

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1  
June 2009

Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31297  
Name: James B Read Operating Inc.  
Address 1 PO Box 638  
Address 2: \_\_\_\_\_  
City: Ardmore State: OK Zip: 73402-0638  
Contact Person: Randall Voth  
Phone: (316) 841-3053  
CONTRACTOR: License # 5822  
Name: Val Energy Inc.  
Wellsite Geologist: Stephen Miller  
Purchaser: \_\_\_\_\_

Designate Type of Completion:

- |   |   |                                   |                                     |
|---|---|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> New Well   | <input type="checkbox"/> Re-Entry       | <input type="checkbox"/> Workover |                                     |
| <input type="checkbox"/> Oil  | <input type="checkbox"/> WSW            | <input type="checkbox"/> SWD      | <input type="checkbox"/> SLOW       |
| <input type="checkbox"/> Gas  | <input checked="" type="checkbox"/> D&A | <input type="checkbox"/> ENHR     | <input type="checkbox"/> SIGW       |
| <input type="checkbox"/> OG   |   | <input type="checkbox"/> GSW      | <input type="checkbox"/> Temp. Abd. |
| <input type="checkbox"/> CM (Coal Bed Methane)  |   |                                   |                                     |
| <input type="checkbox"/> Cathodic <input type="checkbox"/> Other (Core, Expl., etc.): _____ |   |                                   |                                     |

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

- |  |                                   |  |                                       |
|--|-----------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Deepening       | <input type="checkbox"/> Re-perf. | <input type="checkbox"/> Conv. to ENHR | <input type="checkbox"/> Conv. to SWD |
|  |                                   | <input type="checkbox"/> Conv. to GSW  |                                       |
| <input type="checkbox"/> Plug Back:      | _____                             | Plug Back Total Depth                  | _____                                 |
| <input type="checkbox"/> Commingled      | Permit #:                         | _____                                  |                                       |
| <input type="checkbox"/> Dual Completion | Permit #:                         | _____                                  |                                       |
| <input type="checkbox"/> SWD             | Permit #:                         | _____                                  |                                       |
| <input type="checkbox"/> ENHR            | Permit #:                         | _____                                  |                                       |
| <input type="checkbox"/> GSW             | Permit #:                         | _____                                  |                                       |

<u>10-9-10</u>	<u>10-16-10</u>	<u>10-16-10</u>
Spud Date or Recompletion Date	Date Reached ID	Completion Date or Recompletion Date

API No. 15 - 155-21565-0000  
Spot Description: \_\_\_\_\_  
SE NW SW - NW Sec. 9 Twp. 25 S. R. 8  East  West  
1667 FNL Feet from  North /  South Line of Section  
335 FWL Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Reno  
Lease Name: Shultz Well #: 1  
Field Name: None  
Producing Formation: None  
Elevation: Ground: 1631 Kelly Bushing: 1641  
Total Depth: 3916 Plug Back Total Depth: 1250  
Amount of Surface Pipe Set and Cemented at: 308 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: 38,000 ppm Fluid volume: 900 bbls

Dewatering method used: Allow pit to dry

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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.

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.

Signature: [Signature]  
Title: Agent Date: 6-6-11

KCC Office Use ONLY

Letter of Confidentiality Received

Date: \_\_\_\_\_

Confidential Release Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT  I  II  III Approved by: Dg

RECEIVED

JUN 06 2011

KCC WICHITA  
Date: 6/10/11

*James B Read*

Operator Name: James B Read Operating Co Lease Name: Shultz Well #: 1

Sec. 9 Twp. 25 S. R. 8W  East  West County: Reno

**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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

<p>Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i></p> <p>List All E. Logs Run:</p>	<p><input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample</p> <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 Sh</td> <td>3070</td> <td>-1429</td> </tr> <tr> <td>Brown Lime</td> <td>3260</td> <td>-1619</td> </tr> <tr> <td>Lansing Lime</td> <td>3289</td> <td>-1648</td> </tr> <tr> <td>Stark Shale</td> <td>3566</td> <td>-1925</td> </tr> <tr> <td>Base Kansas City</td> <td>3660</td> <td>-2019</td> </tr> <tr> <td>Mississippian</td> <td>3833</td> <td>-2192</td> </tr> </table>	Name	Top	Datum	Heebner Sh	3070	-1429	Brown Lime	3260	-1619	Lansing Lime	3289	-1648	Stark Shale	3566	-1925	Base Kansas City	3660	-2019	Mississippian	3833	-2192
Name	Top	Datum																				
Heebner Sh	3070	-1429																				
Brown Lime	3260	-1619																				
Lansing Lime	3289	-1648																				
Stark Shale	3566	-1925																				
Base Kansas City	3660	-2019																				
Mississippian	3833	-2192																				

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	21#	308	Common POZ Mix	285	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate ___ Protect Casing <input checked="" type="checkbox"/> Plug Back TD ___ Plug Off Zone	1250	Common as Pax 62	161	Gel 6 sx

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: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. _____		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> 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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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*11/10/00*

*605*

# ALLIED CEMENTING CO., LLC. 042231

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

SERVICE POINT:  
Medicine Lake, KS

DATE <u>10-9-2010</u>	SEC. <u>9</u>	TWP. <u>25s</u>	RANGE <u>8W</u>	CALLED OUT <u>10:00 AM</u>	ON LOCATION <u>1:00 PM</u>	JOB START <u>6:00 PM</u>	JOB FINISH <u>6:30 PM</u>
LEASE <u>Shut</u>	WELL # <u>1</u>	LOCATION <u>Arlington Ks 2 West to</u>			COUNTY <u>Reno</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)		Bone Springs Rd, <u>3/4 N</u> , <u>Elinto</u>					

CONTRACTOR UOI #3  
 TYPE OF JOB Surface  
 HOLE SIZE 12 1/4 T.D. 310  
 CASING SIZE 8 5/8 DEPTH 308  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT 42  
 CEMENT LEFT IN CSG.  
 PERFS.  
 DISPLACEMENT 17 bbls of fresh water

OWNER UOI Oil  
 CEMENT  
 AMOUNT ORDERED 150 sx 60' 40' 20' 60'  
3% oil, 100sx class A + 10% oil + 5#  
Kolseal + 1/2# floseal + 3% oil

EQUIPMENT  
 PUMP TRUCK CEMENTER Derin F  
 # 414-302 HELPER ms + T  
 BULK TRUCK  
 # 381-242 DRIVER Jason T  
 BULK TRUCK  
 # DRIVER

COMMON	<u>190 sx</u>	@	<u>15.45</u>	<u>2935.50</u>
POZMIX	<u>60 sx</u>	@	<u>8.00</u>	<u>480.00</u>
GEL	<u>3 sx</u>	@	<u>20.80</u>	<u>62.40</u>
CHLORIDE	<u>10 sx</u>	@	<u>58.20</u>	<u>582.00</u>
ASC		@		
<u>Kolseal</u>	<u>500 #</u>	@	<u>-89</u>	<u>445.00</u>
<u>Salt</u>	<u>10 sx</u>	@	<u>12.00</u>	<u>120.00</u>
<u>Floseal</u>	<u>50 #</u>	@	<u>2.50</u>	<u>125.00</u>
		@		
		@		
		@		
		@		
HANDLING	<u>285</u>	@	<u>2.40</u>	<u>684.00</u>
MILEAGE	<u>285 / 10 / 30</u>			<u>855.00</u>
				TOTAL <u>6288.90</u>

**REMARKS:**

Pipe on bottom & break circulation  
Pump 3 bbls of fresh water ahead  
mix 150sx of 100d cement, mix 100sx  
of 40d cement, shut down, Release  
plug, start displacement, bump plug  
at 17 bbls 300-500 ps, float did  
hold cement did circulate

**SERVICE**

DEPTH OF JOB	<u>308</u>		
PUMP TRUCK CHARGE	<u>1018 #</u>		
EXTRA FOOTAGE	<u>10</u>	@	<u>-85</u> <u>8.50</u>
MILEAGE	<u>30</u>	@	<u>7.00</u> <u>210.00</u>
MANIFOLD		@	
	<u>Hose rental</u>	@	
		@	

CHARGE TO: UOI Oil

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

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TOTAL 1236.50

**PLUG & FLOAT EQUIPMENT**

<u>8 5/8</u>			
1- wooden plug	@		<u>68.00</u>
1- AFV Insert	@		<u>158.20</u>
1- BSS Key	@		<u>316.00</u>
1- Guide Shoe	@		<u>257.60</u>
3- Cement Slugs	@	<u>44.80</u>	<u>134.40</u>
TOTAL <u>934.20</u>			

To Allied Cementing Co., LLC.  
 You are hereby requested to rent cementing equipment and furnish cements 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.

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES ~~1236.50~~

DISCOUNT \_\_\_\_\_

IF PAID IN 30 DAYS

PRINTED NAME x Rodney Gonzalez

SIGNATURE x Rodney Gonzalez

Thank You!!!

# ALLIED CEMENTING CO., LLC. 041408

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

SERVICE POINT:  
*Medicine Lodge, KS.*

DATE <i>10-16-2010</i>	SEC. <i>9</i>	TWP. <i>25s</i>	RANGE <i>8W</i>	CALLED OUT	ON LOCATION	JOB START <i>12:00 PM</i>	JOB FINISH <i>2:00 PM</i>
LEASE <i>Swilt</i>	WELL # <i>1</i>	LOCATION <i>Arlington, KS. 2 West</i>			COUNTY <i>Reno</i>	STATE <i>Kansas</i>	
OLD OR NEW (Circle one) <u>NEW</u>				<i>3/4 North E/S</i>			

CONTRACTOR *VAL #3*

TYPE OF JOB *Rotary Plug*

HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_

CASING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE *4 1/2"* DEPTH *1250*

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX *300* MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT *Fresh*

OWNER *Voth Oil*

CEMENT AMOUNT ORDERED  
*155 sx 60:40:4 1/2 gel*

COMMON	<i>A</i>	<i>93 sx</i>	@	<i>15.45</i>	<i>1436.85</i>
POZMIX		<i>62 sx</i>	@	<i>8.00</i>	<i>496.00</i>
GEL		<i>6 sx</i>	@	<i>20.80</i>	<i>124.80</i>
CHLORIDE			@		
ASC			@		
			@		
			@		
			@		
			@		
			@		
			@		
			@		
			@		
HANDLING		<i>161</i>	@	<i>2.40</i>	<i>386.40</i>
MILEAGE		<i>161/10/30</i>			<i>483.00</i>
TOTAL					<i>2927.05</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Carl Bolding*

# *360-265* HELPER *Matt Thimesch*

BULK TRUCK

# *CB* DRIVER *Wayne Davis*

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

*Pump 35 sx - 1250'*

*35 sx - 700'*

*35 sx - 350'*

*25 sx - 60'*

*10 sx - Mouse Hole*

*15 sx - Rat Hole*

CHARGE TO: *Voth Oil*

STREET *229 E William 2nd Floor Suite 201*

CITY *Wichita* STATE *KS.* ZIP \_\_\_\_\_

SERVICE

DEPTH OF JOB *1250'*

PUMP TRUCK CHARGE *1010'*

EXTRA FOOTAGE @ \_\_\_\_\_

MILEAGE *30* @ *7.00* = *210.00*

MANIFOLD @ \_\_\_\_\_

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TOTAL *1220.00*

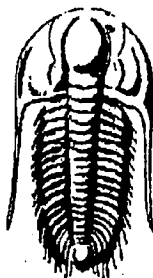
KCC WICHITA  
PLUG & FLOAT EQUIPMENT

To Allied Cementing Co., LLC.  
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 *Rodney Gonzalez*

SIGNATURE *Rodney Gonzalez*

	@	
X	@	
	@	
	@	
	@	
	@	
TOTAL _____		
SALES TAX (If Any) _____		
TOTAL CHARGES <del>_____</del>		
DISCOUNT _____ IF PAID IN 30 DAYS		



**TRILOBITE**  
**TESTING, INC.**

## DRILL STEM TEST REPORT

Prepared For: **James B Read Operating Inc**

PO Box 638  
Ardmore OK 73402

ATTN: Steve Miller

**9 25s 8w Reno,KS**

**Shultz #1**

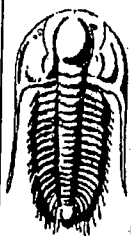
Start Date: 2010.10.15 @ 05:58:32

End Date: 2010.10.15 @ 12:45:47

Job Ticket #: 39477                      DST #: 1

Trilobite Testing, Inc  
PO Box 1733 Hays, KS 67601  
ph: 785-625-4778 fax: 785-625-5620

RECEIVED  
JUN 06 2011  
KCC WICHITA



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

James B Read Operating Inc

**Shultz #1**

PO Box 638  
Ardmore OK 73402

**9 25s 8w Reno,KS**

Job Ticket: 39477      **DST#: 1**

ATTN: Steve Miller

Test Start: 2010.10.15 @ 05:58:32

## GENERAL INFORMATION:

Formation: **Kansas City**  
 Deviated: **No Whipstock:**      ft (KB)  
 Time Tool Opened: 08:16:32  
 Time Test Ended: 12:45:47

Test Type: **Conventional Straddle**  
 Tester: **Esak Hadley**  
 Unit No: **34**

Interval: **3595.00 ft (KB) To 3633.00 ft (KB) (TVD)**  
 Total Depth: **3795.00 ft (KB) (TVD)**  
 Hole Diameter: **7.88 inches** Hole Condition: **Fair**

Reference Elevations: **1644.00 ft (KB)**  
**1631.00 ft (CF)**  
 KB to GRVCF: **13.00 ft**

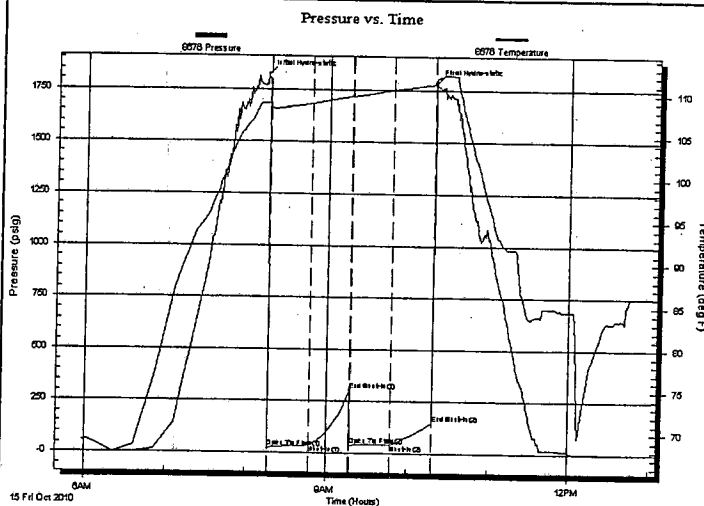
**Serial #: 8676**

**Inside**

Press@RunDepth: **44.14 psig @ 3596.00 ft (KB)**  
 Start Date: **2010.10.15**      End Date: **2010.10.15**  
 Start Time: **05:58:37**      End Time: **12:45:46**

Capacity: **8000.00 psig**  
 Last Calib.: **2010.10.15**  
 Time On Btm: **2010.10.15 @ 08:14:17**  
 Time Off Btm: **2010.10.15 @ 10:19:02**

**TEST COMMENT:** IF Weak surface blow . No more than 1/4".  
 ISI No blow .  
 FF Weak blow . No more than 1".  
 FSI No blow .



## PRESSURE SUMMARY

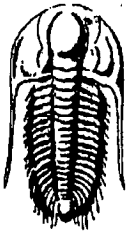
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1821.63	108.88	Initial Hydro-static
3	25.61	108.22	Open To Flow (1)
34	37.64	108.92	Shut-In(1)
63	304.50	109.81	End Shut-In(1)
64	39.19	109.72	Open To Flow (2)
94	44.14	110.54	Shut-In(2)
125	145.19	111.21	End Shut-In(2)
125	1784.10	111.85	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
20.00	SOCM 2% 98% m	0.10

## Gas Rates

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



**TRILOBITE  
TESTING, INC**

## DRILL STEM TEST REPORT

James B Read Operating Inc

**Shultz #1**

PO Box 638  
Ardmore OK 73402

**9 25s 8w Reno,KS**

Job Ticket: 39477

**DST#: 1**

ATTN: Steve Miller

Test Start: 2010.10.15 @ 05:58:32

**GENERAL INFORMATION:**

Formation: **Kansas City**  
 Deviated: **No Whipstock:** ft (KB)  
 Time Tool Opened: 08:16:32  
 Time Test Ended: 12:45:47

Test Type: **Conventional Straddle**  
 Tester: **Esak Hadley**  
 Unit No: **34**

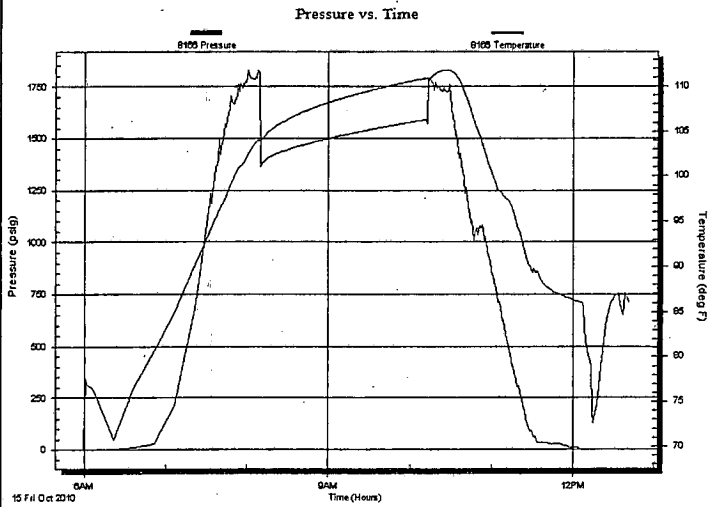
Interval: **3595.00 ft (KB) To 3633.00 ft (KB) (TVD)**  
 Total Depth: **3795.00 ft (KB) (TVD)**  
 Hole Diameter: **7.88 inches** Hole Condition: **Fair**

Reference Elevations: **1644.00 ft (KB)**  
**1631.00 ft (CF)**  
 KB to GR/CF: **13.00 ft**

**Serial #: 8166 Below (Straddle)**  
 Press@RunDepth: psig @ **3636.00 ft (KB)**  
 Start Date: **2010.10.15** End Date: **2010.10.15**  
 Start Time: **05:58:37** End Time: **12:42:16**

Capacity: **8000.00 psig**  
 Last Calib.: **2010.10.15**  
 Time On Btm:  
 Time Off Btm:

**TEST COMMENT:** IF Weak surface blow . No more than 1/4".  
 ISI No blow.  
 FF Weak blow . No more than 1".  
 FSI No blow.



**PRESSURE SUMMARY**

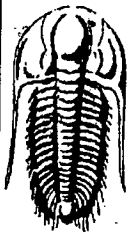
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

**Recovery**

Length (ft)	Description	Volume (bbl)
20.00	SOCM 2%o 98%m	0.10

**Gas Rates**

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



**TRILOBITE  
TESTING, INC**

**DRILL STEM TEST REPORT**

**TOOL DIAGRAM**

James B Read Operating Inc

**Shultz #1**

PO Box 638  
Ardmore OK 73402

**9 25s 8w Reno,KS**

Job Ticket: 39477

**DST#: 1**

ATTN: Steve Miller

Test Start: 2010.10.15 @ 05:58:32

**Tool Information**

Drill Pipe:	Length: 3469.00 ft	Diameter: 3.80 inches	Volume: 48.66 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: 24000.00 lb
Drill Collar:	Length: 120.00 ft	Diameter: 2.25 inches	Volume: 0.59 bbl	Weight to Pull Loose: 66000.00 lb
			<b>Total Volume: 49.25 bbl</b>	Tool Chased: 0.00 ft
Drill Pipe Above KB:	25.00 ft			String Weight: Initial 56000.00 lb
Depth to Top Packer:	3595.00 ft			Final 56000.00 lb
Depth to Bottom Packer:	3795.00 ft			
Interval between Packers:	200.00 ft			
Tool Length:	231.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

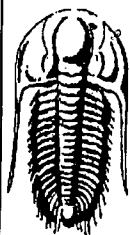
Tool Comments:

**Tool Description**

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			3565.00	
Shut In Tool	5.00			3570.00	
Sampler	3.00			3573.00	
Hydraulic tool	5.00			3578.00	
Jars	5.00			3583.00	
Safety Joint	2.00			3585.00	
Packer	5.00			3590.00	31.00 Bottom Of Top Packer
Packer	5.00			3595.00	
Stubb	1.00			3596.00	
Recorder	0.00	8676	Inside	3596.00	
Recorder	0.00	6773	Outside	3596.00	
Perforations	33.00			3629.00	
Blank Off Sub	1.00			3630.00	
Packer - Shale	5.00			3635.00	
Change Over Sub	1.00			3636.00	
Recorder	0.00	8166	Below	3636.00	
Drill Pipe	155.00			3791.00	
Change Over Sub	1.00			3792.00	
Bullnose	3.00			3795.00	200.00 Bottom Packers & Anchor

**Total Tool Length: 231.00**





**TRILOBITE**  
**TESTING, INC**

## DRILL STEM TEST REPORT

FLUID SUMMARY

James B Read Operating Inc

Shultz #1

PO Box 638  
Ardmore OK 73402

9 25s 8w Reno,KS

Job Ticket: 39477

DST#: 1,

ATTN: Steve Miller

Test Start: 2010.10.15 @ 05:58:32

### Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 10.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 52.00 sec/qt	Cushion Volume: bbl		
Water Loss: 7.99 in <sup>3</sup>	Gas Cushion Type:		
Resistivity: 0.00 ohm.m	Gas Cushion Pressure: psig		
Salinity: 5000.00 ppm			
Filter Cake: 0.20 inches			

### Recovery Information

Recovery Table

Length ft	Description	Volume bbl
20.00	SOCM 2%o 98%m	0.098

Total Length: 20.00 ft      Total Volume: 0.098 bbl

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

Laboratory Name:      Laboratory Location:

Recovery Comments:

