



KANSAS CORPORATION COMMISSION 1069721
OIL & GAS CONSERVATION DIVISION

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 # 3273
Name: HERMAN L. LOEB, LLC
Address 1: PO BOX 838
Address 2: _____
City: LAWRENCEVILLE State: IL Zip: 62439 + _____
Contact Person: Jesse Middagh
Phone: (618) 943-2227
CONTRACTOR: License # 5142
Name: Sterling Drilling Company
Wellsite Geologist: Mikeal Maune
Purchaser: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 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
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____
08/10/2011 08/20/2011 09/29/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-007-23746-00-00
Spot Description: _____
_____ NW SE Sec. 21 Twp. 33 S. R. 11 East West
1980 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barber
Lease Name: Page Well #: B-14
Field Name: _____
Producing Formation: Mississippian
Elevation: Ground: 1416 Kelly Bushing: 1425
Total Depth: 5074 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 293 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: 70 ppm Fluid volume: 210 bbls
Dewatering method used: Evaporated
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

Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Deanna Gerritor Date: 12/12/2011



1069721

Operator Name: HERMAN L. LOEB, LLC Lease Name: Page Well #: B-14
 Sec. 21 Twp. 33 S. R. 11 East West County: Barber

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.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual Spaced Neutron Micro Log Dual Induction	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Spectral Density Dual Spaced Neutron 3150
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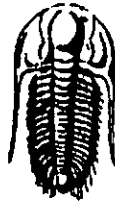
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12.25	8.625	24	293	common	200	
Production	7.875	5.5	15.5	5030	AA 2	200	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ Plug Off Zone	-			

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 <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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Prepared For: **Herman Loeb LLC**
PO Box 838
Lawrenceville IL 62439

ATTN: George Payne

3 35S 12W Barber KS

Lohman B-9

Start Date: 2011.03.28 @ 01:38:19

End Date: 2011.03.28 @ 12:00:04

Job Ticket #: 41636 DST #: 1

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

Printed: 2011.04.13 @ 21:22:49 Page 1

ORIGINAL

Herman Loeb LLC

Lohman B-9

3 35S 12W Barber KS

DST # 1

Mississippi

2011.03.28



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Herman Loeb LLC
 PO Box 838
 Lawrenceville L 62439
 ATTN: George Payne

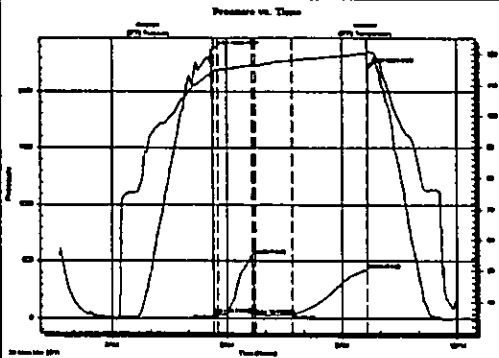
Lohman B-9
 335S 12W Barber KS
 Job Ticket: 41636 DST#: 1
 Test Start: 2011.03.28 @ 01:38:19

GENERAL INFORMATION:

Formation: **Mississippi**
 Deviated: **No Whipstock** ft (KB)
 Test Type: **Conventional Bottom Hole**
 Time Tool Opened: **05:39:19**
 Tester: **Chris Staats**
 Time Test Ended: **12:00:04**
 Unit No: **34**
 Interval: **4776.00 ft (KB) To 4820.00 ft (KB) (TVD)**
 Reference Elevations: **1419.00 ft (KB)**
 Total Depth: **4820.00 ft (KB) (TVD)**
1409.00 ft (CF)
 Hole Diameter: **7.68 inches**Hole Condition: **Poor**
 KB to GRCP: **10.00 ft**

Serial #: **6773** Inside
 Press@RunDepth: **34.28 psig @ 4775.00 ft (KB)** Capacity: **8000.00 psig**
 Start Date: **2011.03.28** End Date: **2011.03.28** Last Calib.: **2011.03.28**
 Start Time: **01:38:24** End Time: **12:00:04** Time On Bttr: **2011.03.28 @ 05:36:19**
 Time Off Bttr: **2011.03.28 @ 09:41:04**

TEST COMMENT: **F: Weak blow 1 1/2 in 15 min**
IS: No blow back
FF: Weak blow 1"
FSL: No blow back



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2363.52	113.96	Initial Hydro-static
3	33.93	114.63	Open To Flow (1)
10	32.93	115.02	Shut-In(1)
63	550.80	116.52	End Shut-In(1)
67	31.37	116.30	Open To Flow (2)
126	34.28	118.08	Shut-In(2)
243	430.04	120.25	End Shut-In(2)
245	2206.29	121.27	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
15.00	DRLG mud	0.21

Gas Rates

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

41636



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Herman Loeb LLC
PO Box 638
Lawrenceville IL 62439
ATTN: George Payne

Lohman B-9
3 35S 12W Barber KB
Job Ticket: 41636 DST#: 1
Test Start: 2011.03.28 @ 01:38:19

Tool Information

Drill Pipe:	Length: 4763.00 ft	Diameter: 3.80 inches	Volume: 66.81 bbl	Tool Weight: 2400.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 28000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 2.25 inches	Volume: 0.00 bbl	Weight to Full Loose: 90000.00 lb
			Total Volume: 66.81 bbl	Tool Chased 8.00 ft
Drill Pipe Above KB:	16.00 ft			String Weight: Initial 72000.00 lb
Depth to Top Packer:	4775.00 ft			Final 72000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	45.00 ft			
Tool Length:	73.00 ft			
Number of Packers:	2	Diameter: 8.25 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4748.00	
Shut In Tool	5.00			4753.00	
Hydraulic tool	5.00			4758.00	
Jars	5.00			4763.00	
Safety Joint	3.00			4766.00	
Packer	4.00			4770.00	28.00 Bottom Of Top Packer
Packer	5.00			4775.00	
Recorder	0.00	8166	Outside	4775.00	
Recorder	0.00	8773	Inside	4775.00	
Perforations	6.00			4781.00	
Drill Pipe	31.00			4812.00	
Perforations	5.00			4817.00	
Bullnose	3.00			4820.00	45.00 Bottom Packers & Anchor

Total Tool Length: 73.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Herman Loeb LLC

Lohman B-9

PO Box 638
Lawrenceville IL 62439

3 35S 12W Barber KS

Job Ticket: 41636 DST#: 1

ATTN: George Payne

Test Start: 2011.03.28 @ 01:38:19

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: 45.00 sec/cpl	Cushion Volume:	bbbl	
Water Loss: 8.38 in ³	Gas Cushion Type:		
Resistivity: 0.00 ohm.m	Gas Cushion Pressure:	psig	
Salinity: 5500.00 ppm			
Filter Cake: 0.20 inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
15.00	DRLG mud	0.210

Total Length: 15.00 ft Total Volume: 0.210 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:

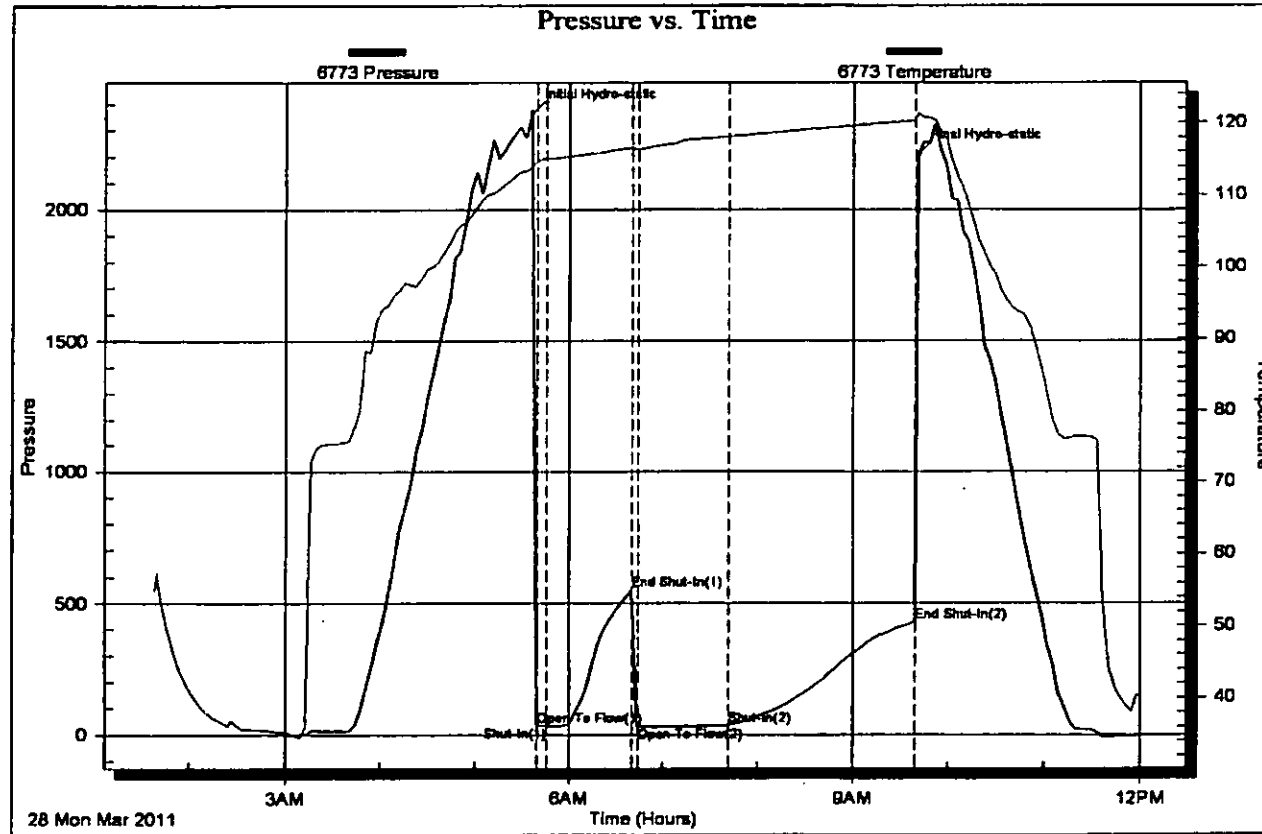
Serial #: 6773

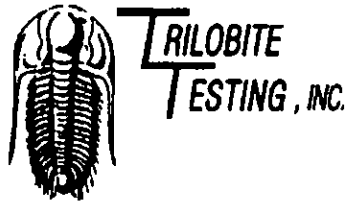
Inside

Herran Loeb LLC

335S 12W Barber KS

DST Test Number: 1





DRILL STEM TEST REPORT

Prepared For: **Herman Loeb LLC**

PO Box 838
Lawrenceville IL 62439

ATTN: George Payne

3 35S 12W Barber KS

Lohman B-9

Start Date: 2011.03.29 @ 22:44:44


End Date: 2011.03.30 @ 09:09:59

Job Ticket #: 41837 DST #: 2

Trilobite Testing, Inc

PO Box 1733 Hays, KS 67601

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

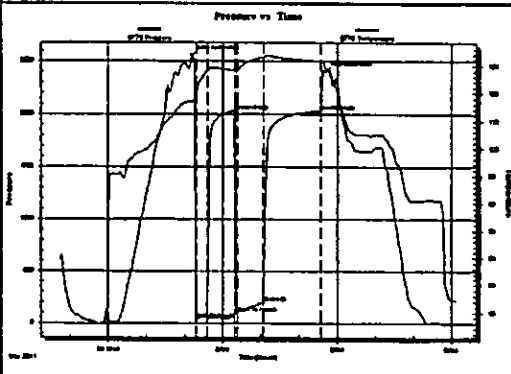
 TRIOBITE TESTING, INC.	DRILL STEM TEST REPORT	
	Herman Loeb LLC	Lohman B-6
	PO Box 838 Lawrenceville L 62439	3 36S 12W Barber KS
ATTN: George Payne	Job Ticket: 41637	DST#: 2
	Test Start: 2011.03.29 @ 22:44:44	

GENERAL INFORMATION:

Formation: Misner	Test Type: Conventional Bottom Hole
Deviated: No Whipstock ft (KB)	Tester: Chris Staats
Time Tool Opened: 02:18:29	Unit No: 34
Time Test Ended: 09:09:59	
Interval: 5140.00 ft (KB) To 5162.00 ft (KB) (TVD)	Reference Elevations: 1419.00 ft (KB)
Total Depth: 5162.00 ft (KB) (TVD)	1409.00 ft (CF)
Hole Diameter: 7.88 inches Hole Condition: Fair	KB to GRVCF: 10.00 ft

Serial #: 6773 Inside	Capacity: 6000.00 psig
Press @ Run Depth: 200.79 psig @ 5140.00 ft (KB)	Last Calib: 2011.03.30
Start Date: 2011.03.29	Time On Btm: 2011.03.30 @ 02:10:59
Start Time: 22:44:49	Time Off Btm: 2011.03.30 @ 05:40:59
End Date: 2011.03.30	
End Time: 09:09:59	

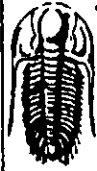
TEST COMMENT: F: Strong blow BOB 3 min
 IS: No blow back
 FST: Strong blow BOB 20 min
 IS: No blow back



PRESSURE SUMMARY			
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2556.74	117.00	Initial Hydro-static
8	40.84	119.59	Open To Flow (1)
25	87.32	128.39	Shut-in(1)
68	2033.00	128.39	End Shut-in(1)
72	101.97	128.14	Open To Flow (2)
113	200.79	133.14	Shut-in(2)
203	2029.38	131.75	End Shut-in(2)
210	2401.51	129.03	Final Hydro-static

Recovery		
Length (ft)	Description	Volume (bb)
0.00	620' GP	0.00
122.00	m oil spots 60% w 20% m	1.71
240.00	w 100%	3.37

Gas Rates		
Choke (inches)	Pressure (psig)	Gas Rate (MCFG)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Herman Loeb LLC

Lohman B-8

PO Box 838
Lawrenceville IL 62439

335S 12W Barber KS

Job Ticket: 41637 DST#: 2

ATTN: George Payne

Test Start: 2011.03.29 @ 22:44:44

Tool Information

Drill Pipe:	Length: 5136.00 ft	Diameter: 3.80 inches	Volume: 72.04 bbl	Tool Weight: 2400.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 28000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 2.25 inches	Volume: 0.00 bbl	Weight to Pull Loose: 90000.00 lb
			<u>Total Volume: 72.04 bbl</u>	Tool Chased 2.00 ft
Drill Pipe Above KB:	24.00 ft			String Weight: Initial 76000.00 lb
Depth to Top Packer:	5140.00 ft			Final 80000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	22.00 ft			
Tool Length:	50.00 ft			
Number of Packers:	2	Diameter: 6.25 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			5113.00	
Shut In Tool	5.00			5118.00	
Hydraulic tool	5.00			5123.00	
Jars	5.00			5128.00	
Safety Joint	3.00			5131.00	
Packer	4.00			5135.00	28.00 Bottom Of Top Packer
Packer	5.00			5140.00	
Recorder	0.00	8165	Outside	5140.00	
Recorder	0.00	6773	Inside	5140.00	
Perforations	19.00			5159.00	
Bullnose	3.00			5162.00	22.00 Bottom Packers & Anchor

Total Tool Length: 60.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Herman Loeb LLC
PO Box 838
Lawrenceville IL 62439
ATTN: George Payne

Lothman B-8
3 35S 12W Barber KS
Job Ticket: 41637 DST#: 2
Test Start: 2011.03.29 @ 22:44:44

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	QJAR	deg API
Mud Weight: 9.00 lb/gal	Cushion Length:	ft	Water Salinity: 11000 ppm
Viscosity: 49.00 sec/qt	Cushion Volume:	bbf	
Water Loss: 8.97 in ³	Gas Cushion Type:		
Resistivity: 0.00 ohm.m	Gas Cushion Pressure:	psig	
Salinity: 3500.00 ppm			
Filter Cake: 0.20 inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbf
0.00	620' GP	0.000
122.00	m oil spots 60% w 20% m	1.711
240.00	w 100%	3.387

Total Length: 362.00 ft Total Volume: 5.078 bbf

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

Laboratory Name: Laboratory Location:

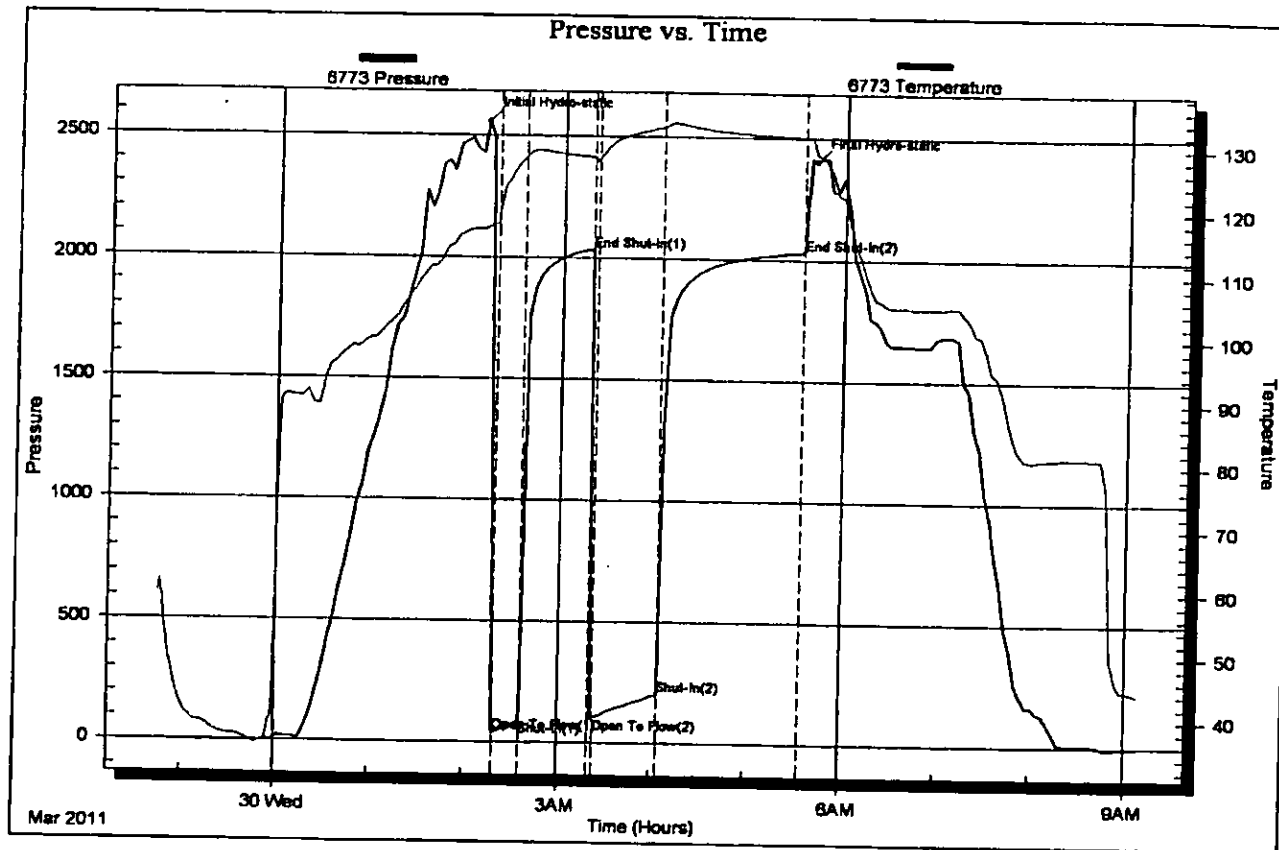
Recovery Comments: RW 1.12 @ 46F = 11000 chlorides

Serial #: 6773

Inside Herman Loeb LLC

3 35S 12W Barber KS

DST Test Number: 2





TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

RECEIVED
MAR 31 2011

Test Ticket

NO. 041636

Well Name & No. LOHmann #13-9 BY: _____ Test No. 1 Date 3-28-11
 Company Herman Loeb LLC Elevation 1419 KB 1409 GL _____
 Address PO Box 838 Lawrenceville IL 62439
 Co. Rep / Geo. Mike Maue Rig VAL #2
 Location: Sec. 3 Twp. 35S Rge. 12W Co. Barber State KS

Interval Tested 4775 - 4820 Zone Tested MISS
 Anchor Length 45' Drill Pipe Run ~~4770~~ 4763 Mud Wt. 9.1
 Top Packer Depth 4770 Drill Collars Run 0 Vis 45
 Bottom Packer Depth 4775 Wt. Pipe Run 0 WL 8.4
 Total Depth 4820 Chlorides 5500 ppm System LCM 5#

Blow Description IF: Weak blow 1 1/2 15min
ISI: NO blow back
FF: Weak blow 1"
PST: NO blow back

Sec	Feet of	%gas	%oil	%water	%mud
<u>15</u>	<u>DRG Mud</u>			<u>100</u>	
____	____	____	____	____	____
____	____	____	____	____	____
____	____	____	____	____	____
____	____	____	____	____	____

Sec Total 15' BHT 120 Gravity NA API RW NC @ _____ °F Chlorides 5500 ppm

A) Initial Hydrostatic 2363 Test 1225 T-On Location 1:30
 B) First Initial Flow 33 Jars 250 T-Started 1:38
 C) First Final Flow 33 Safety Joint 75' T-Open 5:39
 D) Initial Shut-In 550 Circ Sub T-Pulled 10:45
 E) Second Initial Flow 31 Hourly Standby 1hr 100' T-Out 10:30
 F) Second Final Flow 34 Mileage 110 miles 13750 Comments _____
 G) Final Shut-In 430 Sampler _____
 H) Final Hydrostatic 2208 Straddle _____

Initial Open 15 Shale Packer _____ Ruined Shale Packer _____
 Initial Shut-In 45 Shale Packer _____ Ruined Packer _____
 Initial Flow 60 Extra Packer _____ Extra Copies _____
 Initial Shut-In 120 Extra Recorder _____ Sub Total 8
 Day Standby _____ Total 1787.50
 Accessibility _____ MP/DST Disc't _____
 Sub Total 1781.50

Approved By Michael K Maue Our Representative Chris [Signature]
 Triobite Testing Inc. shall not be liable for damages 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.



TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

RECEIVED
APR 01 2011

Test Ticket

NO. 041637

Well Name & No. Lohman B-9 BY: _____ Test No. 2 Date 3-29-11
 Company Herman LOEB LLC Elevation 1419 KB 1409 GL _____
 Address PO Box 838 Lawrenceville IL 62439
 Co. Rep / Geo. Mike Mauhe / George Payne Rig Val energy #2
 Location: Sec. 3 Twp. 35s Rge. 12W Co. Barber State KS

Interval Tested S140 - S162 Zone Tested MISNER
 Anchor Length 22' Drill Pipe Run ~~5136~~ 5136 Mud Wt. 9.2
 Top Packer Depth S135 Drill Collars Run 0 Vis 49
 Bottom Packer Depth S140 Wt. Pipe Run 0 WL 9.0
 Total Depth S162 Chlorides 3500 ppm System LCM 4#

Flow Description IF: STRONG blow BOB 3min
ISI: NO blow back
FF: STRONG blow BOB 20min
FSL: NO blow back

Sec	Feet of	%gas	%oil	%water	%mud
<u>0</u>	<u>GIP 1020'</u>				
<u>122'</u>	<u>M W O SPOTS</u>		<u>80</u>	<u>20</u>	
<u>240</u>	<u>W</u>		<u>100</u>		
_____	Feet of _____	%gas	%oil	%water	%mud
_____	Feet of _____	%gas	%oil	%water	%mud

Sec Total 362 BHT AR 112 Gravity _____ API RW 1.12 @ 46 °F Chlorides 11,000 ppm

A) Initial Hydrostatic 2556 Test 1325 T-On Location 21:30
 B) First Initial Flow 41 Jars 250 T-Started ~~22:49~~ 22:49
 C) First Final Flow 87 Safety Joint 75 T-Open 2:18
 D) Initial Shut-In 2033 Circ Sub _____ T-Pulled 6:40
 E) Second Initial Flow 102 Hourly Standby 1.5 hrs 150 T-Out 10:00
 F) Second Final Flow 201 Mileage 110.203 137.50 Comments _____
 G) Final Shut-In 2029 Sampler _____
 H) Final Hydrostatic 2401 Straddle _____ Ruined Shale Packer _____

Initial Open 15 Shale Packer _____ Ruined Packer _____
 Initial Shut-In 45 Extra Packer _____ Extra Copies _____
 Initial Flow 45 Extra Recorder _____ Sub Total 8
 Initial Shut-In 90 Day Standby _____ Total 1937.50
 Accessibility _____ MP/DST Disc'l _____
 Sub Total 1937.50

Approved By Michael Mauhe Our Representative Cheri Stebb
 Triobite Testing Inc. shall not be liable for damaged or 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.



PAGE 1 of 1	COST NO 1001845	INVOICE DATE 08/24/2011
INVOICE NUMBER 1718-90681171		

Pratt (620) 672-1201
 ■ HERMAN L. LOEB
 ■ PO Box: 524
 ■ LAWRENCEVILLE
 ■ IL US 62439
 ○ ATTN: ED LOEB

J LEASE NAME Page B-14
 O LOCATION
 ■ COUNTY Barber
 ■ STATE KS
 ■ JOB DESCRIPTION Cement-New Well Casing/PI
 ■ JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS		DUE DATE	
40360572	20920		Net - 30 days		09/23/2011	
08/21/2011 to 08/21/2011						
0040380872						
171804781A Cement-New Well Casing/PI 08/21/2011						
5 1/2" Longstring						
AAZ Cement			200.00	EA	13.45	3,287.45 T
Cello-Take			83.00	EA	2.82	184.18 T
Bit (Blue)			1,308.00	EA	0.36	506.79 T
Cal-Bit			1,175.00	EA	0.55	896.17 T
FLA-322			188.00	EA	5.82	1,113.88 T
Blowrite			1,500.00	EA	0.50	780.00 T
Mud Flush			1,000.00	GA	0.80	878.00 T
CB-11, KCL Substitute			5.00	GA	27.60	138.26 T
Latch Down Plug & Baffle 5 1/2" (Blue)			1.00	EA	315.00	315.00 T
Cementing Shoe Packer Type 6 1/2" (Red)			1.00	EA	2,022.04	2,022.04 T
Turbolizer 5 1/2" (Blue)			12.00	EA	86.50	1,042.70 T
5 1/2" Basket (Blue)			2.00	EA	220.10	488.18 T
Unit Mileage Charge-Pickups, Vans & Cars			48.00	HR	3.30	161.00 T
Heavy Equipment Mileage			90.00	MI	5.83	497.60 T
Prep and Bulk Delivery Charge			829.00	MI	1.20	898.64 T
Depth Charge; 0001-8000'			1.00	HR	2,278.16	2,278.16 T
Blending & Mixing Service Charge			200.00	MI	1.11	276.48 T
Plug Container Utilization Charge			1.00	EA	197.50	197.50 T
Supervisor			1.00	HR	138.25	138.25 T
PLEASE REFER TO:			SEND OTHER CORRESPONDENCE TO:			
BASIC ENERGY SERVICES, LP		BASIC ENERGY SERVICES, LP		SUB TOTAL	16,444.72	
PO BOX 841903		PO BOX 10460		TAX	547.50	
DALLAS, TX 75284-1903		MIDLAND, TX 79702		INVOICE TOTAL	16,992.22	



BASIC
ENERGY SERVICES
MEASURE PUMPING & WELLFLEX

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

0440360770
FIELD SERVICE TICKET
1718 04791 A.

DATE TICKET NO.

DATE OF JOB: 8-21-11	DISTRICT	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WOW <input type="checkbox"/>	CUSTOMER ORDER NO.
CUSTOMER: NORMAN L. LOEB LLC		LEASE: PAGE		WELL NO.			
ADDRESS		COUNTY: BARBER		STATE: KS			
CITY		STATE		SERVICE CREW: SULLIVAN, MCBRYEN, SULLIVAN			
AUTHORIZED BY		JOB TYPE: CROWN S&L					
EQUIPMENT#	HRB	EQUIPMENT#	HRB	EQUIPMENT#	HRB	TRUCK CALLED	DATE
38788 - 2022	15					ARRIVED AT JOB	8-21-11
19959 - 2010	15					START OPERATION	8-21-11
37900						FINISH OPERATION	8-21-11
						RELEASED	8-21-11
						MILES FROM STATION TO WELL	75

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).
The undersigned is authorized to execute the contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, matter supplies include all of and only those terms and conditions appearing on the front and back of this document. No additional or restrictive terms and 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 #	REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 125		400 cc of	EA	200		3,800.00
CP 125		400 cc of	EA	200		3,800.00
CC 122		Cal. 500	EA	200		2,530.00
CC 111		Cal. 500	EA	150	15.59	2,338.50
CC 113		Cal. 500	EA	150	11.25	1,687.50
CC 129		400 cc of	EA	150	15.59	2,338.50
CC 201		400 cc of	EA	150	15.00	2,250.00
CF 607		1/2 gal. grease	EA	1		400.00
CP 1001		1/2 gal. grease	EA	1		3,700.00
CP 1051		1/2 gal. grease	EA	1		1,320.00
CP 1501		1/2 gal. grease	EA	2		500.00
CP 151		1/2 gal. grease	EA	2		500.00
C 709		1/2 gal. grease	EA	2		175.00
E 100		1/2 gal. grease	EA	2		171.00
G 101		1/2 gal. grease	EA	2		600.00
G 113		1/2 gal. grease	EA	2		850.00
CP 206		1/2 gal. grease	EA	1		2,250.00
CP 240		1/2 gal. grease	EA	2		300.00
CP 250		1/2 gal. grease	EA	2		350.00
CP 250		1/2 gal. grease	EA	2		350.00
SUB TOTAL						17,550.00
CIVIL MATERIAL DATA						
SERVICE & EQUIPMENT						
MATERIALS						
TAX ON \$						
TAX ON %						
TOTAL						16,444.72

SERVICE REPRESENTATIVE: [Signature]	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]
FIELD SERVICE ORDER NO.	(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

BASIC

energy services, L.P.

TREATMENT REPORT

Customer: HORWOOD LODGE Lease No. _____ Date: _____
 Lease: PA98 Well #: B-17
 Field Name: 7791 Station: DRATE KS Casing: 2 1/2 Depth: 2720 County: WAGONER
 Type Job: CRUDE OIL REPAIR Formation: _____ Legal Description: 27-33-11

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/ft		Acid		RATE	PRESS	TDIP
Depth	Depth	From	To	Pre Pad		Max		5 Min.
Volume	Volume	From	To	Pad		Min		10 Min.
Max Press	Max Press	From	To	Frac		Avg		15 Min.
Well Connection	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush		Gas Volume		Total Load

Customer Representative: _____ Station Manager: DAVE SCOTT Treater: DAVE SCOTT
 Service Units: 37920 37920 37920 19759 21012
 Driver Names: Sullivan Malone Sullivan

Time	Casing Pressure	Tubing Pressure	Shots Pumped	Rate	Service Log
12:00	200				on the safety margin
					Run 100 500 500 1000 1500 2000
					Produce that back 7.5 min 7.5 min 10 min
					10 min 20 min 30 min 40 min 50 min
1:35					CRUDE OIL REPAIR
1:40					CRUDE OIL REPAIR
1:45					CRUDE OIL REPAIR
2:00	1400				Set packer shot and cure
2:05	250		2.4	2.5	Set main packer @ 5000' 1000' 1500'
			5		1000'
			60	55	run out 200 of 1000' of C.M.S. 100'
					conf check with pump line
	100			6	Release Plug
	400	83			Set Dipa w/ 200 100 100
	700	110		5	Lift Pl.
3:45	2000	119		7.5	Plug moved
		17			Plug pulled back 100' of 100'
					1500' 1000' 1000'

ALLIED CEMENTING CO., LLC. 040760

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

SERVICE POINT:
Arch Lake

DATE <u>8-11-11</u>	SEC. <u>21</u>	TWP. <u>33S</u>	RANGE <u>11W</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00pm</u>	JOB FINISH <u>1:00pm</u>
LEASE <u>Page</u>	WELL # <u>B-14</u>	LOCATION <u>Gerlane Blk top</u>			COUNTY <u>Barber</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)		<u>E to Dig 1 south to Pray 1/2 N, W 1/4</u>					

CONTRACTOR Sterling
TYPE OF JOB Surface
HOLE SIZE 12 1/4 T.D. 295'
CASING SIZE 8 7/8 DEPTH 282'
TUBING SIZE _____ DEPTH _____
DRILL PIPE _____ DEPTH _____
TOOL _____ DEPTH _____
PRES. MAX 400 psi MINIMUM _____
MEAS. LINE _____ SHOE JOINT _____
CEMENT LEFT IN CSG. 20'
PERFS. _____
DISPLACEMENT 17 666 H₂O

OWNER Herman Loeb
CEMENT
AMOUNT ORDERED 200 sy 60:40:30 + 20 sy 1 1/4" float

EQUIPMENT
PUMP TRUCK CEMENTER rusty / muel
360/265 HELPER Jason / muel
BULK TRUCK
363/290 DRIVER Dustin E / am
BULK TRUCK
_____ DRIVER _____

COMMON	<u>120</u>	@	<u>16.25</u>	<u>1950.-</u>
POZMIX	<u>80</u>	@	<u>8.50</u>	<u>680.-</u>
GEL	<u>3</u>	@	<u>21.25</u>	<u>63.75</u>
CHLORIDE	<u>6</u>	@	<u>58.20</u>	<u>349.20</u>
ASC		@		
<u>float seal 50#</u>		@	<u>2.70</u>	<u>135.-</u>
		@		
		@		
		@		
		@		
		@		
HANDLING <u>211</u>		@	<u>2.25</u>	<u>474.75</u>
MILEAGE <u>211/10/11</u>				<u>232.10</u>
TOTAL				<u>3884.65</u>

REMARKS:
Brk circ with R10
page 3 hole R10 closed
211 200 sy cannot shut down
Release plug
dis 17 hole R10 shut in
cannot get circulate.

CHARGE TO: Herman Loeb
STREET _____
CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB <u>292'</u>			
PUMP TRUCK CHARGE			<u>1125.-</u>
EXTRA FOOTAGE	@		
MILEAGE <u>20</u>	@	<u>7.00</u>	<u>140.-</u>
MANIFOLD	@		
<u>light vehicle 20</u>	@	<u>4.00</u>	<u>80.-</u>
	@		
TOTAL <u>1345.-</u>			

(896) PLUG & FLOAT EQUIPMENT

<u>1-washer plug</u>	@	<u>92.</u>	<u>92.</u>
	@		
	@		
	@		
TOTAL <u>92.00</u>			

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.

SALES TAX (if Any) _____
TOTAL CHARGES 5321.65
DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME Luay S. Salageh
SIGNATURE Luay S. Salageh