

RECEIVED
AUG 31 2012

CONFIDENTIAL

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

KCC WICHITA

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30525
Name: D.S. LANGSTON
Address 1: 310 W. CENTRAL, STE.#202
Address 2: _____
City: WICHITA State: KS Zip: 67202 + 1004
Contact Person: D.S. LANGSTON
Phone: (620) 786-0874
CONTRACTOR: License # 33350
Name: SOUTHWIND DRILLING, INC.
Wellsite Geologist: DAVE WILLIAMS
Purchaser: NCRA

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
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

5/08/12	5/14/12	5/14/12
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

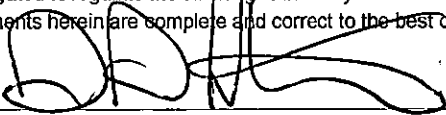
API No. 15 - 159-22689-00-00
Spot Description: _____
W/2 SW/4 SW/4 NE/4 Sec. 31 Twp. 18 S. R. 10 East West
2,880 Feet from North / South Line of Section
2,540 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: RICE
Lease Name: NOVOTNY/REIF OIL UNIT Well #: NOVOTNY 31-L
Field Name: MARY IDA
Producing Formation: L-KC
Elevation: Ground: 1745 Kelly Bushing: 1754
Total Depth: 3241 Plug Back Total Depth: 3217.5
Amount of Surface Pipe Set and Cemented at: 471 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: 7200 ppm Fluid volume: 650 bbls
Dewatering method used: hauled after salt section cut,
Location of fluid disposal if hauled offsite: _____
Operator Name: EAGLE RIVER ENERGY CORP.
Lease Name: WIRTZ License #: 31070
Quarter NE/4 Sec. 33 Twp. 19 S. R. 12 East West
County: BARTON Permit #: E-28319

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: 
Title: INDEP. OIL & GAS OPERATOR Date: 8/31/12

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 Date: 8/31/12

Operator Name: D.S. LANGSTON Lease Name: NOVOTNY/REIF OIL UNIT Well #: NOVOTNY 31-L
 Sec. 31 Twp. 18 S. R. 10 East West County: RICE

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: GRT, CNT, LDT, PIT, MLT,	<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>PLATTSMOUTH</td> <td>2753</td> <td>-999</td> </tr> <tr> <td>HEEBNER</td> <td>2806</td> <td>-1052</td> </tr> <tr> <td>DOUGLAS</td> <td>2836</td> <td>-1082</td> </tr> <tr> <td>BR. LIME</td> <td>2920</td> <td>-1166</td> </tr> <tr> <td>LANSING</td> <td>2939</td> <td>-1185</td> </tr> <tr> <td>BASE KC</td> <td>3186</td> <td>-1432</td> </tr> <tr> <td>QUARTZITE (ARB. ABSENT)</td> <td>3224</td> <td>-1470</td> </tr> </table>	Name	Top	Datum	PLATTSMOUTH	2753	-999	HEEBNER	2806	-1052	DOUGLAS	2836	-1082	BR. LIME	2920	-1166	LANSING	2939	-1185	BASE KC	3186	-1432	QUARTZITE (ARB. ABSENT)	3224	-1470
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BASE KC	3186	-1432																							
QUARTZITE (ARB. ABSENT)	3224	-1470																							

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 1/2	8 5/8	28#	471'	COMMON 60/40 POZ.	361	3%CC, 2% Gel
PRODUCTION	7	5 1/2	14#	3220'	60/40 Poz.	185	2%Gel, 1200# 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				

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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/ft. 5/30/12	3103.5 - 3113.5 KC - "J"	5/30 500g. 28%Hcl, 5/31 1000g. 15% Hcl, failed retreat 6/1	see perms.
4/ft. 5/30/12	3067 - 3072 KC - "H"	5/31 250g. 28%Hcl (pkr. failed), 6/1 250 again didn't break	" "
2/ft. 5/30/12	3019 - 3022 KC - "G"	6/1 250g. 28%Hcl & treated gently @ only 100psi	" "

TUBING RECORD: Size: <u>2 7/8</u> Set At: <u>3165'</u> Packer At: <u>n/a</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>6/07/12</u>	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 Bbls. <u>25 initial, 11 now</u>	Gas Mcf <u>60</u>
	Water Bbls. <u>60</u>	Gas-Oil Ratio <u>minimal backside gas</u>
		Gravity <u>39</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" 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) <u>120 psi gas shut - in on casing's backside</u>	PRODUCTION INTERVAL: <u>3103.5 - 3113.5 & 3019 - 3022</u>
--	--	--

CONFIDENTIAL

D.S. Langston
Independent Oil & Gas Operator
310 W. Central, Ste.# 202
Wichita, Kansas 67218
Cell: (620) 786-0874
Phone: (316) 265-4411
Fax: (316) 263-7820

August 31, 2012

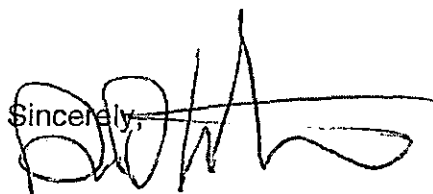
KANSAS CORP. COMMISSION
130 N. MARKET, ROOM 2078
WICHITA, KS 67202-3802
ATTN: DEANNA & JEFF KLOCK

Re: **ACO-1 WELL COMPLETION FORM**
For the **NOVOTNY #31-L** well-bore
located in **W/2 SW SW NE of Sec. 31-18S-10W, RICE CO., KS**
(For production purposes this well creates the resulting **NOVOTNY/REIF OIL UNIT**,
see the attached plat delineating said 40 acre oil unit)

Dear Deanna:

You are now in receipt of the above referenced ACO-1, and hereby request that same be held confidential for a period of one year from this. If there are any questions or further data is desired, please feel free to contact me at either of the above cell or office phone number(s).

Sincerely,



D.S. Langston, Producer #30525

DSL/mb

For KCC Use ONLY

API # 15 - _____

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IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Operator: D.S. LANGSTON
Lease: NOVOTNY
Well Number: 31-L
Field: MARY IDA

Location of Well: County: RICE
2,860 feet from N / S Line of Section
2,540 feet from E / W Line of Section
Sec. 31 Twp. 18 S. R. 10 E W

Number of Acres attributable to well: 40
QTR/QTR/QTR/QTR of acreage: _____

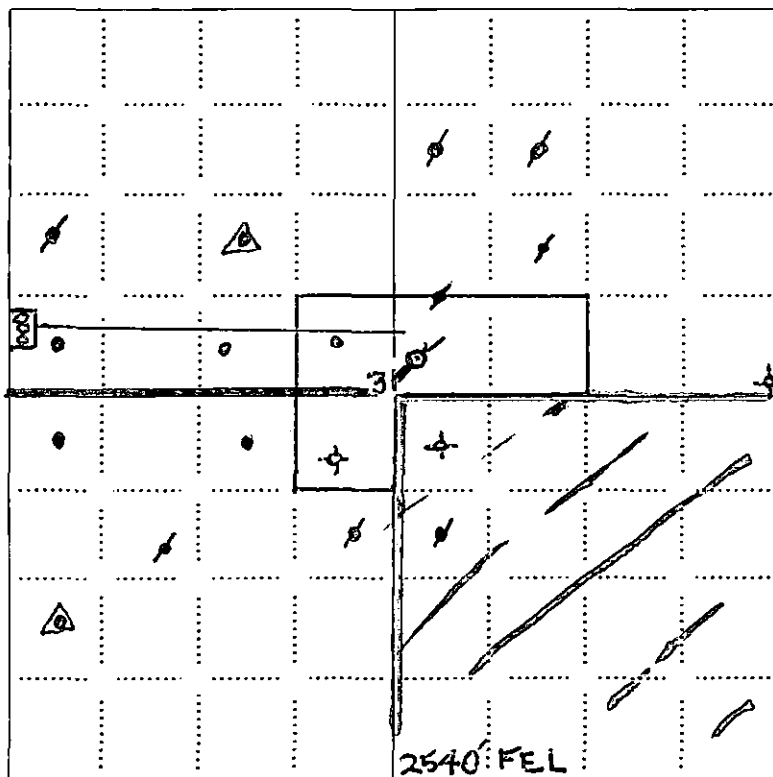
Is Section: Regular or Irregular

If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

PLAT

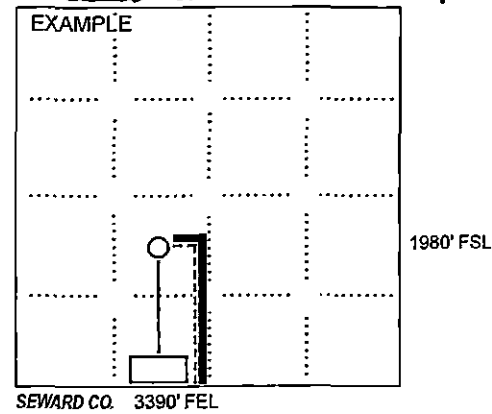
Show location of the well. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032). You may attach a separate plat if desired.



LEGEND

- Well Location
- Tank Battery Location
- Pipeline Location
- Electric Line Location
- Lease Road Location
- Oil Unit (Novotny/Reif)
- Unleased land 240' Sour

2890 FSL



Rice Co.

NOTE: In all cases locate the spot of the proposed drilling location.

In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the south / north and east / west outside section lines.
3. The distance to the nearest lease or unit boundary line (in footage).
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).
5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

COPELAND

Acid & Cement

BURRTON, KS (620) 463-5161
 GREAT BEND, KS (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

POST OFFICE BOX
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

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 KCC-WICHITA

C395

BILL TO:

D.S. LANGSTON
 310 W. CENTRAL, STE. 202
 WICHITA, KS 67202-1004

LEASE: NOVOTNY 31-L

Surface string

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
05/15/2012	C39548		05/08/2012		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
20.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	80.00
20.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	2.00	40.00
1.00	EA	CEMENT PUMP CHARGE		0.00	1,100.00	1,100.00
175.00	SAX	60-40 POZ MIX 2% GEL		0.00	9.25	1,618.75
175.00	SAX	COMMON CEMENT		0.00	11.25	1,968.75
11.00	SAX	CALCIUM CHLORIDE - SAX		0.00	40.00	440.00
1.00	EA	8 5/8" WOOD PLUG		0.00	65.00	65.00
1.00	EA	8 5/8" BAFFLE		0.00	105.00	105.00
361.00	EA	BULK CHARGE		0.00	1.25	451.25
327.40	MI	BULK TRUCK - TON MILES		0.00	1.10	360.14
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		Net Invoice: 6,228.89 RICCO Sales Tax: 92.71 Invoice Total: <u>6,321.60</u>		
RECEIVED BY _____		NET 30 DAYS				

*paid 5/18
 check #6807*

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code

Acid & Cement



BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE

IS AUTHORIZED BY: D.S. [Signature]
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well _____
As Follows: Lease _____ Well No. 314 Customer Order No. _____

Sec. Twp. _____
Range _____ County _____ State _____

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	60	...	...	...
	70	...	...	...
	1	...	...	...
	175	...	...	...
	175	...	...	...
	11	...	...	...
	1	...	...	...
	1	...	...	...
	30	Bulk Charge	...	...
		Bulk Truck Miles	...	...
		Process License Fee on _____ Gallons		
TOTAL BILLING				...

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative _____

Station C.S. _____
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS

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KCC WICHITA

COPELAND

Acid & Cement

TREATMENT

Date: 5/11/12 District: G.B. F. O. No. (39548)
 Company: D. S. Longaker
 Well Name & No.: Norway 31-L
 Location: _____ Field: _____
 County: Rice State: KS
 Casing: Size: 8 5/8" Type & Wt.: _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Formation: _____ Perf. _____ to _____
 Liner: Size: _____ Type & Wt.: _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes/No. Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt.: _____ Swung at _____ ft.
 Perforated from _____ ft. to _____ ft.
 Open Hole Size: _____ T. D. _____ ft. P. H. to _____ ft.

Type Treatment: Amt. _____
 Backdown _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 _____ Bbl./Gal. _____
 Flush _____ Bbl./Gal. _____
 Treated from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 Actual Volume of Oil/Water to Load Hole: _____ Bbl./Gal. _____
 Pump Trucks, No. Used: Btd. 300 Sp. _____ Twin _____
 Auxiliary Equipment 327
 Packer: _____ Set at _____
 Auxiliary Tools _____
 Plugging or Sealing Materials: Type _____

Company Representative: Southwind Treater: Nathan W.

TIME (m/p.m.)	PRESSURES		Total Fluid Pumped	DESCRIPTION	REMARKS
	Tubing	Casing			
1:45	-	8 5/8"		On location	
				Hole = 483'	
				Pipe = 471'	
				+ 11' L.3.	
				482'	
				Break - circulation w/ pump truck	
				Mix 175 sks. 60% w/por. 2% scl. 3% C.C.	
				sk	
				Mix 175 sks. Common 3% C.C.	
				Displace w/ 65.1 bbls. @ 6 bpm @ 300#	
				Plus loaded @ 500#	
4:20				Shut in.	
				Thank You!	
				Nathan W.	
				RECEIVED	
				AUG 31 2012	
				KCC WICHITA	

COPELAND

Acid & Cement

BURRTON, KS - GREAT BEND, KS
 (620) 463-5161 (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

POST OFFICE BOX
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

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KCC WICHITA

BILL TO:

D.S. LANGSTON
 310 W. CENTRAL, STE. 202
 WICHITA, KS 67202-1004

LEASE: NOVOTNY 31-L

Prod. string

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
05/22/2012	C39658		05/14/2012		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
20.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	80.00
20.00	MI	CEMENT MILEAGE PU TRUCK		0.00	2.00	40.00
1.00	EA	CEMENT PUMP CHARGE		0.00	1,600.00	1,600.00
185.00	SAX	60-40 POZ MIX 2% GEL		0.00	9.25	1,711.25
50.00	LB	FRICTION REDUCER C-37		0.00	3.75	187.50
400.00	LB	GILSONITE		0.00	0.50	200.00
1,250.00	LB	SALT		0.00	0.18	225.00
500.00	GAL	MUD FLUSH		0.00	0.80	400.00
1.00	EA	5 1/2 AUTO-FILL FLOAT SHOE		0.00	355.00	355.00
1.00	EA	5 1/2 LATCH DOWN PLUG & BAFFLE		0.00	175.00	175.00
5.00	EA	5 1/2 CENTRALIZERS		0.00	65.00	325.00
1.00	EA	5 1/2 BASKET		0.00	155.00	155.00
319.00	EA	BULK CHARGE		0.00	1.25	398.75
179.80	MI	BULK TRUCK - TON MILES		0.00	1.10	197.78
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice: 6,050.28		
RECEIVED BY		NET 30 DAYS		Sales Tax: 190.53		
		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		Invoice Total: 6,240.81		

*paid 5/31
check #6834*

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code



BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

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KCC WICHITA

DATE: _____
IS AUTHORIZED BY: D. S. Long (NAME OF CUSTOMER)
Address: _____ City: _____ State: _____
To Treat Well: _____ Well No.: _____ Customer Order No.: _____
As Follows: Lease _____
Sec. Twp.: _____ County: _____ State: _____
Range: _____

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and its not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
		Bulk Charge		
		Bulk Truck Miles		
		Process License Fee on Gallons		
		TOTAL BILLING		(0.50)

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative: _____
Station: _____ Well Owner, Operator or Agent: _____
Remarks: _____

NET 30 DAYS

TREATMENT

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Date: 8/14/12 District: G.B F.O. No. (39658)

Company: O.S. Langston

Well Name & No.: Novak 31-L

Location: Field

County: Barton Rice State: KS

Casing: Size: 5 1/2" Type & Wt. 14# Set at: ft.

Formation: Perf. to

Formation: Perf. to

Formation: Perf. to

Liner: Size: Type & Wt. Top at: ft. Bottom at: ft.

Cemented: Yes/No Perforated from: ft. to: ft.

Tubing: Size & Wt. Swung at: ft.

Perforated from: ft. to: ft.

Open Hole Size: T.D. ft. P.B. to: ft.

Type Treatment: Amt.

Bkdown: Bbl./Gal.

Bbl./Gal.

Bbl./Gal.

Bbl./Gal.

Flush: Bbl./Gal.

Treated from: ft. to: ft.

from: ft. to: ft.

from: ft. to: ft.

Actual Volume of Oil/Water to: Lead Hole: Bbl./Gal.

Pump Trucks No. Used: 300

Auxiliary Equipment: 317/310

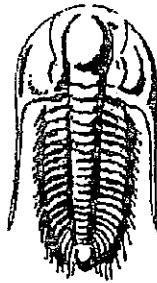
Packer: Set at

Auxiliary Tools

Plugging or Sealing Materials: Type

Company Representative: David L. Treater: Nathan W.

TIME a.m./p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
8:15	-	5 1/2"		On Location.
				Hole = 3,241' Centralizers = 3,213' - 3,000'
				Pipe = 3,207' 3,044' - 3,002' - 270'
				L.S. # 12' 3,220' Basket = 3,213'
				Baffle = 3,213'
				Break circulation w/ mud pump.
				Circulate for 30 min.
				Pump 500 gal. mud - flush.
				Plug rat hole w/ 20 sts.
				Plus mouse hole w/ 15 sts.
				Mix 150 sts. 60% 40 gal. 20% gal. 15% Salt 1/2% CER-2 CK#/st. gilsonite.
				Displace w/ 78.5 bbls. @ 8 bpm @ 750#
12:15				Plus landed. Released float head.
				Thank you!
				Nathan W.



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Prepared For: **D.S. Langston**

310 W. Central Ste 202
Wichita KS 67202

ATTN: Dave Williams

Novotny #31L

31-18s-10w Rice KS

Start Date: 2012.05.13 @ 23:25:30

End Date: 2012.05.14 @ 08:44:15

Job Ticket #: 47532 DST #: 2

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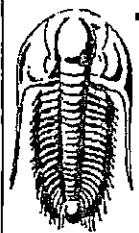
Trilobite Testing, Inc

PO Box 362 Hays, KS 67601

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

Printed: 2012.05.15 @ 14:15:48

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TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

D.S. Langston
 310 W. Central Ste 202
 Wichita KS 67202
 ATTN: Dave Williams

31-18s-10w Rice KS
 Novotny #31L
 Job Ticket: 47532 DST#: 2
 Test Start: 2012.05.13 @ 23:25:30

GENERAL INFORMATION:

Formation: LKC "G"
 Deviated: No Whipstock ft (KB)
 Time Tool Opened: 03:13:30
 Time Test Ended: 08:44:15

Test Type: Conventional Straddle (Reset)
 Tester: Kevin Taylor
 Unit No: 56

Interval: 3023.00 ft (KB) To 3046.00 ft (KB) (TVD)
 Total Depth: 3241.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 1760.00 ft (KB)
 1751.00 ft (CF)
 KB to GR/CF: 9.00 ft

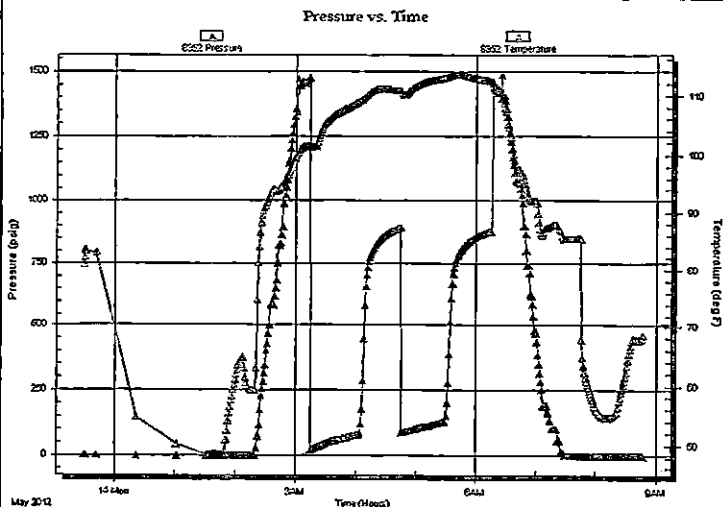
Serial #: 8352

Outside

Press@RunDepth: psig @ 3024.00 ft (KB)
 Start Date: 2012.05.13 End Date: 2012.05.14
 Start Time: 23:29:50 End Time: 08:47:15

Capacity: 8000.00 psig
 Last Calib.: 2012.05.14
 Time On Btrr:
 Time Off Btrr:

TEST COMMENT: L.F. Strong Blow B.O.B. 20 Min
 I.S.I. No Blow
 F.F. Strong Blow B.O.B. 18 Min
 F.S.I. Bleed Off 4 Min Weak Surface Blow Died In 20 Min



PRESSURE SUMMARY

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

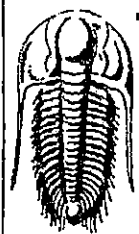
Recovery

Length (ft)	Description	Volume (bbl)
50.00	WTR MUD CUT Oil TR%G 77%O 25%W	80.73
155.00	Mud Cut WTR TR%G 93%W 7%M	2.27
63.00	Mud Cut WTR TR%G 75%W 25%M	0.92

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcfd)

* Recovery from multiple tests



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

D.S. Langston
310 W. Central Ste 202
Wichita KS 67202
ATTN: Dave Williams

31-18s-10w Rice KS
Novotny #31L
Job Ticket: 47532 DST#: 2
Test Start: 2012.05.13 @ 23:25:30

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: 48.00 sec/qt	Cushion Volume: bbl		
Water Loss: 7.18 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 7200.00 ppm			
Filter Cake: 0.02 inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
50.00	WTR MUD CUT Oil TR%G 77%O 25%W 8%M	0.731
155.00	Mud Cut WTR TR%G 93%W 7%M	2.267
63.00	Mud Cut WTR TR%G 75%W 25%M	0.921

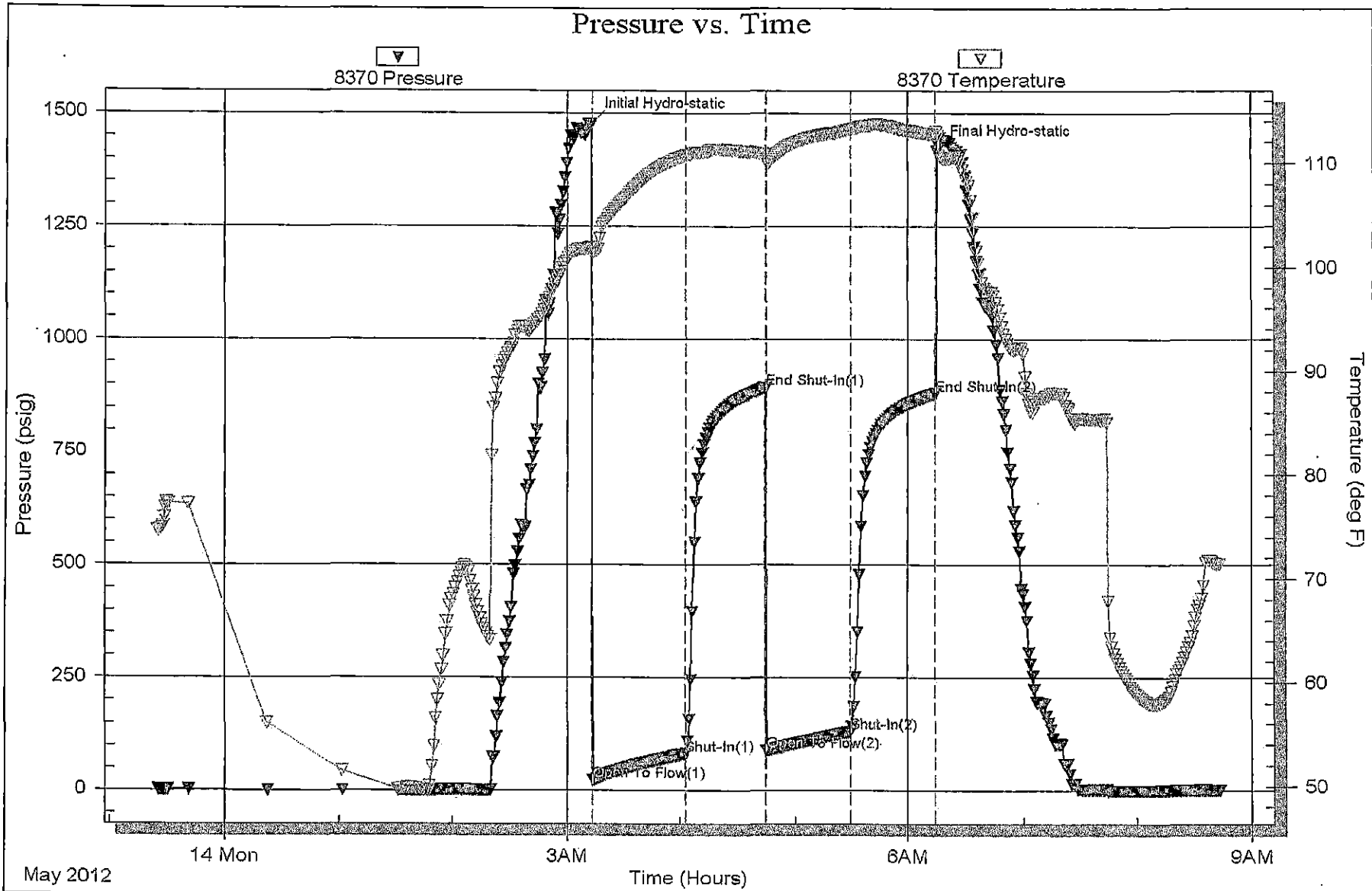
Total Length: 268.00 ft Total Volume: 3.919 bbl

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

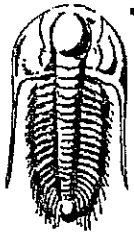
Laboratory Name: Laboratory Location:

Recovery Comments:

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DRILL STEM TEST REPORT

TOOL DIAGRAM

D.S. Langston
310 W. Central Ste 202
Wichita KS 67202
ATTN: Dave Williams

31-18s-10w Rice KS
Novotny #31L
Job Ticket: 47532 DST#:2
Test Start: 2012.05.13 @ 23:25:30

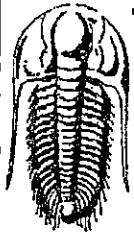
Tool Information

Drill Pipe:	Length: 3024.00 ft	Diameter: 3.88 inches	Volume: 44.22 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: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 45000.00 lb
			<u>Total Volume: 44.22 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	29.00 ft			String Weight: Initial 37000.00 lb
Depth to Top Packer:	3023.00 ft			Final 38000.00 lb
Depth to Bottom Packer:	3046.00 ft			
Interval between Packers:	23.00 ft			
Tool Length:	251.00 ft			
Number of Packers:	3	Diameter: 6.75 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Shut In Tool	5.00			3000.00	
Hydraulic tool	5.00			3005.00	
Jars	5.00			3010.00	
Safety Joint	3.00			3013.00	
Packer	5.00			3018.00	28.00 Bottom Of Top Packer
Packer	5.00			3023.00	
Stubb	1.00			3024.00	
Recorder	0.00	8370	Inside	3024.00	
Recorder	0.00	8352	Outside	3024.00	
Perforations	21.00			3045.00	
Blank Off Sub	1.00			3046.00	23.00 Tool Interval
Packer	5.00			3051.00	
Change Over Sub	1.00			3052.00	
Recorder	0.00	8649	Below	3052.00	
Drill Pipe	188.00			3240.00	
Change Over Sub	1.00			3241.00	
Bullnose	5.00			3246.00	200.00 Bottom Packers & Anchor
Total Tool Length:	251.00				

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DRILL STEM TEST REPORT

D.S. Langston
310 W. Central Ste 202
Wichita KS 67202
ATTN: Dave Williams

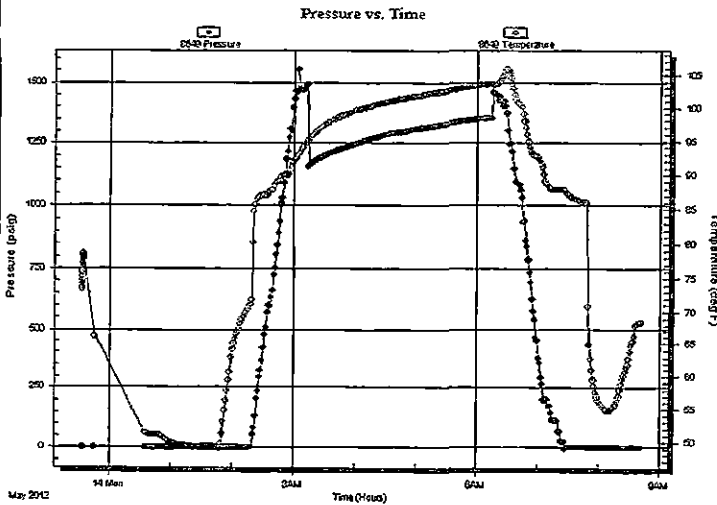
31-18s-10w Rice KS
Novotny #31L
Job Ticket: 47532 DST#:2
Test Start: 2012.05.13 @ 23:25:30

GENERAL INFORMATION:

Formation: LKC "G"
Deviated: No Whipstock ft (KB)
Time Tool Opened: 03:13:30
Time Test Ended: 08:44:15
Interval: 3023.00 ft (KB) To 3046.00 ft (KB) (TVD)
Total Depth: 3241.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Fair
Test Type: Conventional Straddle (Reset)
Tester: Kevin Taylor
Unit No: 56
Reference Elevations: 1760.00 ft (KB)
1751.00 ft (CF)
KB to GRV/CF: 9.00 ft

Serial #: 8649 Below (Straddle)
Press@RunDepth: psig @ 3052.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2012.05.13 End Date: 2012.05.14 Last Calib.: 2012.05.14
Start Time: 23:33:35 End Time: 08:40:49 Time On Btrt:
Time Off Btrt:

TEST COMMENT: I.F. Strong Blow B.O.B. 20 Min
I.S.I. No Blow
F.F. Strong Blow B.O.B. 18 Min
F.S.I. Bleed Off 4 Min Weak Surface Blow Died In 20 Min



PRESSURE SUMMARY

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

Recovery

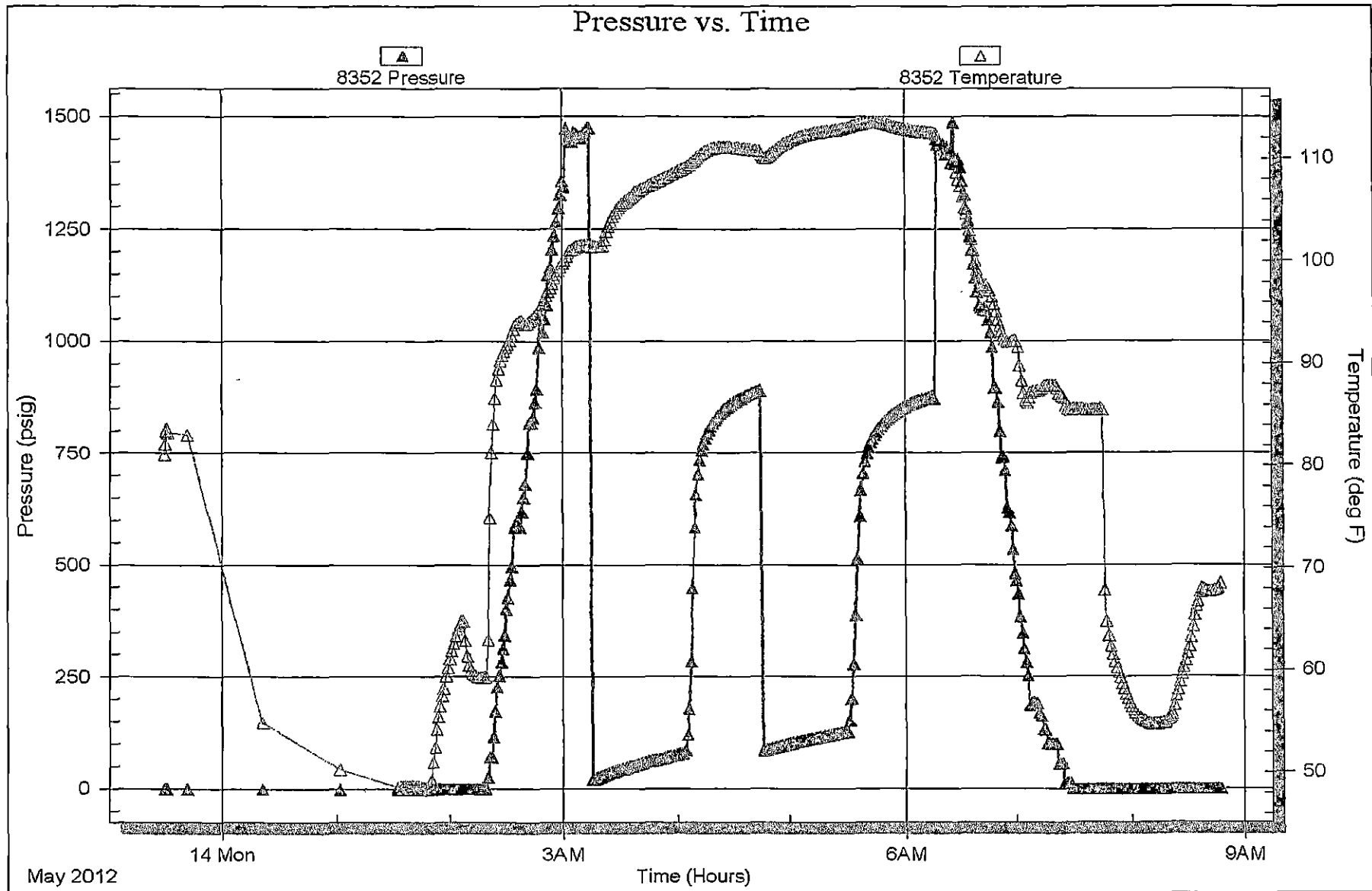
Length (ft)	Description	Volume (bbl)
50.00	WTR MUD CUT Oil TR%G 77%O 25%W	80.73
155.00	Mud Cut WTR TR%G 93%W 7%M	2.27
63.00	Mud Cut WTR TR%G 75%W 25%M	0.92

Gas Rates

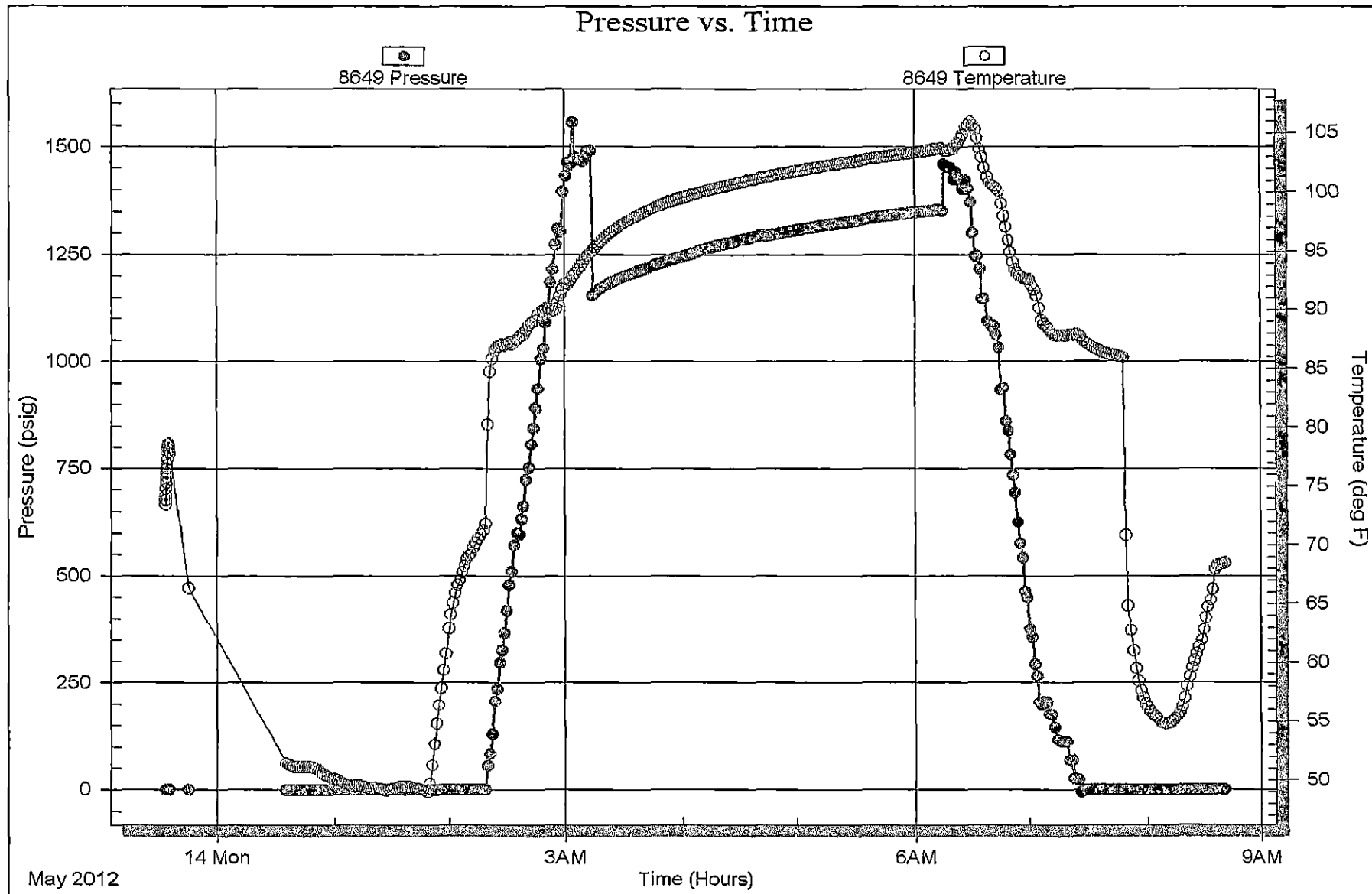
Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

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* Recovery from multiple tests



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Test Ticket

NO. 47531

Well Name & No. NOVOTNY 312 Test No. H1 Date 13 May 2012
 Company D.S. LANGSTON Elevation 1760 KB 1751 GL
 Address 310W CENTRAL STE 202 WICHITA KS 67202
 Co. Rep/Geo. Dave Williams Rig SOUTHWIND #2
 Location: Sec. 31 Twp. 18S Rge. 10W Co. Rice State KS

Interval Tested 3086-3121 Zone Tested LKC "5"
 Anchor Length 35 Drill Pipe Run 3087 Mud Wt. 8.9
 Top Packer Depth 3081 Drill Collars Run 0 Vis 4.5
 Bottom Packer Depth 3086 Wt. Pipe Run 0 WL 7.2
 Total Depth 3121 Chlorides 7200 ppm System LCM 14

Blow Description I.F. STRONG BLOW B.O.B 25 MIN
ISZ NO BLOW
F.F. STRONG BLOW B.O.B 12 SEC.
FSI NO BLOW

Rec	Feet of	%gas	%oil	%water	%mud
<u>50</u>	<u>Oil WTR Cut mud</u>	<u>25</u>	<u>12</u>	<u>18</u>	<u>45</u>
<u>0</u>	<u>648 GIP</u>				

Rec Total 50 BHT 103 Gravity _____ API RW _____ @ _____ F Chlorides _____ ppm

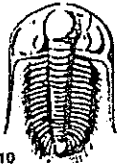
(A) Initial Hydrostatic 1500 Test 1150 T-On Location 0323
 (B) First Initial Flow 24 Jars 250 T-Started 0350
 (C) First Final Flow 29 Safety Joint 75 T-Open 0621
 (D) Initial Shut-In 371 Circ Sub _____ T-Pulled 0851
 (E) Second Initial Flow 29 Hourly Standby _____ T-Out 1020
 (F) Second Final Flow 35 Mileage 135 RT 209.25 Comments _____
 (G) Final Shut-In 195 Sampler _____
 (H) Final Hydrostatic 1464 Straddle _____

Initial Open 45 Shale Packer _____ Ruined Shale Packer _____
 Initial Shut-In 45 Extra Packer _____ Ruined Packer _____
 Final Flow 30 Extra Recorder _____ Extra Copies _____
 Final Shut-In 30 Day Standby _____ Sub Total 0
 Accessibility _____ Total 1684.25
 Sub Total 1684.25 MP/DST Disc't _____

Approved By Dave Williams Our Representative [Signature]

Tribolite 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.

785-656-3860



TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

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KCC WICHITA

Test Ticket

NO. 47532

Well Name & No. NOVOINY 31L Test No. # 2 Date 13 May 2012
 Company D S LANGSTON Elevation 1760 KB 1751 GL
 Address 310 W CENTRAL STE 202 WICHITA KS 67202
 Co. Rep / Geo. Dave Williams Rig Southwind # 2
 Location: Sec. 31 Twp. 18S Rge. 10W Co. Rice State Ks

Interval Tested 3023-3046 Zone Tested LKC "6"
 Anchor Length 23 Drill Pipe Run 3024 Mud Wt. 9.0
 Top Packer Depth 3018 Drill Collars Run 0 Vis 5c
 Bottom Packer Depth 3023 Wt. Pipe Run 0 WL 8.4
 Total Depth 3241 Chlorides 7,200 ppm System LCM 14

Blow Description I.F. STRONG Blow B.O.B IN 20 min
I.S.I. NO BLOW
F.I. STRONG Blow B.O.B 18 min
F.S.I. Blow off 4 min. Weak Surface Blow Dird IN 20 min

Rec	Feet of	TR %gas	%oil	%water	%mud
<u>50</u>	<u>Feet of mud with cut oil</u>	<u>77</u>	<u>77</u>	<u>25</u>	<u>8</u>
<u>155</u>	<u>Feet of mud cut with</u>	<u>TR %gas</u>	<u>%oil</u>	<u>93</u>	<u>7</u>
<u>63</u>	<u>Feet of mud cut with</u>	<u>TR %gas</u>	<u>%oil</u>	<u>75</u>	<u>25</u>
<u>0</u>	<u>Feet of 187 GIP</u>	<u>%gas</u>	<u>%oil</u>	<u>%water</u>	<u>%mud</u>
<u>0</u>	<u>Feet of</u>	<u>%gas</u>	<u>%oil</u>	<u>%water</u>	<u>%mud</u>

Rec Total 267 BHT 113 Gravity API RW 1.9 @ 63 °F Chlorides 49,000 ppm

(A) Initial Hydrostatic <u>1476</u>	<input checked="" type="checkbox"/> Test <u>1150</u>	T-On Location <u>2300</u>
(B) First Initial Flow <u>23</u>	<input checked="" type="checkbox"/> Jars <u>250</u>	T-Started <u>2325</u>
(C) First Final Flow <u>81</u>	<input checked="" type="checkbox"/> Safety Joint <u>75</u>	T-Open <u>0315</u>
(D) Initial Shut-In <u>893</u>	<input type="checkbox"/> Circ Sub	T-Pulled <u>0614</u>
(E) Second Initial Flow <u>88</u>	<input type="checkbox"/> Hourly Standby	T-Out <u>0800</u>
(F) Second Final Flow <u>130</u>	<input checked="" type="checkbox"/> Mileage <u>Stayed on Log</u>	Comments
(G) Final Shut-In <u>881</u>	<input type="checkbox"/> Sampler	
(H) Final Hydrostatic <u>1416</u>	<input checked="" type="checkbox"/> Straddle <u>600</u>	<input type="checkbox"/> Ruined Shale Packer

Initial Open 45
 Initial Shut-In 45
 Final Flow 45
 Final Shut-In 45
 Shale Packer
 Extra Packer
 Extra Recorder
 Day Standby
 Accessibility
 Sub Total 2075
 Ruined Packer
 Extra Copies
 Sub Total 0
 Total 2075
 MP/DST Disc't

Approved By Dave P. Williams Our Representative [Signature]

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785-656-3860
 THANKS