

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 3532
Name: CMX, Inc.
Address: 1551 N. Waterfront Parkway, Suite 150
City/State/Zip: Wichita, KS 67206
Purchaser: Semcrude
Operator Contact Person: Douglas H. McGinness II
Phone: (316) 269-9052
Contractor: Name: WW Drilling, LLC
License: 33575
Wellsite Geologist: Douglas H. McGinness II
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

<u>2/21/07</u>	<u>2/28/07</u>	<u>5/16/07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 195-22425-0000
County: Trego
NW SE NW SW Sec. 22 Twp. 15 S. R. 21 East West
1870 feet from S / N (circle one) Line of Section
1460 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: For A Few Dollars More Well #: 1
Field Name: DHM
Producing Formation: Pawnee A
Elevation: Ground: 2274 Kelly Bushing: 2282
Total Depth: 4250 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 236 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 4244 Feet
If Alternate II completion, cement circulated from 1650
feet depth to Surface w/ 375 sx cmt.
Att 2 - Dlg - 2/11/09

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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: _____
Title: President Date: 10/16/07
Subscribed and sworn to before me this 16th day of October,
20 07.
Notary Public: Donna L. May-Murray
Date Commission Expires: 2/7/08

DONNA L. MAY-MURRAY
Notary Public - State of Kansas
My Appt. Expires 2/7/08

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
OCT 17 2007

Operator Name: CMX, Inc. Lease Name: For A Few Dollars More Well #: 1
 Sec. 22 Twp. 15 S. R. 21 East West County: Trego

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: Gamma Ray, Bond, DIL, CPL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>3656</td> <td>(-1374)</td> </tr> <tr> <td>Lansing</td> <td>3700'</td> <td>(-1418)</td> </tr> <tr> <td>Pawnee Sst</td> <td>4112</td> <td>(-1830)</td> </tr> <tr> <td>Cherokee Sst</td> <td>4145</td> <td>(-1863)</td> </tr> <tr> <td>Miss/Cg</td> <td>4242</td> <td>(-1960)</td> </tr> </table>	Name	Top	Datum	Heebner	3656	(-1374)	Lansing	3700'	(-1418)	Pawnee Sst	4112	(-1830)	Cherokee Sst	4145	(-1863)	Miss/Cg	4242	(-1960)
Name	Top	Datum																	
Heebner	3656	(-1374)																	
Lansing	3700'	(-1418)																	
Pawnee Sst	4112	(-1830)																	
Cherokee Sst	4145	(-1863)																	
Miss/Cg	4242	(-1960)																	

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
Surface	12 1/4	8 5/8	24#	236	Common	160	2% gel, 3% cc
Production	7 7/8	4 1/2	10.5#	4244	ASC	550	10% salt

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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	4112-4119		

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumerd Production, SWD or Enhr.				Producing Method			
				<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity		
	18	0	0				

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	RECEIVED KANSAS CORPORATION COMMISSION OCT 17 2007

ALLIED CEMENTING CO., INC.

26588

SHIP TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

A.B.

DATE <i>2-21-07</i>	SEC <i>23</i>	TWP. <i>15</i>	RANGE <i>21w</i>	CALLED OUT <i>8:30 PM</i>	ON LOCATION <i>10:30 PM</i>	JOB START <i>11:00 AM</i>	JOB FINISH <i>12:45 PM</i>
WELL # <i>1</i>		LOCATION <i>McCracken + Ellis B.T. N To</i>				COUNTY <i>Trego</i>	STATE <i>KS</i>
LEASE <i>For a Few Dollars more</i>		Cobine HW 23 N 45					
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR *W-W Rig Co*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/2* T.D. *238 ft*

CASING SIZE *8 3/8* DEPTH *236 ft*

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. *15 ft*

PERFS. _____

DISPLACEMENT *14 bbl*

OWNER _____

CEMENT AMOUNT ORDERED *160 bbl Common*

32 cc 28 gal

EQUIPMENT

PUMP TRUCK # *181* CEMENTER *Mike M.*

HELPER *Kevin D.*

BULK TRUCK # *357* DRIVER *Don D.*

BULK TRUCK # _____ DRIVER _____

COMMON	<i>160 bbl.</i>	@	<i>10.65</i>	<i>1704.00</i>
POZMIX		@		
GEL	<i>3 gal</i>	@	<i>16.65</i>	<i>49.95</i>
CHLORIDE	<i>5 gal</i>	@	<i>46.60</i>	<i>233.00</i>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>168 bbl</i>	@	<i>1.90</i>	<i>319.20</i>
MILEAGE	<i>168 mi 09</i>	@	<i>34</i>	<i>514.08</i>
TOTAL				<i>2820.23</i>

REMARKS:

*Circulate hole with Rig mud pump
Mix Cement + 90 lb bag Plug Displacer
Plug Down with water*

*Cement did circulate to
Surface*

SERVICE

DEPTH OF JOB	<i>236 ft</i>			
PUMP TRUCK CHARGE				<i>815.00</i>
EXTRA FOOTAGE		@		
MILEAGE	<i>34</i>	@	<i>6.00</i>	<i>204.00</i>
MANIFOLD		@		
		@		
		@		
TOTAL				<i>1019.00</i>

CHARGE TO: *C.M.X. Inc*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
TOTAL _____			

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

*Thank you
KJ*

SIGNATURE *[Signature]*

Kyle Kinderknecht
PRINTED NAME

ALLIED CEMENTING CO., INC.

26593

MIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

M.B.

DATE <i>2-28-07</i>	SEC <i>27</i>	TWP. <i>15s</i>	RANGE <i>21w</i>	CALLED OUT	ON LOCATION	JOB START <i>7:30 AM</i>	JOB FINISH <i>3:00 PM</i>
LEASE <i>for A low Dollars more</i>		WELL # <i>2</i>	LOCATION <i>McCracken N To Ellis B.T. N</i>		COUNTY <i>Trago</i>	STATE <i>K.S.</i>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)		To Co line HW 2 3/4 N W1/4					

CONTRACTOR <i>W-W Rig 6</i>	OWNER
TYPE OF JOB <i>Two stage Pipe Top stage</i>	CEMENT
HOLE SIZE T.D. <i>4250 ft</i>	AMOUNT ORDERED <i>375 sk 4 1/2" 1/4" #</i>
CASING SIZE <i>4 1/2"</i> DEPTH <i>1650 #</i>	<i>For SEAL</i>
TUBING SIZE DEPTH	
DRILL PIPE <i>25 To Open Depth Tool 700 #</i>	
TOOL <i>DV Tool</i> DEPTH	
PRES. MAX MINIMUM	COMMON @
MEAS. LINE SHOE JOINT	POZMIX @
CEMENT LEFT IN CSG.	GEL @
PERFS.	CHLORIDE @
DISPLACEMENT <i>26.2 bbl</i>	ASC @

EQUIPMENT

PUMP TRUCK # <i>274</i>	CEMENTER <i>Mike m.</i>
	HELPER <i>Jim w.</i>
BULK TRUCK # <i>357</i>	DRIVER <i>David J.</i>
BULK TRUCK #	DRIVER

ALW <i>375 sk</i>	@ <i>9.95</i>	<i>3731.25</i>
<i>For SEAL 94 #</i>	@ <i>2.00</i>	<i>188.00</i>
HANDLING <i>399.00</i>	@ <i>1.90</i>	<i>758.10</i>
MILEAGE <i>399.00</i>	@ <i>34</i>	<i>1220.04</i>
TOTAL		<i>5898.29</i>

REMARKS:

*Open The Tool Joint on 700 #
Circulate Hole for 2hr
Mix Cement + Release Plug
Displace Plug Down
Cement could circulate to
Surface
Float did not hold
shut in lost hood on
by calculation*

CHARGE TO: *C.M.X. Inc*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB <i>1650 #</i>		
PUMP TRUCK CHARGE		<i>955.00</i>
EXTRA FOOTAGE @		
MILEAGE <i>34</i> @ <i>6.00</i>		<i>NC</i>
MANIFOLD @		
TOTAL		<i>955.00</i>

PLUG & FLOAT EQUIPMENT

@		
@		
@		
@		
@		
TOTAL		

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE *[Signature]*

Thank You

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME

ALLIED CEMENTING CO., INC.

26592

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: e. B.

DATE <u>7-27-07</u>	SEC <u>22</u>	TWP <u>15s</u>	RANGE <u>21w</u>	CALLED <u>3 PM</u>	ON LOCATION <u>5 PM</u>	JOB START <u>10 AM</u>	JOB FINISH <u>10 PM</u>
WELL # <u>2</u>		LOCATION <u>McCracken N To Ellis B.E. N.</u>			COUNTY <u>Terro</u>	STATE <u>K.S.</u>	
LEASE <u>For A Saw</u>		To Collins 4w 23 N 1/5					

CONTRACTOR W-W Rig #6 OWNER _____

TYPE OF JOB Two Stage Pipe Job Bottom Stage

HOLE SIZE _____ T.D. 4250 CEMENT _____

CASING SIZE 15 1/2 DEPTH 4241' 92" AMOUNT ORDERED 175 ASC

TUBING SIZE _____ DEPTH _____ 1028alt 22 gal 500 gal ASF

DRILL PIPE _____ DEPTH _____ 2 1/2 gal KCL w/ w.

TOOL D.V. Tool DEPTH 1650' 12

PRES. MAX 1000' MINIMUM 500'

MEAS. LINE _____ SHOE JOINT 20.35

CEMENT LEFT IN CSG. 20' 32"

PERFS. _____

DISPLACEMENT 67 bbl

EQUIPMENT

PUMP TRUCK CEMENTER Mike m

274 HELPER Jim w

BULK TRUCK

342 DRIVER David J.

BULK TRUCK

_____ DRIVER _____

COMMON	@		
POZMIX	@		
GEL	@	<u>3 gal</u>	<u>16.65</u>
CHLORIDE	@		
ASC	@	<u>175 alt</u>	<u>13.10</u>
SALT	@	<u>11 alt</u>	<u>2292.50</u>
AS FLUSH	@	<u>500 GAL</u>	<u>19.20</u>
CUA PRO	@	<u>2 1/2 GAL</u>	<u>211.20</u>
	@		<u>1.00</u>
	@		<u>500.00</u>
	@		<u>25.00</u>
	@		<u>62.50</u>
	@		
	@		
HANDLING	@	<u>200 alt</u>	<u>1.90</u>
MILEAGE	@	<u>200 alt 09</u>	<u>34</u>
			<u>380.00</u>
			<u>612.00</u>
			<u>4108.15</u>

REMARKS:

circulate hole with Rig mud pump
M-X mud flush with 10 bbl + then
mix KCL water with 10 bbl of water
mix cement plug Red Hole Pump rest
of cement down + Release plug pump
plug down with water
hard plug at 1000'
float held

SERVICE

DEPTH OF JOB	<u>4241'</u>		
PUMP TRUCK CHARGE			<u>1675.00</u>
EXTRA FOOTAGE	@		
MILEAGE	@	<u>34</u>	<u>6.00</u>
MANIFOLD	@		
HEAD RENTAL	@	<u>100.00</u>	<u>100.00</u>
	@		
			<u>1979.00</u>

CHARGE TO: C.M. X Inc

STREET _____

CITY _____ STATE _____ ZIP _____

Thank you all

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT

1-4 1/2 A.F.U. Float shoe		<u>245.00</u>
1-4 1/2 hatch Down Plug @		<u>325.00</u>
2-4 1/2 Basket @	<u>130.00</u>	<u>260.00</u>
10-4 1/2 Centralizers @	<u>45.00</u>	<u>450.00</u>
1-4 1/2 D.V. Tool @		<u>3250.00</u>
	@	
		<u>4530.00</u>

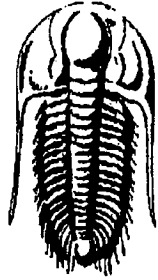
TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME _____



TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Prepared For: **CMX Inc**

1551 N Waterfront Pkwy Ste 150
Wichita KS 67206

ATTN: Douglas H McGinness

22 15S 21W Trego KS

For A Few Dollars More

Start Date: 2007.02.26 @ 12:58:12

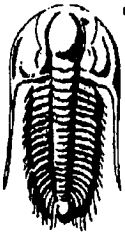
End Date: 2007.02.26 @ 18:14:12

Job Ticket #: 27536 DST #: 1

Trilobite Testing, Inc

PO Box 362 Hays, KS 67601

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



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

CMX Inc
1551 N Waterfront Pkwy Ste 150
Wichita KS 67206
ATTN: Douglas H McGinness

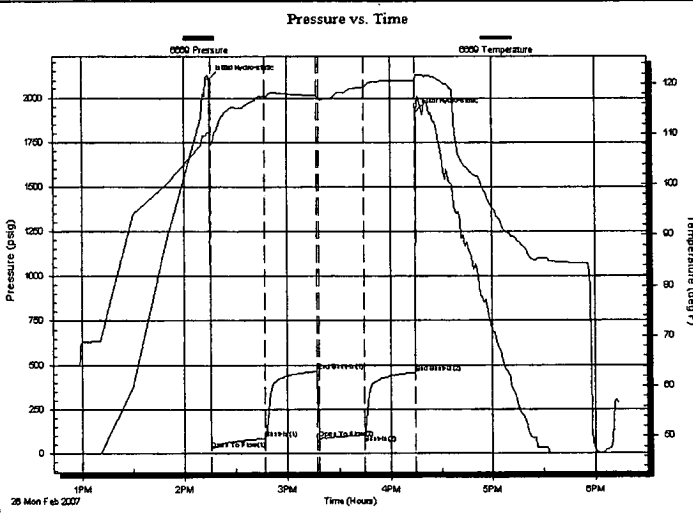
For A Few Dollars More
22 15S 21W Trego KS
Job Ticket: 27536 DST#: 1
Test Start: 2007.02.26 @ 12:58:12

GENERAL INFORMATION:

Formation: **Pwn.Sand**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 14:15:42
Time Test Ended: 18:14:12
Interval: **4080.00 ft (KB) To 4118.00 ft (KB) (TVD)**
Total Depth: 4118.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Fair
Test Type: Conventional Bottom Hole
Tester: John Schmidt
Unit No: 31
Reference Elevations: 2279.00 ft (KB)
2274.00 ft (CF)
KB to GR/CF: 5.00 ft

Serial #: 6669 Inside
Press@RunDepth: 105.00 psig @ 4082.00 ft (KB) Capacity: 7000.00 psig
Start Date: 2007.02.26 End Date: 2007.02.26 Last Calib.: 2007.02.26
Start Time: 12:58:17 End Time: 18:14:11 Time On Btm: 2007.02.26 @ 14:15:12
Time Off Btm: 2007.02.26 @ 16:15:12

TEST COMMENT: IF Weak to Good built 10 "
ISI Weak Surface
FF Weak to good built 11"
FSI Weak surface



PRESSURE SUMMARY

Time (Mn.)	Pressure (psig)	Temp (deg F)	Annotation
0	2108.04	110.25	Initial Hydro-static
1	22.22	107.83	Open To Flow (1)
32	83.43	117.39	Shut-In (1)
62	464.94	117.69	End Shut-In (1)
63	83.39	116.81	Open To Flow (2)
90	105.00	119.24	Shut-In (2)
120	455.80	120.54	End Shut-In (2)
120	1922.53	121.66	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
240.00	GMC Oil 5%G 30%M 65%O	2.30
0.00	250 GIP	0.00

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

CMX Inc
1551 N Waterfront Pkwy Ste 150
Wichita KS 67206

ATTN: Douglas H McGinness

For A Few Dollars More
22 15S 21W Trego KS
Job Ticket: 27536 DST#: 1
Test Start: 2007.02.26 @ 12:58:12

Tool Information

Drill Pipe:	Length: 3940.00 ft	Diameter: 3.80 inches	Volume: 55.27 bbl	Tool Weight: 2600.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 2.70 inches	Volume: 0.00 bbl	Weight set on Packer: 20000.00 lb
Drill Collar:	Length: 117.00 ft	Diameter: 2.25 inches	Volume: 0.58 bbl	Weight to Pull Loose: 60000.00 lb
			<u>Total Volume: 55.85 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	5.00 ft			String Weight: Initial 50000.00 lb
Depth to Top Packer:	4080.00 ft			Final 51000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	38.00 ft			
Tool Length:	66.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

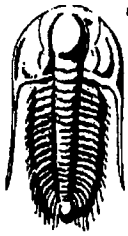
Tool Comments:

Tool Description

Length (ft) Serial No. Position Depth (ft) Accum. Lengths

Change Over Sub	1.00			4053.00	
Shut In Tool	5.00			4058.00	
Hydraulic tool	5.00			4063.00	
Jars	5.00			4068.00	
Safety Joint	3.00			4071.00	
Packer	4.00			4075.00	28.00 Bottom Of Top Packer
Packer	5.00			4080.00	
Stubb	1.00			4081.00	
Perforations	1.00			4082.00	
Recorder	0.00	6669	Inside	4082.00	
Blank Spacing	28.00			4110.00	
Recorder	0.00	11084	Outside	4110.00	
Perforations	5.00			4115.00	
Bullnose	3.00			4118.00	38.00 Bottom Packers & Anchor

Total Tool Length: 66.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

CMX Inc
1551 N Waterfront Pkwy Ste 150
Wichita KS 67206
ATTN: Douglas H McGinness

For A Few Dollars More
22 15S 21W Trego KS
Job Ticket: 27536 **DST#: 1**
Test Start: 2007.02.26 @ 12:58:12

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: 47.00 sec/qt	Cushion Volume: bbl		
Water Loss: 8.79 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
240.00	GMC Oil 5%G 30%M 65%O	2.301
0.00	250 GIP	0.000

Total Length: 240.00 ft Total Volume: 2.301 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments:

