

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

January 2018

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: _____

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 |
|---|---|------------------------------------|

| 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: | |
|----------------|-------|---------|------------|--|

| | |
|-----------|------------------------|
| Form | ACO1 - Well Completion |
| Operator | Griffin, Charles N. |
| Well Name | Rice 1 |
| Doc ID | 1287774 |

All Electric Logs Run

| |
|-----------------------------------|
| |
| Computer Porcessed Interpretation |
| Dual Comp Porosity Log |
| Dual Induction Log |
| Compensated Neutron Log |
| Compensated Density Log |

| | |
|-----------|------------------------|
| Form | ACO1 - Well Completion |
| Operator | Griffin, Charles N. |
| Well Name | Rice 1 |
| Doc ID | 1287774 |

Tops

| Name | Top | Datum |
|---------------|------|-------|
| Heebner | 3222 | -1359 |
| Toronto | 3238 | -1375 |
| Douglas | 3255 | -1392 |
| Brown Lime | 3360 | -1497 |
| Lansing | 3387 | -1524 |
| Base KC | 3646 | -1783 |
| Viola | 3708 | -1845 |
| Simpson Shale | 3774 | -1911 |



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 12928 A

DATE _____ TICKET NO. _____

| | | | | | | | | | |
|--|-----|--|-----|------------|-----|----------------------------|--------|----|------|
| DATE OF JOB 02-01-16 DISTRICT PRATT KS | | 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 Griffin Management | | LEASE Rice 1 WELL NO. | | | | | | | |
| ADDRESS | | COUNTY STAFFORD STATE KS | | | | | | | |
| CITY STATE | | SERVICE CREW Sullivan, Grant, Nystrom | | | | | | | |
| AUTHORIZED BY | | JOB TYPE: enw 8 5/8 Sulfur | | | | | | | |
| EQUIPMENT# | HRS | EQUIPMENT# | HRS | EQUIPMENT# | HRS | TRUCK CALLED | DATE | AM | TIME |
| | | | | | | | 2-1-16 | PM | 4:00 |
| | | | | | | ARRIVED AT JOB | | PM | 6:00 |
| 27463 | 30 | | | | | START OPERATION | | PM | 8:05 |
| 19918 | 25 | | | | | FINISH OPERATION | | PM | 9:30 |
| | | | | | | RELEASED | | PM | 9:00 |
| | | | | | | MILES FROM STATION TO WELL | | | 30 |

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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

| ITEM/PRICE REF. NO. | MATERIAL, EQUIPMENT AND SERVICES USED | UNIT | QUANTITY | UNIT PRICE | \$ AMOUNT |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| CP 106 | A-SPRO Literat | SK | 100 | | 1,300.00 |
| PP 103 | 60/40 POC em | SK | 130 | | 1,560.00 |
| CC 102 | COITAKE | lb | 58 | | 214.60 |
| CC 109 | CALCIUM chloride | lb | 597 | | 626.85 |
| CE 153 | TOP WOODEN Ply, 8 5/8 | SA | 1 | | 160.00 |
| E 100 | Pickup mi | mi | 30 | | 135.00 |
| E 101 | Heavy Spot mi | mi | 60 | | 450.00 |
| E 113 | Bulk Bulky | TN | 299 | | 746.25 |
| PE 200 | North Ply 0-500 | SA | 1 | | 1,000.00 |
| PE 240 | Bulky mi | SK | 230 | | 322.00 |
| CE 504 | Ply Contoured Ply | SK | 1 | | 250.00 |
| SP03 | Sprayed Sides | SA | 1 | | 1.75.00 |

SUB TOTAL 6,939.70

| | |
|---------------------|------------|
| SERVICE & EQUIPMENT | %TAX ON \$ |
| MATERIALS | %TAX ON \$ |

TOTAL

THANK YOU 3,122.97

| | |
|--|---|
| SERVICE REPRESENTATIVE Robert Jellison | THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY Walter Brown |
| FIELD SERVICE ORDER NO. | (WELL OWNER OPERATOR CONTRACTOR OR AGENT) |

| | | |
|--|-------------------------|--------------------------------------|
| Customer <i>Griffith Management</i> | Lease No. | Date <i>2-1-16</i> |
| Lease <i>Rice</i> | Well# <i>14</i> | |
| Field Order # <i>12928</i> | Station <i>Pratt</i> | Casing <i>5 7/8</i> |
| | Depth <i>268'</i> | County <i>STAFFORD</i> |
| Type Job <i>CNW 8 7/8 casing</i> | Formation | Legal Description <i>21-23-12</i> |
| | | State <i>KS</i> |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | TREATMENT RESUME | | |
|--------------------------------|--------------|------------------|----|------------|------------------|-------|------------------|
| Casing Size <i>5 7/8</i> | Tubing Size | Shots/Ft | | Acid | RATE | PRESS | ISIP |
| Depth <i>268'</i> | Depth | From | To | Pre Pad | Max | | 5 Min. |
| Volume <i>10</i> | Volume | From | To | Pad | Min | | 10 Min. |
| Max Press <i>200</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>253'</i> | Packer Depth | From | To | Flush | Gas Volume | | Total Load |

| | | |
|-------------------------|--------------------------------------|----------------------------------|
| Customer Representative | Station Manager <i>DAVE SCOTT</i> | Treater <i>Robert Johnson</i> |
|-------------------------|--------------------------------------|----------------------------------|

| | | | | | | | | |
|---------------|-----------------|--------------|----------------|-------------|--|--|--|--|
| Service Units | <i>37900</i> | <i>27463</i> | <i>19826</i> | <i>199A</i> | | | | |
| Driver Names | <i>Sullivan</i> | <i>Ernst</i> | <i>Nystrom</i> | | | | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|--------------|-----------------|-----------------|--------------|------------|------------------------------------|
| <i>6:00.</i> | | | | | <i>on loc</i> |
| | | | | | |
| | | | | | <i>RUN CASING</i> |
| | | | | | <i>CASING ON BOTTOM</i> |
| | | | | | <i>HOOK UP circ 4 de</i> |
| | | | | | <i>AT SPACER</i> |
| <i>8:55</i> | | | <i>3</i> | | |
| | | | <i>30</i> | <i>4.5</i> | <i>Mix A-SERV Lite 3%cc 1/4 ct</i> |
| | | | <i>28</i> | | <i>Mix 60/40 for 3%cc 1/4 ct</i> |
| | | | | | <i>cont mixed shot down</i> |
| | | | | | <i>Reduce Plug</i> |
| | | | | <i>3</i> | <i>At Surf</i> |
| <i>8:30</i> | | | <i>16</i> | | <i>plug down</i> |
| | | | | | <i>1 circ 10 BRC cut pit</i> |
| | | | | | |
| | | | | | <i>SOP complete</i> |
| | | | | | <i>THANLEY</i> |



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET
1718 13277 A

DATE _____ TICKET NO. _____

| | | | | | | | | | |
|--|------------|--|-----|------------|-----|----------------------------|---------------|-------|--------------|
| DATE OF JOB <u>2-7-16</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>Griffin Management, LLC</u> | | LEASE <u>Rice</u> WELL NO. <u>1</u> | | | | | | | |
| ADDRESS _____ | | COUNTY <u>Stafford</u> STATE <u>KS</u> | | | | | | | |
| CITY _____ STATE _____ | | SERVICE CREW <u>Scotty Shaw</u> | | | | | | | |
| AUTHORIZED BY <u>Charles Griffin</u> | | JOB TYPE: <u>4 1/2 Long string CNW</u> | | | | | | | |
| EQUIPMENT# | HRS | EQUIPMENT# | HRS | EQUIPMENT# | HRS | TRUCK CALLED | DATE | AM PM | TIME |
| <u>27463</u> | <u>1.5</u> | | | | | | | | |
| <u>19883</u> | <u>.25</u> | | | | | | | | |
| | | | | | | ARRIVED AT JOB | <u>2-7-16</u> | AM PM | <u>4:00</u> |
| | | | | | | START OPERATION | <u>2-7-16</u> | AM PM | <u>9:25</u> |
| | | | | | | FINISH OPERATION | <u>2-7-16</u> | AM PM | <u>10:00</u> |
| | | | | | | RELEASED | <u>2-7-16</u> | AM PM | <u>10:30</u> |
| | | | | | | MILES FROM STATION TO WELL | | | |

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: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

| ITEM/PRICE REF. NO. | MATERIAL, EQUIPMENT AND SERVICES USED | UNIT | QUANTITY | UNIT PRICE | \$ AMOUNT | |
|---------------------|---------------------------------------|------|----------|------------|-----------|-----------|
| CP105 | AA2 Cement | SK | 150 | | 7550 00 | |
| CP103 | 60/46 P07 | SK | 30 | | 360 00 | |
| CC102 | Celloflap | lb | 38 | | 140 60 | |
| CC111 | ScM | lb | 685 | | 342 50 | |
| CC117 | Cement Friction Reducer | lb | 71 | | 426 00 | |
| CC116 | Maychem 10CR | lb | 425 | | 1142 10 | |
| CC701 | Gibsonite | lb | 750 | | 507 50 | |
| CE606 | Latch down Plug + Bottle 4 1/2 | ea | 1 | | 370 00 | |
| CE1750 | Auto Fill Float Valve 4 1/2 | ea | 1 | | 330 00 | |
| CE1650 | Turbo Lizers 4 1/2 | ea | 6 | | 510 00 | |
| CE1900 | 4 1/2 Basket | ea | 1 | | 270 00 | |
| CE704 | Claymax KCL Substitute | Gal | 4 | | 140 00 | |
| CC151 | Mud Flush | Gal | 500 | | 750 00 | |
| E100 | Unit Mileage Pickup | Mi | 35 | | 157 50 | |
| E101 | Heavy Equipment Mileage | Mi | 70 | | 525 00 | |
| E113 | Diag & Bulk Delivery Charge | TM | 298 | | 743 75 | |
| CE204 | Depth Charge 3000-4000' | lbs | 1 | | 2160 00 | |
| CE240 | Blending & Mixing Service Chg | SK | 180 | | 252 00 | |
| CE504 | Plug Container Utilization Chg | Job | 1 | | 250 00 | |
| 5003 | Service Supervisor | ea | 1 | | 175 00 | |
| | | | | | SUB-TOTAL | 12,096.95 |

CHEMICAL / ACID DATA:

| | | | |
|--|--|--|--|
| | | | |
| | | | |
| | | | |
| | | | |

| | |
|---------------------|------------|
| SERVICE & EQUIPMENT | %TAX ON \$ |
| MATERIALS | %TAX ON \$ |

TOTAL 5,564 60

| | |
|--|---|
| SERVICE REPRESENTATIVE: <u>[Signature]</u> | THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>[Signature]</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT) |
| FIELD SERVICE ORDER NO. _____ | |

| | | | | | |
|--|-----------------------------|------------------------|----------------------|--|--------------------|
| Customer <i>Gasline Management</i> | | Lease No. | | Date | |
| Lease <i>Rice</i> | | Well # <i>1</i> | | <i>7-7-16</i> | |
| Field Order # <i>13277A</i> | Station <i>Pratt, KS</i> | Casing <i>4 1/2</i> | Depth <i>3819</i> | County <i>Stafford</i> | State <i>KS</i> |
| Type Job <i>4 1/2 Long Slug CNM</i> | | | Formation | Legal Description <i>Sec 16 Twp 23S R 12W</i> | |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | | |
|---------------------------------|--------------|------------------|----|------------|----------------|------------------|------------------|--|
| Casing Size | Tubing Size | Shots/Ft | | Acid | RATE | PRESS | ISIP | |
| <i>2 1/2</i> | | | | Pre Pad | Max <i>5.9</i> | <i>600</i> | 5 Min. | |
| Depth <i>3819</i> | Depth | From | To | Pad | Min <i>3.1</i> | <i>100</i> | 10 Min. | |
| Volume <i>34.2</i> | Volume | From | To | Frac | Avg <i>5.5</i> | <i>400</i> | 15 Min. | |
| Max Press <i>700</i> | Max Press | From | To | | HHP Used | | Annulus Pressure | |
| Well Connection <i>4 1/2</i> | Annulus Vol. | From | To | Flush | Gas Volume | | Total Load | |
| Plug Depth | Packer Depth | From | To | | | | | |

| | | | | | | | | | | | |
|--|--------------------|-----------------|--------------|---|--|--|--|--------------------------------|--|--|--|
| Customer Representative <i>Charles G. Allen</i> | | | | Station Manager <i>Kevin Bradley</i> | | | | Treater <i>Scott Powers</i> | | | |
| Service Units | <i>271163</i> | <i>70751</i> | <i>20408</i> | <i>14883</i> | | | | | | | |
| Driver Names | <i>Shawn Scott</i> | <i>Sandberg</i> | | | | | | | | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|--------------|-----------------|-----------------|--------------|------------|--|
| <i>4:00</i> | | | | | <i>On Location Safety Meeting</i> |
| <i>6:15</i> | | | | | <i>Run 1st Well Equipment Basket</i> |
| | | | | | <i>Turbos 2, 4, 6, 8, 10, 12</i> |
| <i>8:20</i> | | | | | <i>Break circulation 1 hour</i> |
| <i>9:25</i> | <i>300</i> | | | <i>3.6</i> | <i>Pump 1100 Spool</i> |
| <i>9:26</i> | <i>300</i> | | <i>5</i> | <i>3.8</i> | <i>Pump 2100 Spool</i> |
| <i>9:31</i> | <i>350</i> | | <i>17</i> | <i>3.8</i> | <i>Pump 1100 Spool</i> |
| <i>9:31</i> | <i>450</i> | | <i>5</i> | <i>5.6</i> | <i>Hit 150 Sts AAZ Control 15.3</i> |
| <i>9:38</i> | <i>0</i> | | <i>36.4</i> | | <i>Shut down</i> |
| <i>9:39</i> | | | | | <i>wash pump & hoses clean</i> |
| <i>9:40</i> | <i>0</i> | | | <i>3.5</i> | <i>Release Plug Start Displacement</i> |
| <i>9:40</i> | <i>100</i> | | | <i>5.7</i> | <i>Increase Rate</i> |
| <i>9:48</i> | <i>400</i> | | <i>43</i> | <i>5.9</i> | <i>1st Pressure</i> |
| <i>9:49</i> | <i>500</i> | | <i>7</i> | <i>3.1</i> | <i>Reduce Rate</i> |
| <i>9:51</i> | <i>600</i> | | <i>9.3</i> | <i>3.2</i> | <i>Plug landed</i> |
| <i>9:51</i> | <i>1700</i> | | | | <i>Pressure up on Plug</i> |
| <i>9:52</i> | <i>0</i> | | | | <i>Release Pressure No Returns</i> |
| <i>9:55</i> | <i>0</i> | | <i>7</i> | <i>3</i> | <i>Plug out hole 3/5/15 6/100 PC</i> |
| <i>10:00</i> | | | <i>7</i> | | <i>Shut down</i> |
| | | | | | <i>Job Complete</i> |



DRILL STEM TEST REPORT

Prepared For: **Charles N Griffin**

PO Box 347
Pratt, KS 67124

ATTN: Bruce Reed

Rice #1

16-23S-12W Stafford,KS

Start Date: 2016.02.05 @ 17:10:30

End Date: 2016.02.05 @ 22:36:15

Job Ticket #: 57978 DST #: 1

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

Printed: 2016.02.08 @ 08:16:17

Charles N Griffin

16-23S-12W Stafford,KS

Rice #1

DST # 1

LKC H - J

2016.02.05



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Charles N Griffin

16-23S-12W Stafford, KS

PO Box 347
Pratt, KS 67124

Rice #1

Job Ticket: 57978

DST#: 1

ATTN: Bruce Reed

Test Start: 2016.02.05 @ 17:10:30

GENERAL INFORMATION:

Formation: **LKC H - J**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 18:56:45

Time Test Ended: 22:36:15

Test Type: Conventional Bottom Hole (Initial)

Tester: Leal Cason

Unit No: 74

Interval: **3514.00 ft (KB) To 3580.00 ft (KB) (TVD)**

Reference Elevations: 1871.00 ft (KB)

Total Depth: 3580.00 ft (KB) (TVD)

1866.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Good

KB to GR/CF: 5.00 ft

Serial #: 8525

Inside

Press@RunDepth: 50.86 psig @ 3515.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2016.02.05

End Date:

2016.02.05

Last Calib.:

2016.02.05

Start Time: 17:10:31

End Time:

22:36:15

Time On Btm:

2016.02.05 @ 18:50:15

Time Off Btm:

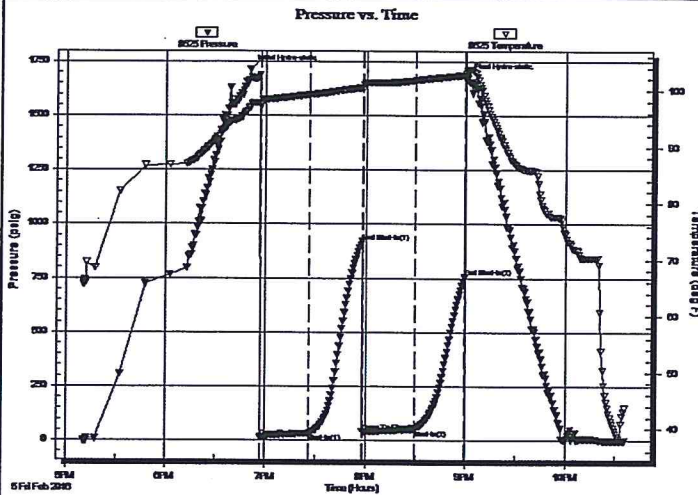
2016.02.05 @ 21:00:30

TEST COMMENT: IF: Weak Blow, Built to 2 1/4"

ISI: No Blow Back

FF: Weak 1" Blow

FSI: No Blow Back



PRESSURE SUMMARY

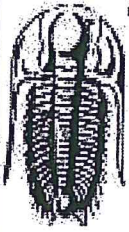
| Time (Min.) | Pressure (psig) | Temp (deg F) | Annotation |
|-------------|-----------------|--------------|----------------------|
| 0 | 1714.50 | 97.07 | Initial Hydro-static |
| 7 | 14.49 | 97.13 | Open To Flow (1) |
| 36 | 33.01 | 99.26 | Shut-In(1) |
| 68 | 919.19 | 100.52 | End Shut-In(1) |
| 68 | 39.83 | 100.20 | Open To Flow (2) |
| 99 | 50.86 | 101.81 | Shut-In(2) |
| 130 | 756.83 | 102.77 | End Shut-In(2) |
| 131 | 1679.59 | 103.53 | Final Hydro-static |

Recovery

| Length (ft) | Description | Volume (bbl) |
|-------------|------------------|--------------|
| 65.00 | VSOSM -1%O +99%M | 0.32 |
| | | |
| | | |
| | | |
| | | |

Gas Rates

| Choke (inches) | Pressure (psig) | Gas Rate (Mc/d) |
|----------------|-----------------|-----------------|
| | | |



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Charles N Griffin

16-23S-12W Stafford,KS

PO Box 347
Pratt, KS 67124

Rice #1

Job Ticket: 57978

DST#: 1

ATTN: Bruce Reed

Test Start: 2016.02.05 @ 17:10:30

GENERAL INFORMATION:

Formation: LKC H - J

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 18:56:45

Time Test Ended: 22:36:15

Test Type: Conventional Bottom Hole (Initial)

Tester: Leal Cason

Unit No: 74

Interval: 3514.00 ft (KB) To 3580.00 ft (KB) (TVD)

Total Depth: 3580.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Good

Reference Elevations: 1871.00 ft (KB)

1866.00 ft (CF)

KB to GR/CF: 5.00 ft

Serial #: 6806

Outside

Press@RunDepth: psig @ 3515.00 ft (KB)

Start Date: 2016.02.05 End Date: 2016.02.05

Start Time: 17:10:31 End Time: 22:37:30

Capacity: 8000.00 psig

Last Calib.: 2016.02.05

Time On Btm:

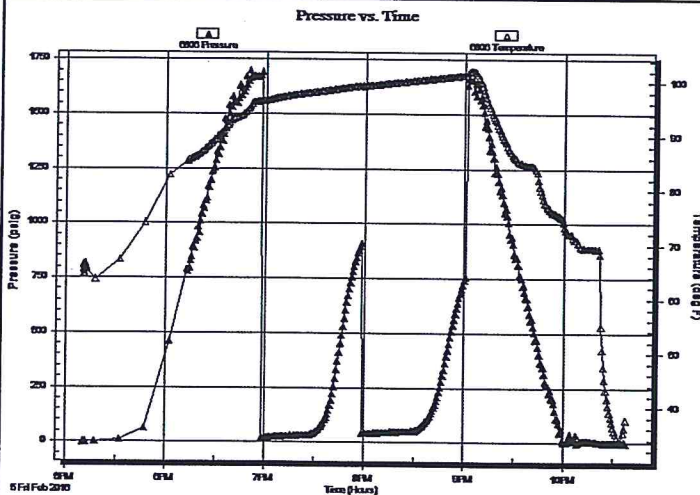
Time Off Btm:

TEST COMMENT: IF: Weak Blow , Built to 2 1/4"

ISI: No Blow Back

FF: Weak 1" Blow

FSI: No Blow Back



PRESSURE SUMMARY

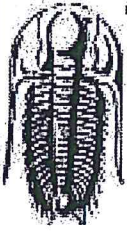
| Time (Min.) | Pressure (psig) | Temp (deg F) | Annotation |
|-------------|-----------------|--------------|------------|
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Recovery

| Length (ft) | Description | Volume (bbl) |
|-------------|------------------|--------------|
| 65.00 | VSOSM -1%O +99%M | 0.32 |
| | | |
| | | |
| | | |
| | | |
| | | |

Gas Rates

| Choke (inches) | Pressure (psig) | Gas Rate (Mcf/d) |
|----------------|-----------------|------------------|
| | | |
| | | |
| | | |
| | | |



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Charles N Griffin

16-23S-12W Stafford,KS

PO Box 347
Pratt, KS 67124

Rice #1

Job Ticket: 57978

DST#: 1

ATTN: Bruce Reed

Test Start: 2016.02.05 @ 17:10:30

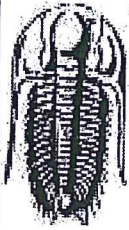
Tool Information

| | | | | |
|---------------------------|--------------------|-----------------------|--------------------------------|------------------------------------|
| Drill Pipe: | Length: 3393.00 ft | Diameter: 3.80 inches | Volume: 47.59 bbl | Tool Weight: 2100.00 lb |
| Heavy Wt. Pipe: | Length: 0.00 ft | Diameter: 0.00 inches | Volume: 0.00 bbl | Weight set on Packer: 25000.00 lb |
| Drill Collar: | Length: 120.00 ft | Diameter: 2.25 inches | Volume: 0.59 bbl | Weight to Pull Loose: 75000.00 lb |
| | | | <u>Total Volume: 48.18 bbl</u> | Tool Chased ft |
| Drill Pipe Above KB: | 18.00 ft | | | String Weight: Initial 58000.00 lb |
| Depth to Top Packer: | 3514.00 ft | | | Final 58000.00 lb |
| Depth to Bottom Packer: | ft | | | |
| Interval between Packers: | 66.00 ft | | | |
| Tool Length: | 85.00 ft | | | |
| Number of Packers: | 2 | Diameter: 6.75 inches | | |
| Tool Comments: | | | | |

Tool Description

| Tool Description | Length (ft) | Serial No. | Position | Depth (ft) | Accum. Lengths |
|------------------|-------------|------------|----------|------------|-------------------------------|
| Shut In Tool | 5.00 | | | 3500.00 | |
| Hydraulic tool | 5.00 | | | 3505.00 | |
| Packer | 5.00 | | | 3510.00 | 19.00 Bottom Of Top Packer |
| Packer | 4.00 | | | 3514.00 | |
| Stubb | 1.00 | | | 3515.00 | |
| Recorder | 0.00 | 8525 | Inside | 3515.00 | |
| Recorder | 0.00 | 6806 | Outside | 3515.00 | |
| Perforations | 30.00 | | | 3545.00 | |
| Change Over Sub | 1.00 | | | 3546.00 | |
| Drill Pipe | 30.00 | | | 3576.00 | |
| Change Over Sub | 1.00 | | | 3577.00 | |
| Bullnose | 3.00 | | | 3580.00 | 66.00 Bottom Packers & Anchor |

Total Tool Length: 85.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Charles N Griffin

16-23S-12W Stafford,KS

PO Box 347
Pratt, KS 67124

Rice #1

Job Ticket: 57978

DST#: 1

ATTN: Bruce Reed

Test Start: 2016.02.05 @ 17:10:30

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: 51.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.99 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 6100.00 ppm

Filter Cake: 0.02 inches

Recovery Information

Recovery Table

| Length ft | Description | Volume bbl |
|--------------|-----------------|---------------|
| 65.00 | VSOSM-1%O +99%M | 0.320 |

Total Length: 65.00 ft Total Volume: 0.320 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Serial #: 8525

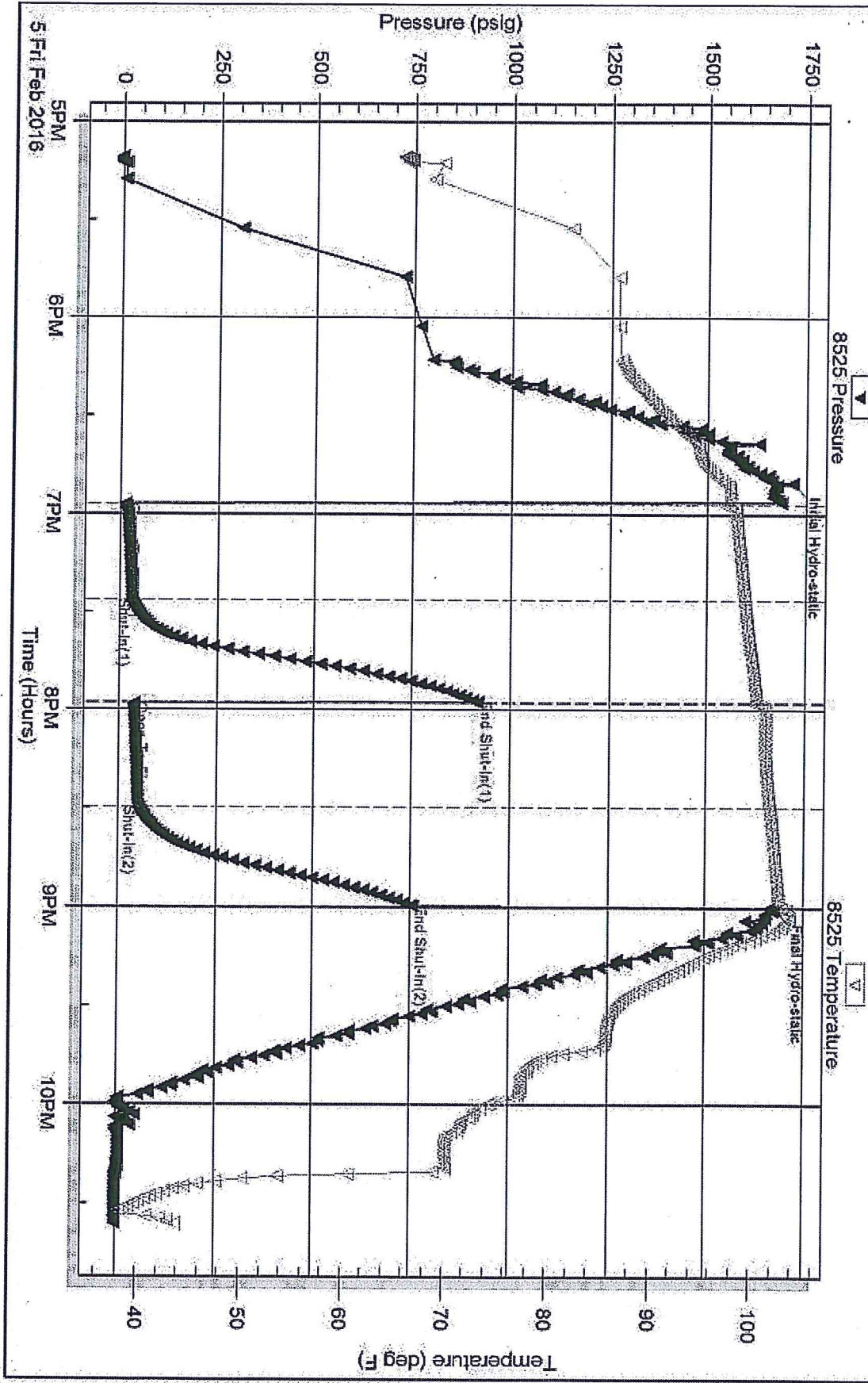
Inside

Charles N Griffin

Rice #1

DST Test Number: 1

Pressure vs. Time



Tribble Testing, Inc

Ref No: 57978

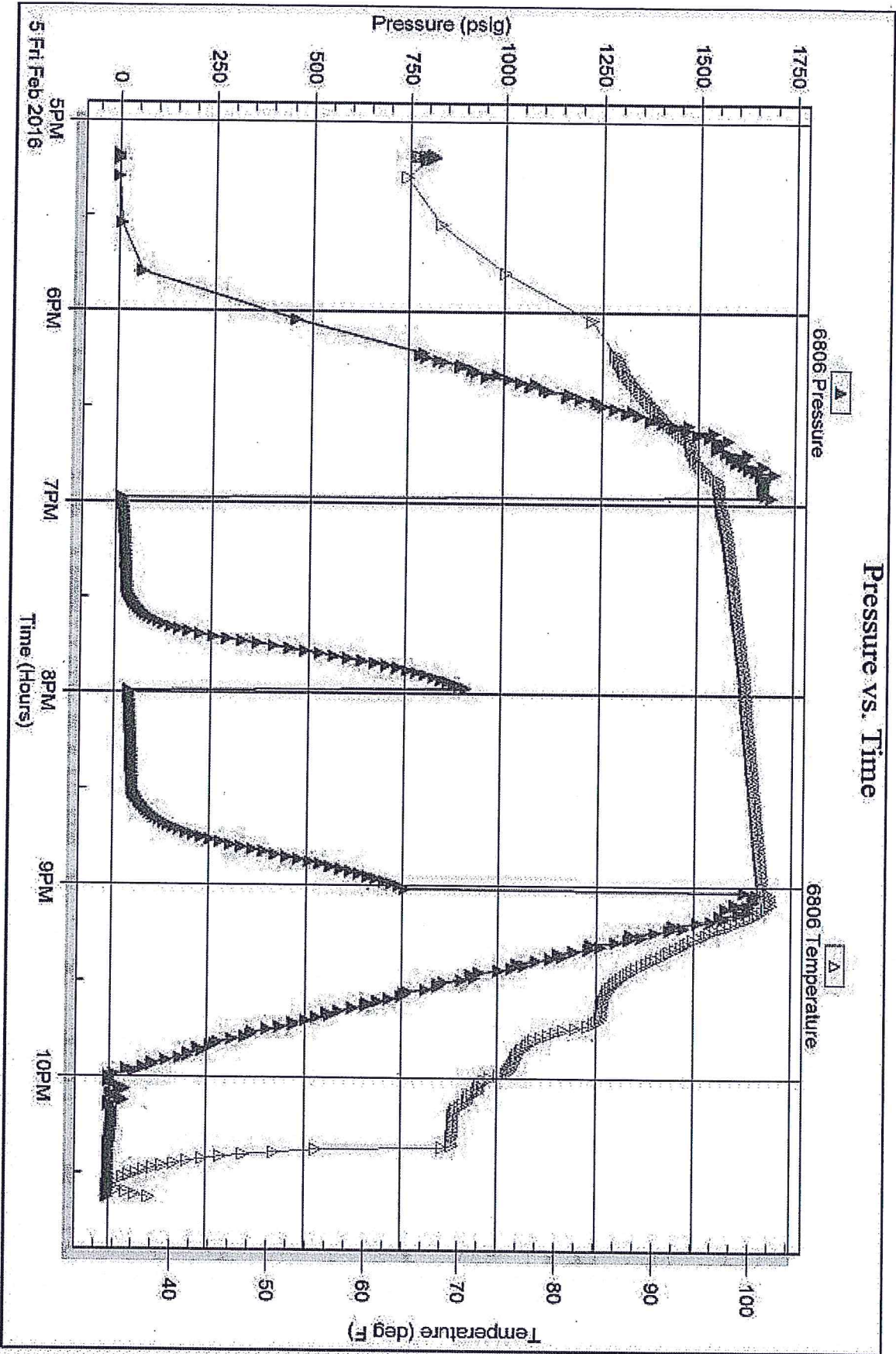
Printed: 2016.02.08 @ 08:16:18

Serial #: 6806

Outside Charles N Griffin

Rice #1

DST Test Number: 1



Tribble Testing, Inc

Ref. No: 57978

Printed: 2016.02.08 @ 08:16:19



TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 57978

Well Name & No. Rice 1 Test No. 1 Date 02/05/16
 Company Charles N. Griffin Elevation 1871 KB 1866 GL
 Address PO Box 347 Pratt, KS 67124
 Co. Rep / Geo. Bruce Reed Rig WW 4
 Location: Sec. 16 Twp. 235 Rge. 12W Co. Stafford State KS

Interval Tested 3514 - 3580 Zone Tested L/KC H, I, + J
 Anchor Length 66 Drill Pipe Run 3393 Mud Wt. 8.8
 Top Packer Depth 3509 Drill Collars Run 120 Vis 51
 Bottom Packer Depth 3514 Wt. Pipe Run 0 WL 8.0
 Total Depth 3580 Chlorides 6100 ppm System LCM 1

Blow Description IF: weak blow Built to 2 1/4 inches
ISI: NO BLOW BACK
FF: weak 1 inch blow
FSL: NO BLOW BACK

| Rec | Feet of | %gas | %oil | %water | %mud |
|-----------|--------------|------|-----------|--------|------------|
| <u>65</u> | <u>VSOSM</u> | | <u>-1</u> | | <u>+99</u> |
| Rec | Feet of | %gas | %oil | %water | %mud |
| Rec | Feet of | %gas | %oil | %water | %mud |
| Rec | Feet of | %gas | %oil | %water | %mud |

Rec Total 65 BHT 103 Gravity N/C API RW N/C @ N/C °F Chlorides N/C ppm

(A) Initial Hydrostatic 1714 Test 1050 T-On Location 16:15
 (B) First Initial Flow 14 Jars T-Started 17:10
 (C) First Final Flow 33 Safety Joint T-Open 18:56
 (D) Initial Shut-In 919 Circ Sub T-Pulled 20:59
 (E) Second Initial Flow 40 Hourly Standby T-Out 22:36
 (F) Second Final Flow 51 Mileage (60) Comments
 (G) Final Shut-In 757 Sampler
 (H) Final Hydrostatic 1680 Straddle Ruined Shale Packer
 Shale Packer Ruined Packer
 Extra Packer Extra Copies
 Extra Recorder Sub Total 0
 Day Standby Total 1110
 Accessibility MP/DST Disc't
 Sub Total 1110

Approved By Bruce Reed Our Representative [Signature]
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