective Pay _____ Ft. Ticket No. T509
Date 10-26-15 Sec. 5 Twp. 19 S Range 25 W County NESS State KANSAS
Test Approved By AARON YOUNG Diamond Representative TIMOTHY T. VENTERS

Formation Test No. 2 Interval Tested from 4520 ft. to 4531 ft. Total Depth 4531 ft.
Packer Depth 4515 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth 4520 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4501 ft. Recorder Number 5504 Cap. 5,000 P.S.I.
Bottom Recorder Depth (Outside) 4528 ft. Recorder Number 11029 Cap. 5,025 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEMICAL Viscosity 48 Drill Collar Length 122 ft. I.D. 2 1/4 in.
Weight 9.5 Water Loss 9.2 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
Chlorides 4,900 P.P.M. Drill Pipe Length 4365 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number 2 Test Tool Length 33 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NO Reversed Out NO Anchor Length 11 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, BUILDING TO 8 1/2 INCHES. (NO BB)
2nd Open: WEAK SURFACE BLOW, BUILDING, REACHING BOB 54 MIN. (NO BB)

Recovered 125 ft. of SMCO, 98% OIL, 2% MUD, GRAVITY: 35
Recovered 20 ft. of O&MCW, 22% OIL, 52% WATER, 26% MUD
Recovered 170 ft. of SO&MCW, 4% OIL, 85% WATER, 11% MUD
Recovered 315 ft. of TOTAL FLUID

Recovered _____ ft. of _____	CHLORIDES: 15,000 ppm	Price Job
Recovered _____ ft. of _____	PH: 7.0	Other Charges
Remarks: _____	RW: .57 @ 65 deg.	Insurance
TOOL SAMPLE: 50% OIL, 32% WATER, 18% MUD		Total

Time Set Packer(s) 7:38 PM A.M. P.M. Time Started Off Bottom 10:38 PM A.M. P.M. Maximum Temperature 128 deg.
Initial Hydrostatic Pressure..... (A) 2205 P.S.I.
Initial Flow Period..... Minutes 30 (B) 25 P.S.I. to (C) 94 P.S.I.
Initial Closed In Period..... Minutes 30 (D) 1087 P.S.I.
Final Flow Period..... Minutes 60 (E) 97 P.S.I. to (F) 154 P.S.I.
Final Closed In Period..... Minutes 60 (G) 973 P.S.I.
Final Hydrostatic Pressure..... (H) 2197 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