



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1271665
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: _____



1271665

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

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Palomino Petroleum, Inc.
Well Name	Jon-Maxine Trust 1
Doc ID	1271665

Tops

Name	Top	Datum
Anhy.	1900	(+631)
Base Anhy.	1930	(+596)
Heebner	3864	(-1338)
Lansing	3902	(-1376)
BKC	4206	(-1680)
Ft. Scott	4408	(-1882)
Miss.	4546	(-2020)
LTD	4633	(-2107)



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: 7/6/2015
 Invoice # 1472
 P.O.#:
 Due Date: 8/5/2015
 Division: *Russell*

RECEIVED
 JUL 10 2015

Invoice

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

Reference:
 JON-MAXINE UNIT 1

Description of Work:
 SURFACE JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 636.07	No				
Common-Class A	120	\$ 1,733.78	Yes				
Calcium Chloride	6	\$ 290.67	Yes				
POZ Mix-Standard	30	\$ 182.78	Yes				
Bulk Truck Matl-Material Service Charge	159	\$ 138.39	No				
Pump Truck Mileage-Job to Nearest Camp	20	\$ 95.74	No				
Bulk Truck Mileage-Job to Nearest Bulk Plant	20	\$ 60.93	No				
Premium Gel (Bentonite)	3	\$ 42.51	Yes				

Invoice Terms:

Net 30

SubTotal: \$ 3,180.86
 Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (79.52)

SubTotal for Taxable Items: \$ 2,193.49
 SubTotal for Non-Taxable Items: \$ 907.84

6.15% Ness County Sales Tax

Total: \$ 3,101.34
 Tax: \$ 134.90

Thank You For Your Business!

Amount Due: \$ 3,236.24
Applied Payments:
Balance Due: \$ 3,236.24

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. 1472

Date	7-6-15	Sec.	25	Twp.	16	Range	25	County	NPSS	State	KS	On Location		Finish	12:00 PM
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Location Arnold E Sinto

Lease	<u>Sen-Maxine Unit</u>		Well No.	<u>1</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>WW #6</u>					Charge To	<u>Pabmin petroleum</u>	
Type Job	<u>Surface</u>					Street		
Hole Size	<u>12 1/4</u>	T.D.	<u>217</u>			City	State	
Csg.	<u>8 5/8</u>	Depth	<u>216</u>			The above was done to satisfaction and supervision of owner agent or contractor.		
Tbg. Size		Depth				Cement Amount Ordered <u>150 80/20 3/11 21.6 EL</u>		
Tool		Depth						
Cement Left in Csg.	<u>15'</u>	Shoe Joint						

Meas Line Displace 12 3/4 BBL

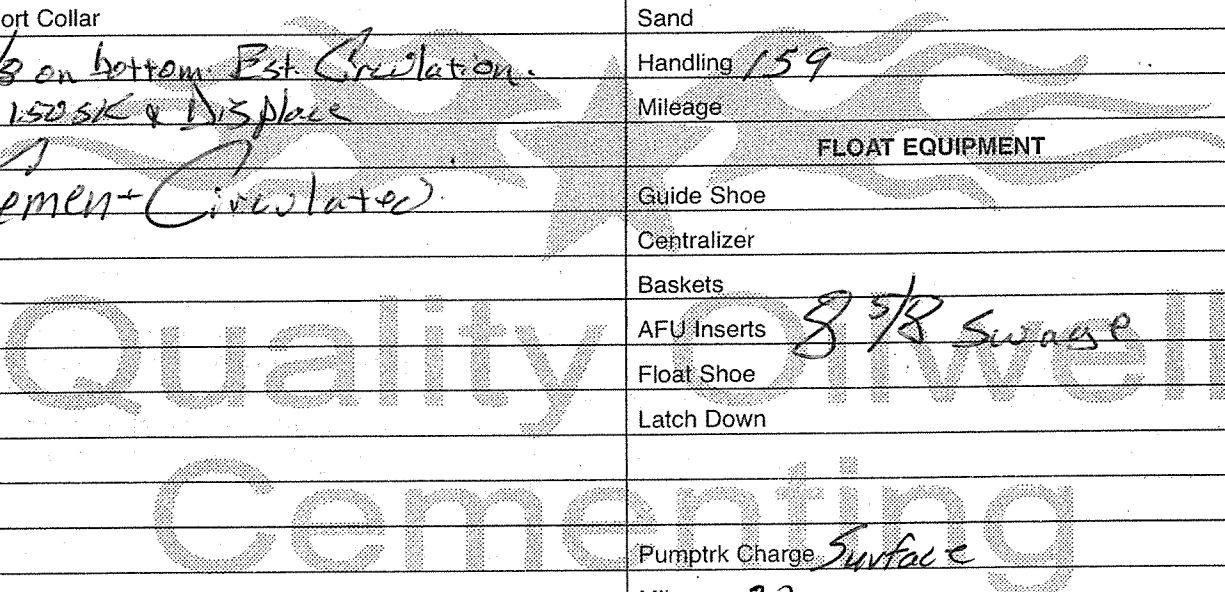
EQUIPMENT				Common	<u>120</u>
Pumptrk	<u>18</u> No.	Cementer	<u>Craig</u>	Poz. Mix	<u>30</u>
		Helper	<u>Travis</u>	Gel.	<u>3</u>
Bulktrk	No.	Driver		Calcium	<u>6</u>
Bulktrk	<u>9</u> No.	Driver	<u>Lennie</u>		

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
<u>8 5/8 on bottom Est. Circulation.</u>		Handling <u>159</u>
<u>Mix 150 SK & Displace</u>		Mileage

FLOAT EQUIPMENT	
<u>Cemen + Circulator</u>	Guide Shoe
	Centralizer
	Baskets
	AFU Inserts <u>8 5/8 Swase</u>
	Float Shoe
	Latch Down

Pumptrk Charge	<u>Surface</u>
Mileage	<u>20</u>

X Signature <u>Mark Basse</u>	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: 7/13/2015
 Invoice # 1168

RECEIVED

P.O.#:

JUL 17 2015

Due Date: 8/12/2015

Division: *Russell*

Invoice

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

Reference:
 JON MAXINE TRUST 1

Description of Work:
 PLUG JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 606.13	Yes				
Common-Class A	168	\$ 2,313.06	Yes				
POZ Mix-Standard	112	\$ 650.26	Yes				
Bulk Truck Matl-Material Service Charge	290	\$ 240.53	Yes				
Premium Gel (Bentonite)	10	\$ 135.03	Yes				
Flo Seal	70	\$ 116.12	Yes				
Pump Truck Mileage-Job to Nearest Camp	20	\$ 91.24	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	20	\$ 58.06	Yes				

Invoice Terms:

Net 30

SubTotal: \$ 4,210.43

Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$ (105.26)

SubTotal for Taxable Items: \$ 4,105.17

SubTotal for Non-Taxable Items: \$ -

Total: \$ 4,105.17

Tax: \$ 252.47

6.15% Ness County Sales Tax

Thank You For Your Business!

Amount Due: \$ 4,357.64
Applied Payments:
Balance Due: \$ 4,357.64

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. 1168

Date	Sec.	Twp.	Range	County	State	On Location	Finish
7-13-15	25	16	25	Ness	KS		7:00 AM
				Location Arnold Esinto			

Lease	Well No.	Owner	
500-maxine trust	1	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	Type Job	Charge To	
WV6	Plug	Palomino Petroleum	
Hole Size	T.D.	Street	
7 7/8	46350		
Csg. D.P.	Depth	City	
4 1/2	1940	State	
Tbg. Size	Depth	The above was done to satisfaction and supervision of owner agent or contractor.	
		Cement Amount Ordered 280sl 60/40 4% gel 1/4 #10W	
Cement Left in Csg.	Shoe Joint		

Meas Line Displace *water*

EQUIPMENT

Pumptrk	No.	Cementer	Common
18		Helper	168
Bulktrk	No.	Driver	Poz. Mix
21		Driver	112
Bulktrk	No.	Driver	Gel.
PH		Driver	10
		Driver	Calcium

JOB SERVICES & REMARKS

Remarks:	Salt
Rat Hole	Flowseal
305sl	70#
Mouse Hole	Kol-Seal
Centralizers	Mud CLR 48
Baskets	CFL-117 or CD110 CAF 38
D/V or Port Collar	Sand
1st 1940' 50sl	Handling
	290
	Mileage

FLOAT EQUIPMENT

2nd 1150' 80sl	Guide Shoe
3rd 550' 50sl	Centralizer
	Baskets
4th 250' 50sl	AFU Inserts
	Float Shoe
5th 60' 20sl	Latch Down

Rat 305sl	Pumptrk Charge
	plug
	Mileage
	120

Tax
Discount
Total Charge

X Signature *Mark Ruge*

DIAMOND TESTING

General Information Report

General Information

Company Name PALOMINO PETROLEUM, INC.
Contact KLEE WATCHOUS
Well Name JON-MAXINE TRUST #1
Unique Well ID DST #2, MISSISSIPPIAN, 4447-4552
Surface Location SEC 25-16S-25W. NESS CO. KS.
Field ARNOLD EAST
Well Type Vertical
Test Type STRADDLE
Formation DST #2, MISSISSIPPIAN, 4447-4552
Well Fluid Type 01 Oil

Representative TIM VENTERS
Well Operator PALOMINO PETROLEUM, INC.
Report Date 2015/07/12
Prepared By TIM VENTERS
Qualified By JERRY SMITH

Start Test Date 2015/07/12
Final Test Date 2015/07/12

Start Test Time 13:10:00
Final Test Time 20:59:00

Test Recovery:

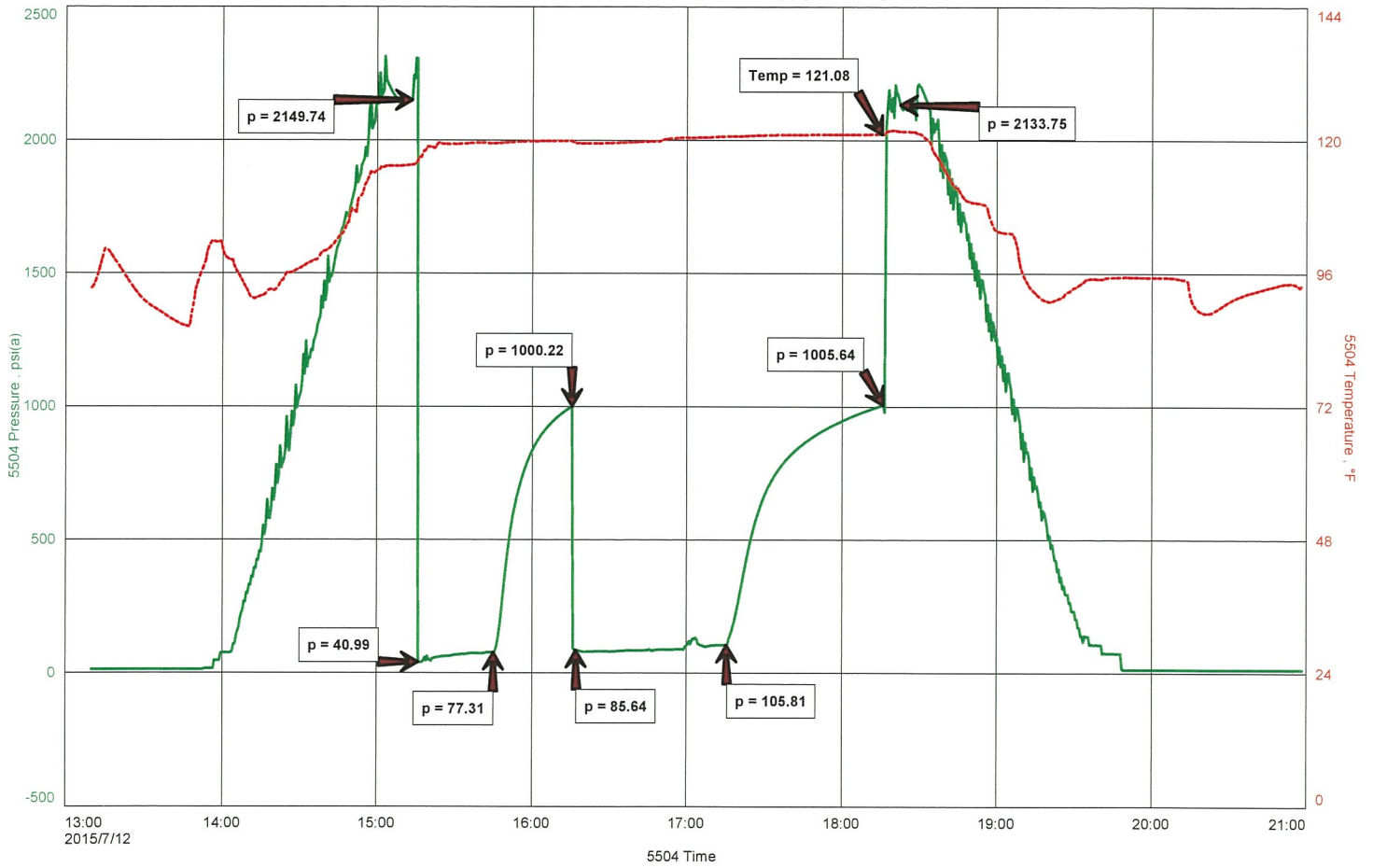
RECOVERED: 50' GAS IN PIPE
70' GO, 6% GAS, 94% OIL, GRAVITY: 38
10' G,MCO, 5% GAS, 69% OIL, 26% MUD
120' G,OCM, 9% GAS, 32% OIL, 59% MUD
200' TOTAL FLUID

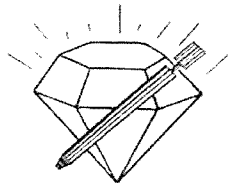
TOOL SAMPLE: 8% GAS, 62% OIL, 30% MUD

PALOMINO PETROLEUM, INC.
DST #2, MISSISSIPPIAN, 4447-4552
Start Test Date: 2015/07/12
Final Test Date: 2015/07/12

JON-MAXINE TRUST #1
Formation: DST #2, MISSISSIPPIAN, 4447-4552
Pool: ARNOLD EAST
Job Number: T478

JON-MAXINE TRUST #1





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

TIME ON: 13:10

TIME OFF: 20:59

DRILL-STEM TEST TICKET

FILE: JON-MAXINETRUST1DST2

Company PALOMINO PETROLEUM, INC. Lease & Well No. JON-MAXINE #1
 Contractor WW DRILLING, LLC RIG #6 Charge to PALOMINO PETROLEUM, INC.
 Elevation 2526 Formation MISSISSIPPIAN Effective Pay _____ Ft. Ticket No. T478
 Date 7-12-15 Sec. 25 Twp. 16 S Range 25 W County NESS State KANSAS
 Test Approved By JERRY SMITH Diamond Representative TIMOTHY T. VENTERS

Formation Test No. 2 Interval Tested from 4447 ft. to 4552 ft. Total Depth 4635 ft.
 Packer Depth 4442 ft. Size 6 3/4 in. Packer depth 4552 ft. Size 6 3/4 in.
 Packer Depth 4447 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4428 ft. Recorder Number 5504 Cap. 5,000 P.S.I.
 Bottom Recorder Depth (Outside) 4549 ft. Recorder Number 13819 Cap. 5,025 P.S.I.
 Below Straddle Recorder Depth 4632 ft. Recorder Number 11029 Cap. 5,025 P.S.I.
 Mud Type CHEMICAL Viscosity 47 Drill Collar Length 122 ft. I.D. 2 1/4 in.
 Weight 9.5 Water Loss 12.4 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
 Chlorides 4,100 P.P.M. Drill Pipe Length 4292 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 10 ft. Size 4 1/2-FH in.
 Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. 95' DP IN ANCHOR Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: WEAK 1/2 INCH BLOW, BUILDING TO 5 INCHES. (NO BB)

2nd Open: VERY WEAK SURFACE BLOW, BUILDING TO 8 INCHES. (NO BB)

Recovered <u>50</u> ft. of <u>GAS IN PIPE</u>	
Recovered <u>70</u> ft. of <u>GO, 6% GAS, 94% OIL, GRAVITY: 38</u>	
Recovered <u>10</u> ft. of <u>G,MCO, 5% GAS, 69% OIL, 26% MUD</u>	
Recovered <u>120</u> ft. of <u>G,OCM, 9% GAS, 32% OIL, 59% MUD</u>	
Recovered <u>200</u> ft. of <u>TOTAL FLUID</u>	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: _____	Insurance
TOOL SAMPLE: <u>8% GAS, 62% OIL, 30% MUD</u>	Total

Time Set Packer(s) 3:15 PM A.M. P.M. Time Started Off Bottom 6:15 PM A.M. P.M. Maximum Temperature 121 deg.

Initial Hydrostatic Pressure..... (A) 2150 P.S.I.
 Initial Flow Period..... Minutes 30 (B) 41 P.S.I. to (C) 77 P.S.I.
 Initial Closed In Period..... Minutes 30 (D) 1000 P.S.I.
 Final Flow Period..... Minutes 60 (E) 86 P.S.I. to (F) 106 P.S.I.
 Final Closed In Period..... Minutes 60 (G) 1006 P.S.I.
 Final Hydrostatic Pressure..... (H) 2134 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 JON-MAXINE TRUST #1
Unique Well ID DST #1, MISSISSIPPIAN, 4448-4535
Surface Location SEC 25-16S-25W, NESS CO. KS.
Field ARNOLD EAST
Well Type Vertical
Test Type CONVENTIONAL
Formation DST #1, MISSISSIPPIAN, 4448-4535
Well Fluid Type 01 Oil

Representative TIM VENTERS
Well Operator PALOMINO PETROLEUM, INC.
Report Date 2015/07/11
Prepared By TIM VENTERS
Qualified By JERRY SMITH

Start Test Date 2015/07/11
Final Test Date 2015/07/11

Start Test Time 14:05:00
Final Test Time 21:57:00

Test Recovery:

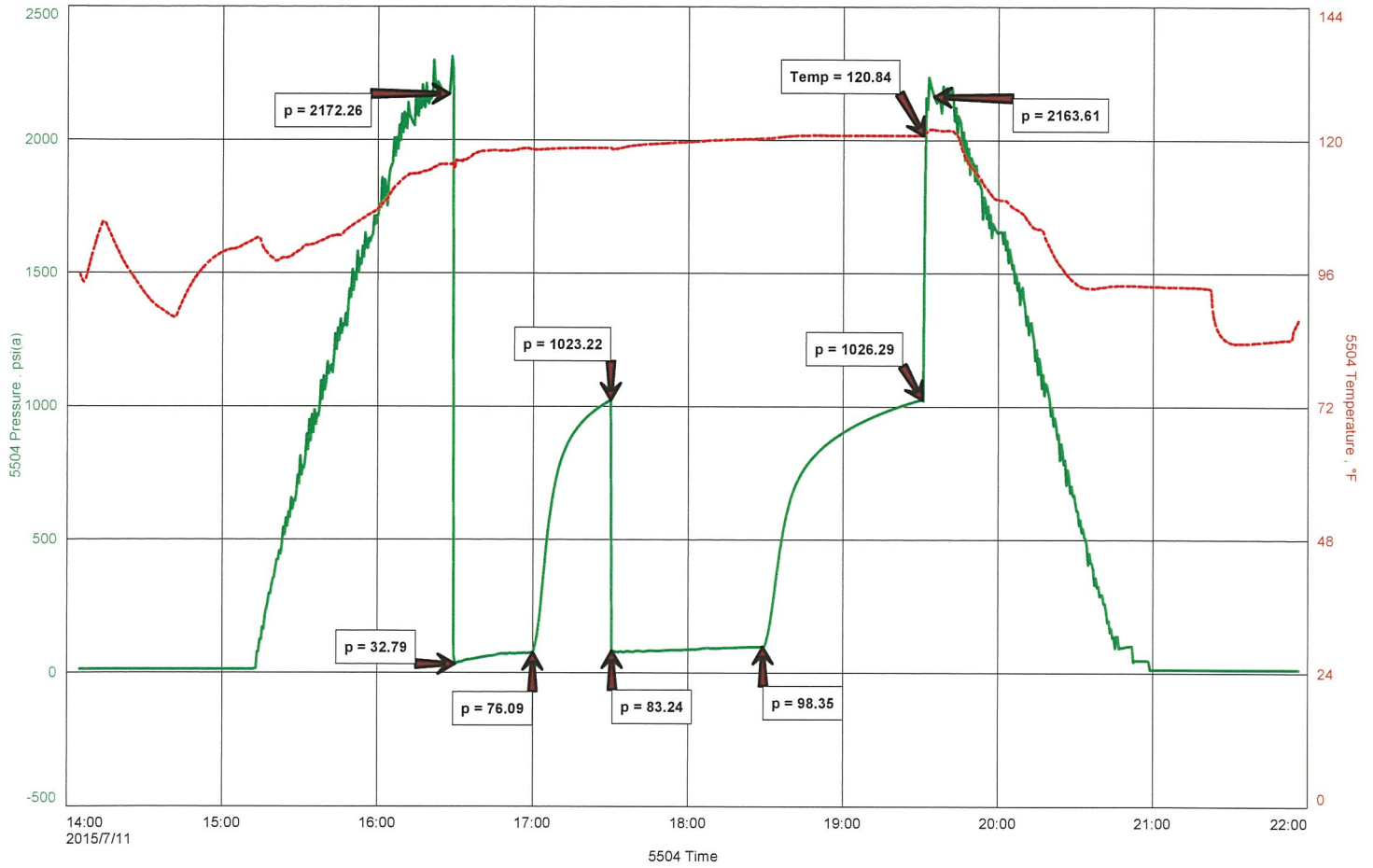
RECOVERED: 110' GAS IN PIPE
115' GO, 2% GAS, 98% OIL, GRAVITY: 39
30' G,MCO, 11% GAS, 62% OIL, 27% MUD
60' G,HOCM, 8% GAS, 37% OIL, 55% MUD
205' TOTAL FLUID

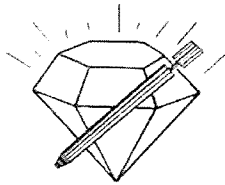
TOOL SAMPLE: 7% GAS, 53% OIL, 40% MUD

PALOMINO PETROLEUM, INC.
DST #1, MISSISSIPPIAN, 4448-4535
Start Test Date: 2015/07/11
Final Test Date: 2015/07/11

JON-MAXINE TRUST #1
Formation: DST #1, MISSISSIPPIAN, 4448-4535
Pool: ARNOLD EAST
Job Number: T477

JON-MAXINE TRUST #1





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

TIME ON: 14:05

TIME OFF: 21:57

DRILL-STEM TEST TICKET
 FILE: JON-MAXINETRUST1DST1

Company PALOMINO PETROLEUM, INC. Lease & Well No. JON-MAXINE #1

Contractor VW DRILLING, LLC RIG #6 Charge to PALOMINO PETROLEUM, INC.

Elevation 2526 Formation MISSISSIPPIAN Effective Pay _____ Ft. Ticket No. T477

Date 7-11-15 Sec. 25 Twp. _____ 16 S Range _____ 25 W County NESS State KANSAS

Test Approved By JERRY SMITH Diamond Representative TIMOTHY T. VENTERS

Formation Test No. 1 Interval Tested from 4448 ft. to 4535 ft. Total Depth 4535 ft.

Packer Depth 4443 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Packer Depth 4448 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4429 ft. Recorder Number 5504 Cap. 5,000 P.S.I.

Bottom Recorder Depth (Outside) 4532 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 38 Drill Collar Length 122 ft. I.D. 2 1/4 in.

Weight 9.4 Water Loss 12.0 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.

Chlorides 4,300 P.P.M. Drill Pipe Length 4293 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 23 ft. Size 4 1/2-FH in.

Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. ^{64' DP IN ANCHOR} Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: WEAK 1/4 INCH BLOW, BUILDING TO 6 INCHES. (NO BB)

2nd Open: VERY WEAK SURFACE BLOW, BUILDING TO 10 1/2 INCHES. (NO BB)

Recovered 110 ft. of GAS IN PIPE

Recovered 115 ft. of GO, 2% GAS, 98% OIL, GRAVITY: 39

Recovered 30 ft. of GIMCO, 11% GAS, 62% OIL, 27% MUD

Recovered 60 ft. of G,HOCM, 8% GAS, 37% OIL, 55% MUD

Recovered 205 ft. of TOTAL FLUID

Recovered _____ ft. of _____ Price Job

Remarks: _____ Other Charges

Insurance

TOOL SAMPLE: 7% GAS, 53% OIL, 40% MUD Total

Time Set Packer(s) 4:29 PM A.M. P.M. Time Started Off Bottom 7:29 PM A.M. P.M. Maximum Temperature 121 deg.

Initial Hydrostatic Pressure..... (A) 2172 P.S.I.

Initial Flow Period..... Minutes 30 (B) 33 P.S.I. to (C) 76 P.S.I.

Initial Closed In Period..... Minutes 30 (D) 1023 P.S.I.

Final Flow Period..... Minutes 60 (E) 83 P.S.I. to (F) 98 P.S.I.

Final Closed In Period..... Minutes 60 (G) 1026 P.S.I.

Final Hydrostatic Pressure..... (H) 2164 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.