



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1316801
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: _____

1316801

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> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Castle Resources, Inc.
Well Name	LAMER 1
Doc ID	1316801

Tops

Name	Top	Datum
Anhydrite	1490	-1525-727
Heebner	3602	-1385
LKC	3640	-1423
BKC	3913	-1696
Pawnee	4002	-1785
Labette	4069	-1852
Cherokee SS	4098	-1881
Mississippi	4141	-1924
RTD	4215	-1998

GLOBAL CEMENTING, L.L.C.

2673

REMIT TO 1958 E. Highway 40
Russell, KS 67665

SERVICE POINT: Russell

DATE <u>7-25-16</u>	SEC. <u>3</u>	TWP. <u>17 S</u>	RANGE <u>21 W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>5:00 PM</u>
LEASE <u>LAMER</u>	WELL # <u>#1</u>	LOCATION <u>McCracken 3W 1 1/2 N 1/2 W</u>			COUNTY <u>NESS</u>	STATE <u>KANSAS</u>	
OLD OR <u>NEW</u> (CIRCLE ONE)							

CONTRACTOR WHITE KNIGHT DRUG, Rig #1 "TERRY" OWNER

TYPE OF JOB Cement Surface

HOLE SIZE 12 1/4 ID. 231'

CASING SIZE 8 5/8 DEPTH 219

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX. MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS

DISPLACEMENT 13 / BBL

EQUIPMENT

CEMENT AMOUNT ORDERED 150 SX

3% CC

2% GEL

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

HANDLING @

MILEAGE @

TOTAL

PUMP TRUCK # P-1 CEMENTER GLENN G.

BULK TRUCK # B-5 HELPER CODY H.

BULK TRUCK DRIVER JASON M.

DRIVER

REMARKS:

Set 8 5/8 @ 219

Received Circulation

Cement w/ 150 SX 243

Displace 13 / BBL H₂O

SHUT IN @ 250'

Cement Did Circulate

TO Surface THANKS

CHARGE TO CASTLE RESOURCES INC.

STREET

CITY STATE ZIP

Global Cementing, L.L.C.,
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME

SIGNATURE Terry Austin

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

MANIFOLD @

TOTAL

PLUG & FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

SALES TAX (If Any)

TOTAL CHARGES

DISCOUNT IF PAID IN 30 DAYS



DRILL STEM TEST REPORT

Prepared For: **Castle Resources, Inc**

PO Box 583
Russell, KS 67665

ATTN: Jerry Green

Lamer #1

3-17S-21W Ness, KS

Start Date: 2016.07.30 @ 07:33:44

End Date: 2016.07.30 @ 13:34:44

Job Ticket #: 58054 DST #: 1

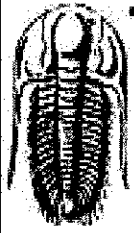
Trilobite Testing, Inc

PO Box 362 Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

Printed: 2016.08.01 @ 08:27:03

Castle Resources, Inc 3-17S-21W Ness, KS Lamer #1 DST # 1 Cherokee 2016.07.30



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Castle Resources, Inc

3-17S-21W Ness, KS

PO Box 583
Russell, KS 67665

Lamer #1

Job Ticket: 58054

DST#: 1

ATTN: Jerry Green

Test Start: 2016.07.30 @ 07:33:44

GENERAL INFORMATION:

Formation: **Cherokee**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 09:51:44

Time Test Ended: 13:34:44

Test Type: Conventional Bottom Hole (Initial)

Tester: Brannan Lonsdale

Unit No: 73

Interval: **4066.00 ft (KB) To 4106.00 ft (KB) (TVD)**

Total Depth: 4106.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 2217.00 ft (KB)

2212.00 ft (CF)

KB to GR/CF: 5.00 ft

Serial #: **8959**

Outside

Press@RunDepth: psig @ 4071.00 ft (KB)

Start Date: 2016.07.30

End Date:

2016.07.30

Start Time: 07:33:28

End Time:

13:32:27

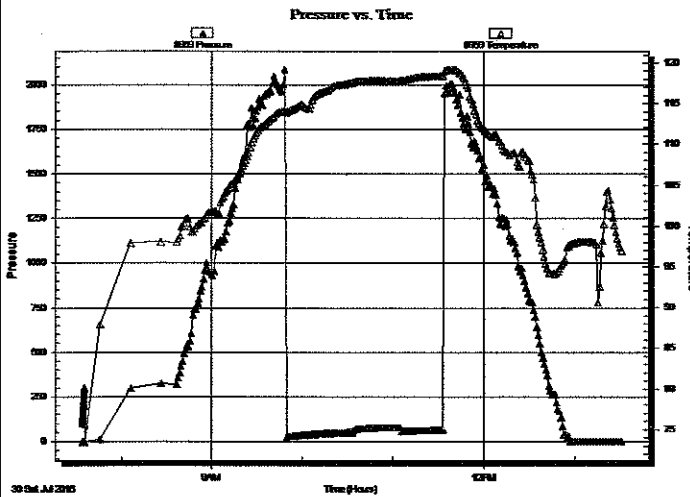
Capacity: 8000.00 psig

Last Calib.: 2016.07.30

Time On Btm:

Time Off Btm:

TEST COMMENT: 45- IF- Slow ly built to 4"
30- IS- No blow
30- FF- Slow ly built to .5" Pulled tool



PRESSURE SUMMARY

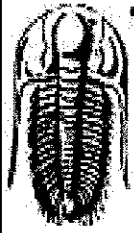
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
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Recovery

Length (ft)	Description	Volume (bbl)
111.00	WM, 15%W 85%M	1.57

Gas Rates

	Choke (Inches)	Pressure (psig)	Gas Rate (Mcf/d)
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**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Castle Resources, Inc

3-17S-21W Ness, KS

PO Box 583
Russell, KS 67665

Lamer #1

Job Ticket: 58054

DST#: 1

ATTN: Jerry Green

Test Start: 2016.07.30 @ 07:33:44

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:	14000 ppm
Viscosity: 49.00 sec/qt	Cushion Volume: bbl		
Water Loss: 7.18 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 6000.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
111.00	WM, 15%W 85%M	1.573

Total Length: 111.00 ft Total Volume: 1.573 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

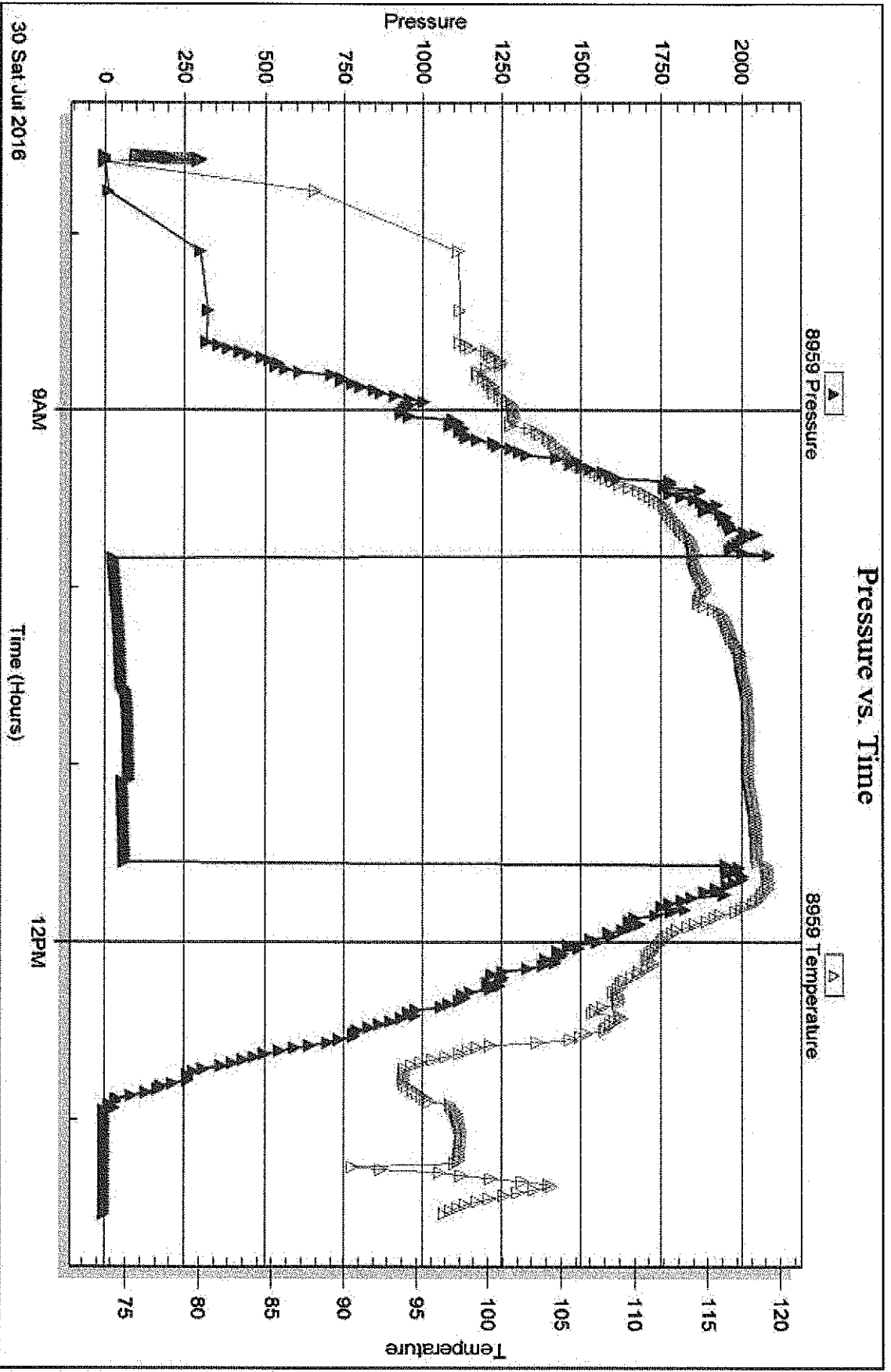
Recovery Comments:

Serial #: 8959

Outside Castle Resources, Inc

Lamer #1

DST Test Number: 1



Trachite Testing, Inc

Ref. No: 58054

Printed: 2016.06.01 @ 08:27:04



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Castle Resources, Inc
PO Box 583
Russell, KS 67665
ATTN: Jerry Green

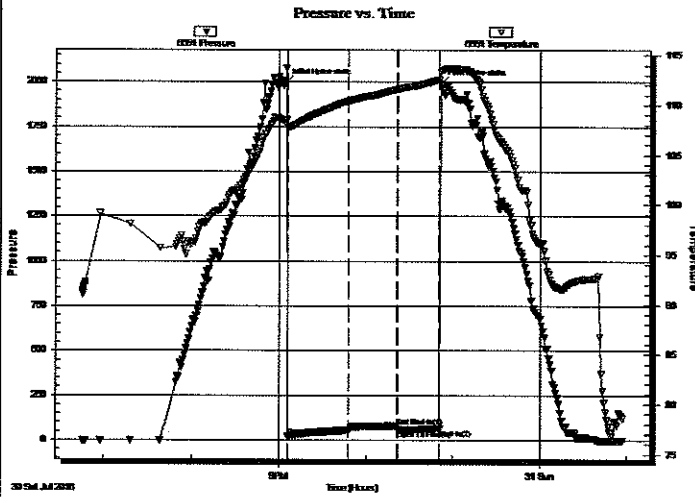
3-17S-21W Ness, KS
Lamer #1
Job Ticket: 58055 **DST#: 2**
Test Start: 2016.07.30 @ 18:45:26

GENERAL INFORMATION:

Formation: **Cherokee**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 21:05:56
Time Test Ended: 00:57:26
Test Type: Conventional Bottom Hole (Reset)
Tester: Brannan Lonsdale
Unit No: 73
Interval: **4067.00 ft (KB) To 4111.00 ft (KB) (TVD)**
Total Depth: 4111.00 ft (KB) (TVD)
Reference Elevations: 2217.00 ft (KB)
2212.00 ft (CF)
Hole Diameter: 7.88 inches Hole Condition: Fair
KB to GR/CF: 5.00 ft

Serial #: 6651 **Inside**
Press@RunDepth: 53.26 psig @ 4077.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2016.07.30 End Date: 2016.07.31 Last Calib.: 2016.07.31
Start Time: 18:45:27 End Time: 00:57:26 Time On Btm: 2016.07.30 @ 21:04:26
Time Off Btm: 2016.07.30 @ 22:51:56

TEST COMMENT: 45- IF- Slowly built to 4"
30- IS- No blow
30- FF- Slowly built to 1" Pulled tool



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1995.00	108.51	Initial Hydro-static
2	23.27	107.78	Open To Flow (1)
44	53.26	110.38	Shut-In(1)
77	78.03	111.53	End Shut-In(1)
78	55.89	111.54	Open To Flow (2)
107	61.23	112.52	Shut-In(2)
108	1988.50	113.24	Final Hydro-static

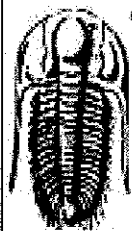
Recovery

Length (ft)	Description	Volume (bbl)
95.00	WM, 10%W 90%M	1.35

* Recovery from multiple tests

Gas Rates

Choke (Inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Castle Resources, Inc

3-17S-21W Ness, KS

PO Box 583
Russell, KS 67665

Lamer #1

Job Ticket: 58055

DST#: 2

ATTN: Jerry Green

Test Start: 2016.07.30 @ 18:45:26

Tool Information

Drill Pipe:	Length: 4061.00 ft	Diameter: 3.82 inches	Volume: 57.57 bbl	Tool Weight: 2500.00 lb
Heavy Wt. Pipe:	Length: ft	Diameter: inches	Volume: - bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 58000.00 lb
			Total Volume: - bbl	Tool Chased 0.00 ft
Drill Pipe Above KB:	21.00 ft			String Weight: Initial 53000.00 lb
Depth to Top Packer:	4067.00 ft			Final 53000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	45.00 ft			
Tool Length:	72.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4041.00	
Shut In Tool	5.00			4046.00	
Hydraulic tool	5.00			4051.00	
Jars	5.00			4056.00	
Safety Joint	2.00			4058.00	
Packer	5.00			4063.00	27.00 Bottom Of Top Packer
Packer	4.00			4067.00	
Stubb	1.00			4068.00	
Perforations	8.00			4076.00	
Change Over Sub	1.00			4077.00	
Recorder	0.00	6651	Inside	4077.00	
Recorder	0.00	8959	Outside	4077.00	
Drill Pipe	31.00			4108.00	
Change Over Sub	1.00			4109.00	
Bullnose	3.00			4112.00	45.00 Bottom Packers & Anchor

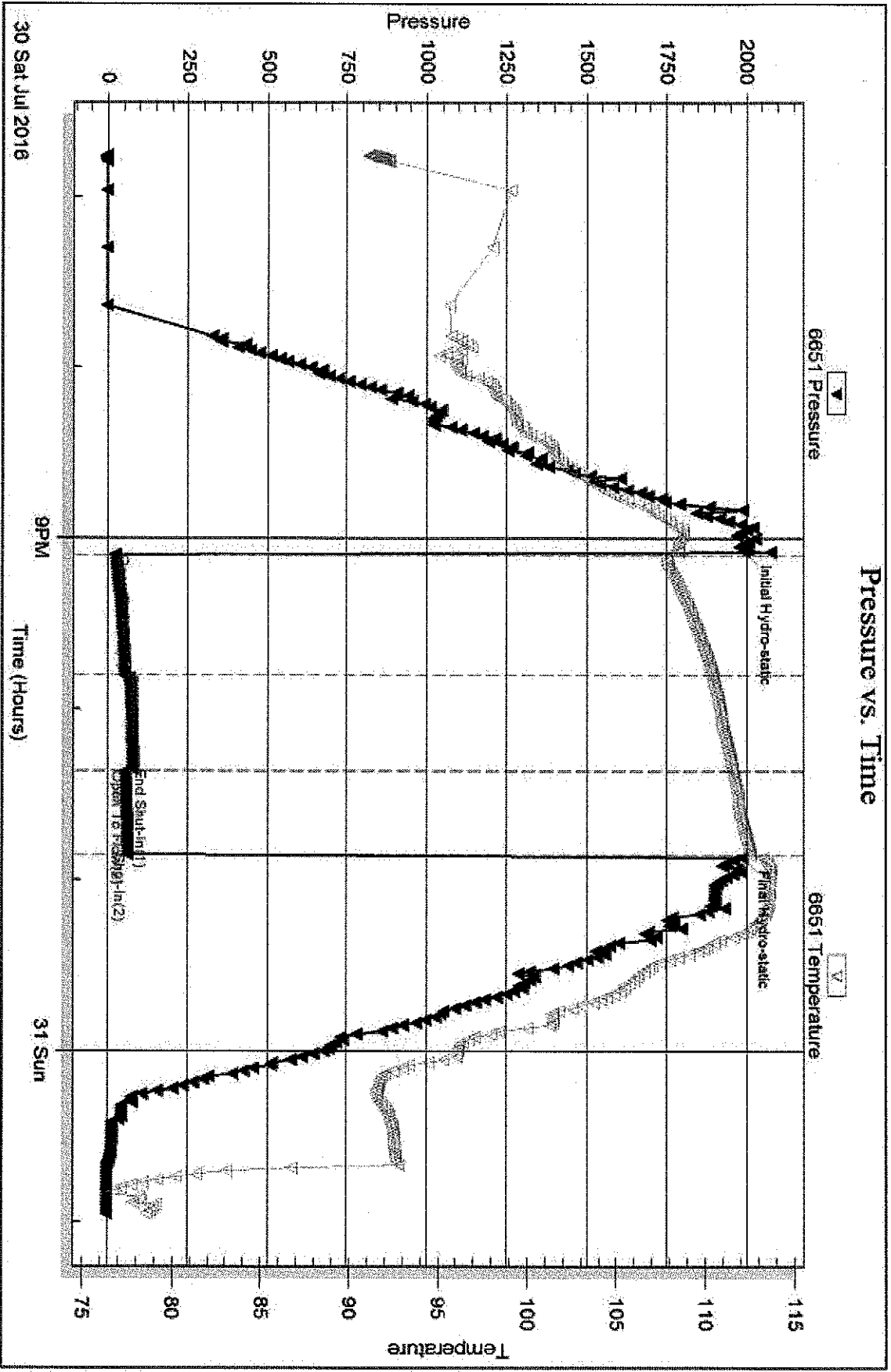
Total Tool Length: 72.00

Serial #: 6651

Inside Castle Resources, Inc

Larner #1

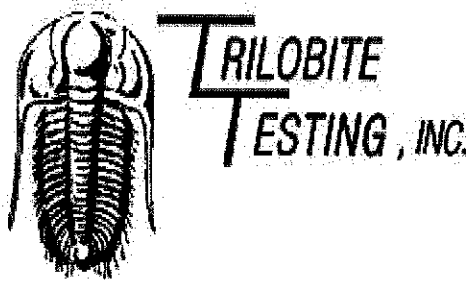
DST Test Number: 2



Trichble Testing, Inc

Ref. No: 58055

Printed: 2016.08.01 @ 08:23:45



DRILL STEM TEST REPORT

Prepared For: **Castle Resources, Inc**

PO Box 583
Russell, KS 67665

ATTN: Jerry Green

Lamer #1

3-17S-21W Ness, KS

Start Date: 2016.07.31 @ 14:58:17

End Date: 2016.07.31 @ 20:56:17

Job Ticket #: 58056 DST #: 3

Trilobite Testing, Inc

PO Box 362 Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

Printed: 2016.08.01 @ 08:23:14

Castle Resources, Inc 3-17S-21W Ness, KS Lamer #1 DST # 3 Cherokee 2016.07.31



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Castle Resources, Inc

3-17S-21W Ness, KS

PO Box 583
Russell, KS 67665

Lamer #1

Job Ticket: 58056

DST#: 3

ATTN: Jerry Green

Test Start: 2016.07.31 @ 14:58:17

Tool Information

Drill Pipe:	Length: 4092.00 ft	Diameter: 3.82 inches	Volume: 58.01 bbl	Tool Weight: 2500.00 lb
Heavy Wt. Pipe:	Length: ft	Diameter: inches	Volume: - bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 120000.0 lb
			Total Volume: - bbl	Tool Chased 0.00 ft
Drill Pipe Above KB:	15.00 ft			String Weight: Initial 53000.00 lb
Depth to Top Packer:	4104.00 ft			Final 57000.00 lb
Depth to Bottom Packer:	4125.00 ft			
Interval between Packers:	21.00 ft			
Tool Length:	138.00 ft			
Number of Packers:	3	Diameter: 6.75 inches		

Tool Comments:

Tool Description

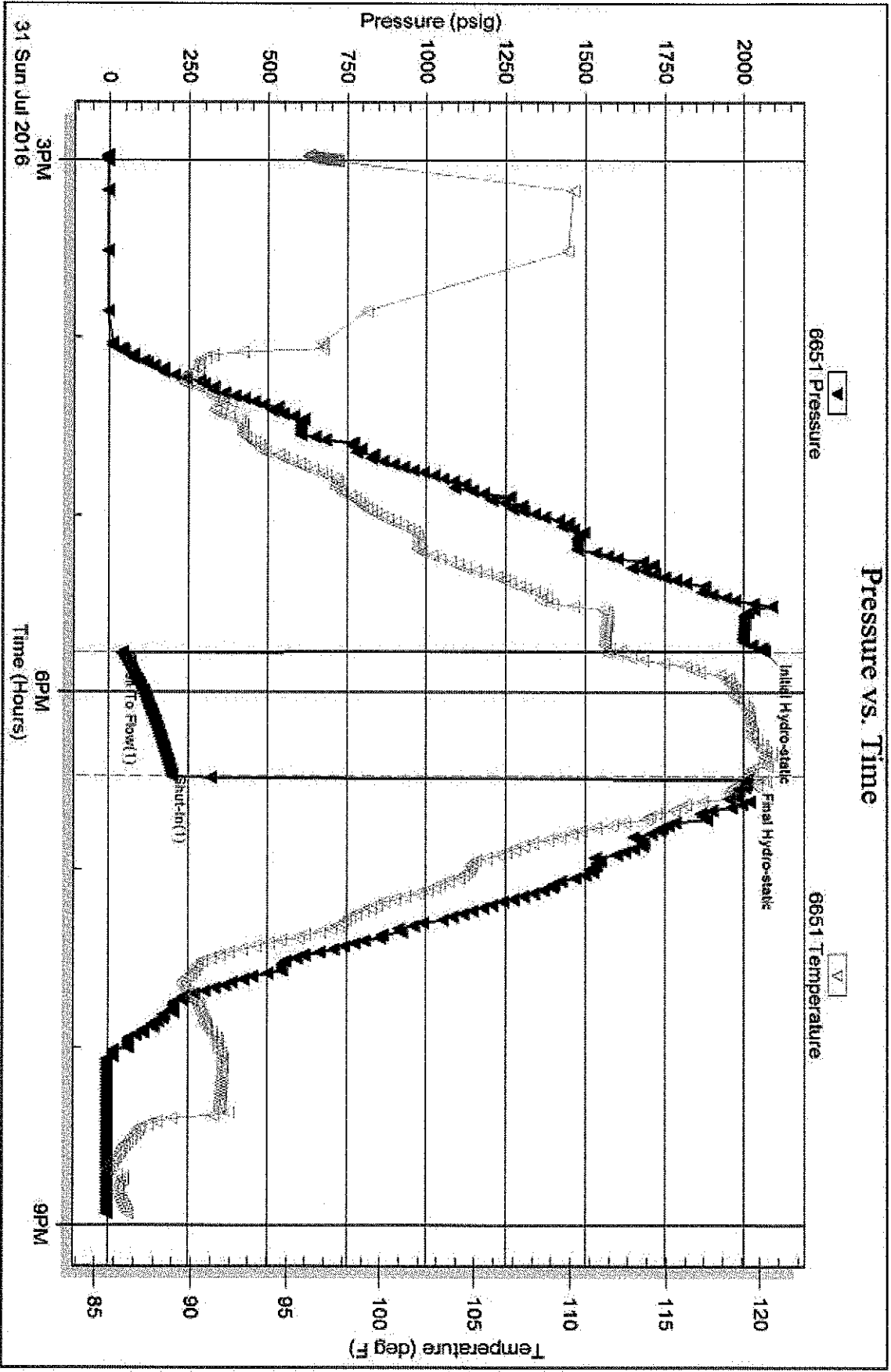
Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4078.00	
Shut In Tool	5.00			4083.00	
Hydraulic tool	5.00			4088.00	
Jars	5.00			4093.00	
Safety Joint	2.00			4095.00	
Packer	5.00			4100.00	27.00 Bottom Of Top Packer
Packer	4.00			4104.00	
Stubb	1.00			4105.00	
Recorder	0.00	6651	Inside	4105.00	
Recorder	0.00	8959	Outside	4105.00	
Perforations	16.00			4121.00	
Blank Off Sub	1.00			4122.00	
Blank Spacing	3.00			4125.00	21.00 Tool Interval
Packer	1.00			4126.00	
Stubb	1.00			4127.00	
Recorder	0.00	6839	Below	4127.00	
Perforations	20.00			4147.00	
Change Over Sub	1.00			4148.00	
Drill Pipe	63.00			4211.00	
Change Over Sub	1.00			4212.00	
Bulthose	3.00			4215.00	90.00 Bottom Packers & Anchor
Total Tool Length:	138.00				

Serial #: 6651

Inside Castle Resources, Inc

Lamer #1

DST Test Number: 3



Triobite Testing, Inc

Ref. No: 58056

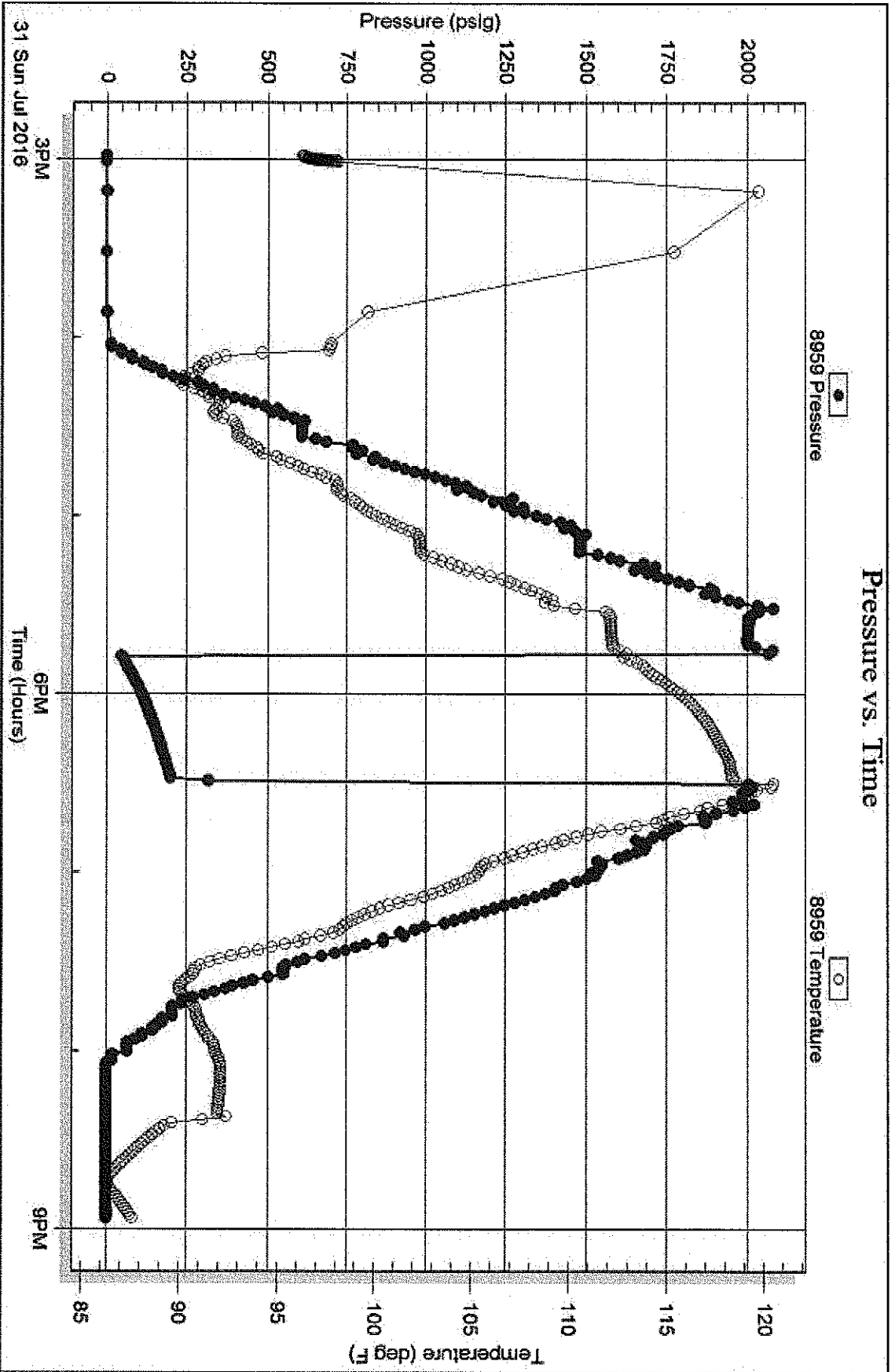
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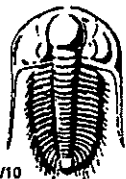
Serial #: 8959

Outside Castle Resources, Inc

Lamer #1

DST Test Number: 3





TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

No. 58055

Well Name & No. Lamer #1 Test No. 2 Date 7/30/16
 Company Castle Resources, Inc Elevation 2217 KB 2212 GL
 Address PO Box 583 Russell, KS 67665
 Co. Rep / Geo. Jerry Green Rig White Knight
 Location: Sec. 3 Twp. 17 S Rge. 21 W Co. Ness State KS

Interval Tested 4067-4111 Zone Tested Cherokee
 Anchor Length 44' Drill Pipe Run 4061 Mud Wt. 9.4
 Top Packer Depth 4062 Drill Collars Run — Vis 54
 Bottom Packer Depth 4067 Wt. Pipe Run — WL 16.2
 Total Depth 4111 Chlorides 6,500 ppm System LCM 1#
 Blow Description IF - Slowly built to 4"
IS - No flow
FF - Slowly built to 1" Pulled tool

Rec	Feet of	%gas	%oil	%water	%mud
<u>95</u>	<u>WM</u>		<u>10</u>	<u>90</u>	
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 95 BHT 113° Gravity API RW .38 @ 75 ° F Chlorides 16,000 ppm

(A) Initial Hydrostatic <u>1995</u>	<input checked="" type="checkbox"/> Test <u>1150</u>	T-On Location <u>1834</u>
(B) First Initial Flow <u>23</u>	<input checked="" type="checkbox"/> Jars <u>250</u>	T-Started <u>1845</u>
(C) First Final Flow <u>53</u>	<input checked="" type="checkbox"/> Safety Joint <u>75</u>	T-Open <u>2105</u>
(D) Initial Shut-In <u>70</u>	<input type="checkbox"/> Circ Sub	T-Pulled <u>2250</u>
(E) Second Initial Flow <u>56</u>	<input type="checkbox"/> Hourly Standby	T-Out <u>7/31 0057</u>
(F) Second Final Flow <u>61</u>	<input checked="" type="checkbox"/> Mileage <u>104 RT</u> 78	Comments
(G) Final Shut-In	<input type="checkbox"/> Sampler	
(H) Final Hydrostatic <u>1989</u>	<input type="checkbox"/> Straddle	<input type="checkbox"/> Ruined Shale Packer
Initial Open <u>45</u>	<input type="checkbox"/> Shale Packer	<input type="checkbox"/> Ruined Packer
Initial Shut-In <u>30</u>	<input type="checkbox"/> Extra Packer	<input type="checkbox"/> Extra Copies
Final Flow <u>↑ 30</u>	<input type="checkbox"/> Extra Recorder	Sub Total <u>0</u>
Final Shut-In	<input type="checkbox"/> Day Standby	Total <u>1553</u>
	<input type="checkbox"/> Accessibility	MP/DST Disc't
	Sub Total <u>1553</u>	

Approved By _____ Our Representative Brannan Lonsdale

Trilobite Testing Inc. shall not be liable for damaged of any kind of 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 statements or opinion concerning the results 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.