

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
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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				

1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Operator: Bitter Spar LLC
 Address: 2250 No. Rock Road, No. 118-I
 Wichita, KS 67226 USA
 P/316-461-8127

Well Name: Uhrich 33-3
 Location: 1537 FSL & 957 FWL Sec. 33 T10S R25W, Graham Co., KS
 API No.: 15-065-24224
 Field Name: Foxfire
 Spud Date: 09/26/2022 Drilling Completed: 10/02/2022
 Bottom Hole Location: As above
 Ground Level: 2453' (Before location was built) KB Elevation: 2458'
 Logged Interval: 3500' TO: 4080'
 Drilling Fluid Type: Freshwater/Gel to 3400', Chemical/Gel to 4080'

DST # Lansing I-J 3928-3976 30"-30"-30"-60" Initial Open: VSB Built to 1/2 inch in 30", Initial Shut-in, NoBB, Final open: No blow, Final Shut-in, NoBB, Rec. 5' M, IHP 1884#, IFP 12-14#, ISIP 198#, FFP 14-15#, FSIP 462#, FHP 1884#, BHT 114 deg F

COMMENTS
 09/26/22 MIRU Murfin Drilling Rig 16. Spud 12 1/4" Surface hole. Drilling 12 1/4" Surface hole at 222. 09/27/22. Drilling 7 7/8" hole at 330' 09/28/22 Drilling at 2045. 09/29/22 Drilling ahead at 3100. 09/30/22 Drilling ahead at 3710. 10/01/22 Making up test tools at 3976. 10/02/22 Logging

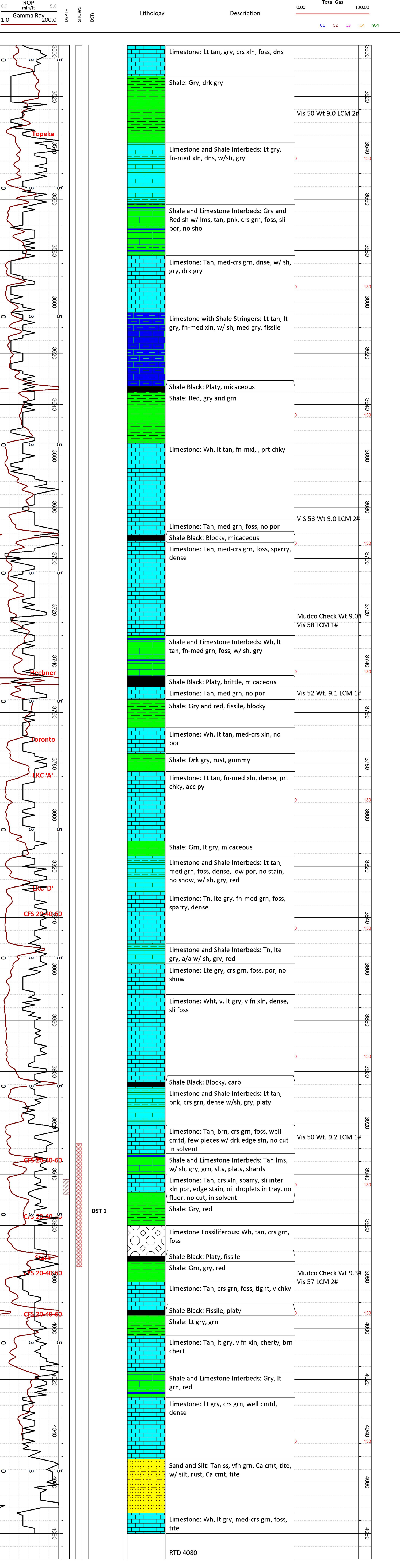
Set new 23# 8 5/8" surface pipe at 220 KB. Franks Oilfield cemented with 165 sks 80/20; 3% CC, 2% Gel. Cement did circulate.

Surveys: 1/4 deg at 222, 1 deg at 3976'

Pipe strap at DST #1. 2.94 Short to board. No correction made to board.

Log tops: Heebner Shale 3746 (-1288), Lansing A 3786 (-1328), Lansing 'C' 3816 (-1358), Stark Shale 3971 (-1513)

After review of Electric Logs, Drillstem test results and sample description the operator has elected to plug and abandon the Uhrich 33-3.



Depth (ft)	Lithology	Description	Total Gas (C1, C2, C3, IC4, nC4)
3500 - 3540	Limestone	Limestone: Lt tan, gry, crs xln, foss, dns	
3540 - 3580	Shale	Shale: Gry, drk gry	
3580 - 3620	Limestone and Shale Interbeds	Limestone and Shale Interbeds: Lt gry, fn-med xln, dns, w/sh, gry	
3620 - 3660	Shale and Limestone Interbeds	Shale and Limestone Interbeds: Gry and Red sh w/ lms, tan, pnk, crs grn, foss, sli por, no sho	
3660 - 3700	Limestone	Limestone: Tan, med-crs grn, dnse, w/ sh, gry, drk gry	
3700 - 3740	Limestone with Shale Stringers	Limestone with Shale Stringers: Lt tan, lt gry, fn-med xln, w/ sh, med gry, fissile	
3740 - 3780	Shale Black	Shale Black: Platy, micaceous Shale: Red, gry and grn	
3780 - 3820	Limestone	Limestone: Wh, lt tan, fn-mxl, , prt chky	
3820 - 3860	Limestone	Limestone: Tan, med grn, foss, no por	
3860 - 3900	Shale Black	Shale Black: Blocky, micaceous	
3900 - 3940	Limestone	Limestone: Tan, med-crs grn, foss, sparry, dense	
3940 - 3980	Shale and Limestone Interbeds	Shale and Limestone Interbeds: Wh, lt tan, fn-med grn, foss, w/ sh, gry	
3980 - 4020	Shale Black	Shale Black: Platy, brittle, micaceous	
4020 - 4060	Limestone	Limestone: Tan, med grn, no por	
4060 - 4080	Shale	Shale: Gry and red, fissile, blocky	



416 Main Street
 P.O. Box 225
 Victoria, KS 67671
 Office (785) 639-3949
 24 Hour Service Line (785) 639-7269

Invoice

Date	Invoice #
9/26/2022	0731

Please Pay from this Invoice.
 Remit Payment to:
 416 Main Street PO BOX 225
 Victoria, KS 67671
 Billing Questions-Call Tianna at
 (785) 639-3949
 Email: franksoilfield@yahoo.com

KCC License Number
 35469

Bill To
Bitter Spar LLC 2250 N Rock Road Wichita, KS 67226

County/State	Lease/Well#	Terms	Job Type
Graham County, KS	Uhrich 33-3	Net 30	Surface

Description	Quantity	Rate	Amount
Pump Charge	1	1,150.00	1,150.00
Mileage	33	6.50	214.50
Ton Mileage (min.)	1	600.00	600.00
Surface Blend	165	24.50	4,042.50T
Discount		-600.70	-600.70

Thank-You!

ENTERED SEP 28 2022

Accounts Due Net 10th. 1-1/2% Per Month on all Past Due Accounts. 18% Annual Rate.	Subtotal	\$5,406.30
We appreciate your business and look forward to serving you again!	Sales Tax (7.5%)	\$272.87
	Balance Due	\$5,679.17

FRANKS Oilfield Service

◆ 815 Main Street Victoria, KS 67671 ◆ 24 Hour Phone (785) 639-7269
 ◆ Office Phone (785) 639-3949 ◆ Email: franksoilfield@yahoo.com

TICKET NUMBER 0731
 LOCATION None
 FOREMAN Tom Williams

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-26-22	4247	Uhrich 33-3	33	10	26W	Cottman
CUSTOMER Bitter Spar LLC			TRUCK #			
MAILING ADDRESS 2250 N Rock Rd N 115-1			DRIVER			
CITY Wichita			TRUCK #			
STATE KS			DRIVER			
ZIP CODE 67226			TRUCK #			
			DRIVER			

JOB TYPE Surf HOLE SIZE _____ HOLE DEPTH 2221 CASING SIZE & WEIGHT 4 1/2"
 CASING DEPTH 220' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 13BBbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting & set up on Martin #16 Circulator mod.
Mix 185 sp surf blend & displaced with 13BBbl & shut in
Cement did circulate Shut in 9:45 am

Thanks Tom & Jack

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
PL002	1	PUMP CHARGE <u>Surface</u>	\$1150 ⁰⁰	\$1150 ⁰⁰
MO01	33	MILEAGE	\$6 ⁵⁰	\$214 ⁵⁰
MO02	8.096005	Tom Mileage Delivery	\$100 ⁰⁰	\$100 ⁰⁰
CF004	16.554	Class A 3200 270 gal 1/4" 2000	\$24 ⁵⁰	\$4042 ⁵⁰
			sub total	\$6,007 ⁰⁰
			less 10% disc.	\$600 ⁷⁰
			sub total	\$5406 ³⁰
			SALES TAX	272.87
			ESTIMATED TOTAL	5679.17

AUTHORIZATION [Signature] TITLE T.P. DATE 9-26-22

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



416 Main Street
 P.O. Box 225
 Victoria, KS 67671
 Office (785) 639-3949
 24 Hour Service Line (785) 639-7269

Invoice

Date	Invoice #
10/2/2022	0739

Please Pay from this Invoice.
 Remit Payment to:
 416 Main Street PO BOX 225
 Victoria, KS 67671
 Billing Questions-Call Tianna at
 (785) 639-3949
 Email: franksoilfield@yahoo.com

KCC License Number
 35469

Bill To
Bitter Spar LLC 2250 N Rock Road Wichita, KS 67226

County/State	Lease/Well#	Terms	Job Type
Graham County, KS	Uhrich 33-3	Net 30	Rotary Plug

Description	Quantity	Rate	Amount
Pump Charge	1	1,500.00	1,500.00
Mileage	37	6.50	240.50
11.34 tons at 37 miles	419.58	1.50	629.37
60/40 4% gel 1/4# floseal	255	16.75	4,271.25T
8-5/8 Wooden Plug	1	165.00	165.00T
Discount		-680.61	-680.61

Thank-you!

ENTERED OCT 27 2022

Accounts Due Net 10th. 1-1/2% Per Month on all Past Due Accounts. 18% Annual Rate.	Subtotal	\$6,125.51
<i>We appreciate your business and look forward to serving you again!</i>	Sales Tax (7.5%)	\$299.45
	Balance Due	\$6,424.96

FRANKS Oilfield Service

◆ 815 Main Street Victoria, KS 67671 ◆ 24 Hour Phone (785) 639-7269
 ◆ Office Phone (785) 639-3949 ◆ Email: franksoilfield@yahoo.com

TICKET NUMBER 0739
 LOCATION Harco
 FOREMAN Jack

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/2/22	4247	Whitch 33-3	33	10	25	5H

CUSTOMER <u>Bitter Spar LLC</u>			TRUCK #		DRIVER		TRUCK #		DRIVER	
MAILING ADDRESS			102		Marc					
CITY			801		Jack					
STATE										
ZIP CODE										

JOB TYPE Rotary Plug HOLE SIZE _____ HOLE DEPTH _____ CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE 4" TUBING _____ OTHER _____
 SLURRY WEIGHT 125 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting & plugged as ordered.
1st 2125' 50sv
2nd 1225' 100sv
3rd 275' 50sv
10sv downhole Plug down 1500
30sv RH 255sv
15sv MH

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
PC009	1	PUMP CHARGE <u>PTA</u>	\$1500 ⁰⁰	\$1500 ⁰⁰
M001	37	MILEAGE	\$6 ⁵⁰	\$240 ⁵⁰
M002	11.54 km	TMD	\$129 ³⁷	\$129 ³⁷
CB010	255 sv	60/40 49 gal 1/4" E6-seal	\$16 ⁷⁵	\$4,271 ²⁵
FE055	1	Workshop Plug	\$165 ⁰⁰	\$165 ⁰⁰
			sub total	\$1806 ¹²
			less 10% disc.	\$680 ⁴¹
			sub total	\$6425 ⁵¹
			SALES TAX	299.45
			ESTIMATED TOTAL	6424.96

AUTHORIZATION [Signature] TITLE J.P. DATE 10-2-22

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



Company: Bitter Spar LLC
Lease: Uhrich #33-3

SEC: 33 TWN: 10S RNG: 25W
 County: GRAHAM
 State: Kansas
 Drilling Contractor: Murfin Drilling Company, Inc - Rig 16
 Elevation: 2455 EGL
 Field Name: Foxfire
 Pool: Infield
 Job Number: 604
 API #: 15-065-24224

Operation:
 Uploading recovery & pressures

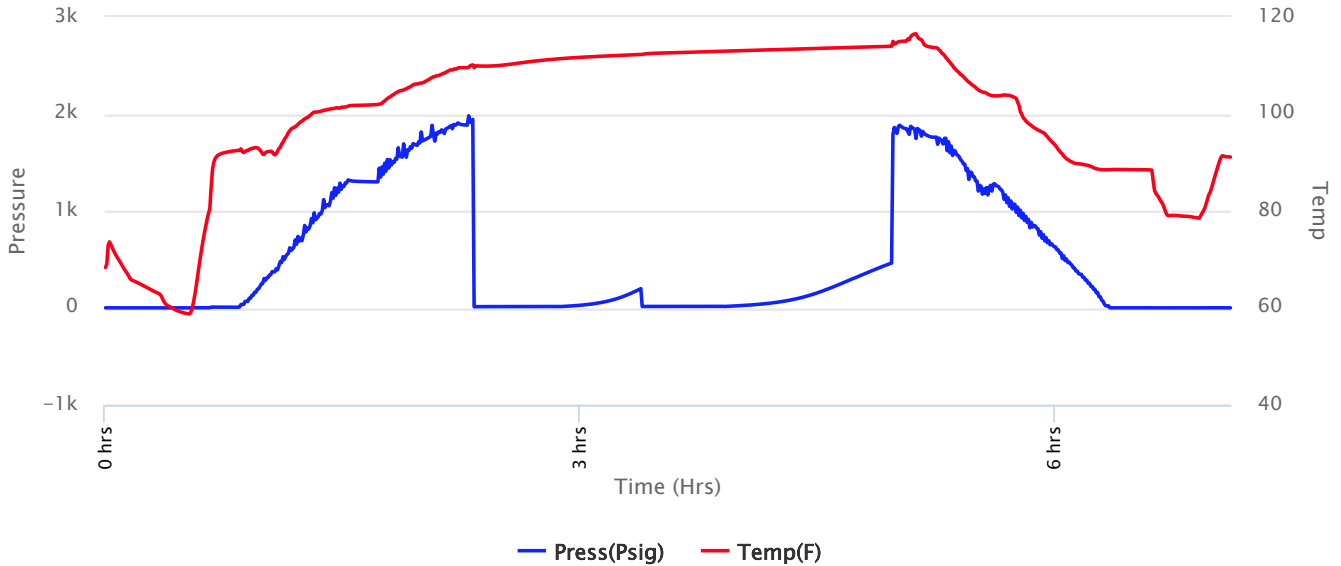
DATE
 October
01
 2022

DST #1 **Formation: Lans H-IJ** **Test Interval: 3928 - 3976'** **Total Depth: 3976'**
 Time On: 07:18 10/01 Time Off: 14:05 10/01
 Time On Bottom: 09:26 10/01 Time Off Bottom: 11:56 10/01

Electronic Volume Estimate:
 15'

<u>1st Open</u>	<u>1st Close</u>	<u>2nd Open</u>	<u>2nd Close</u>
Minutes: 30	Minutes: 30	Minutes: 30	Minutes: 60
Current Reading: .5" at 30 min	Current Reading: 0" at 30 min	Current Reading: 0" at 30 min	Current Reading: 0" at 60 min
Max Reading: .5"	Max Reading: 0"	Max Reading: 0"	Max Reading: 0"

Inside Recorder





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Recovered

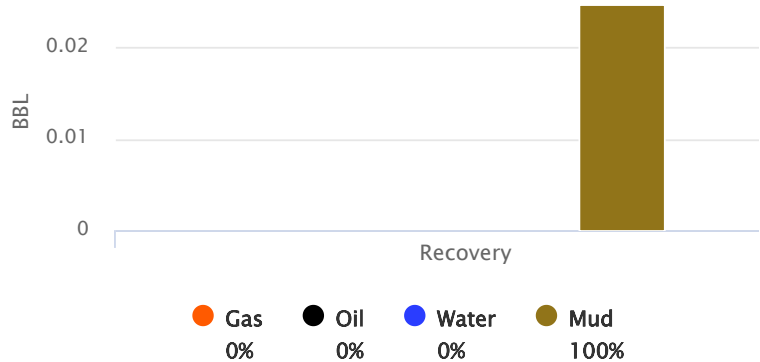
Foot	BBLs	Description of Fluid	Gas %	Oil %	Water %	Mud %
5	0.0246	M	0	0		100

Total Recovered: 5 ft
 Total Barrels Recovered: 0.0246

Reversed Out
 NO

Initial Hydrostatic Pressure	1884	PSI
Initial Flow	12 to 14	PSI
Initial Closed in Pressure	198	PSI
Final Flow Pressure	14 to 15	PSI
Final Closed in Pressure	462	PSI
Final Hydrostatic Pressure	1884	PSI
Temperature	114	°F
Pressure Change Initial Close / Final Close	0.0	%

Recovery at a glance



GIP cubic foot volume: 0



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BUCKET MEASUREMENT:

1st Open: WSB. Built to 1/2 inch in 30 minutes

1st Close: NOBB

2nd Open: No Blow

2nd Close: NOBB



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Down Hole Makeup

Heads Up: 10.58 FT	Packer 1: 3922.8 FT
Drill Pipe: 3844.51 FT <i>ID-3 1/2</i>	Packer 2: 3927.8 FT
Weight Pipe: FT <i>ID-2 7/8</i>	Top Recorder: 3912.22 FT
Collars: 61.3 FT <i>ID-2 1/4</i>	Bottom Recorder: 3964 FT
Test Tool: 33.57 FT <i>ID-3 1/2-FH</i> <i>Jars</i> <i>Safety Joint</i>	Well Bore Size: 7 7/8
Total Anchor: 48.2	Surface Choke: 1"
Anchor Makeup	Bottom Choke: 5/8"
Packer Sub: 1 FT	
Perforations: (top): 1 FT <i>4 1/2-FH</i>	
Change Over: .5 FT	
Drill Pipe: (in anchor): 31.70 FT <i>ID-3 1/2</i>	
Change Over: 1 FT	
Perforations: (below): 13 FT <i>4 1/2-FH</i>	



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Mud Properties

Mud Type: Chem **Weight:** 9.3 **Viscosity:** 57 **Filtrate:** 8 **Chlorides:** 2000 ppm



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Gas Volume Report

1st Open

2nd Open

Time	Orifice	PSI	MCF/D
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Time	Orifice	PSI	MCF/D
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