

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

November 2016

Form must be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

New Well Re-Entry Workover

Oil WSW SWD

Gas DH EOR

OG GSW

CM (Coal Bed Methane)

Cathodic Other (Core, Expl., etc.): _____

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

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to EOR Conv. to SWD

Plug Back Liner Conv. to GSW Conv. to Producer

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

EOR Permit #: _____

GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: _____

Spot Description: _____

_____-_____-_____- Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

Confidentiality Requested

Date: _____

Confidential Release Date: _____

Wireline Log Received Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT I II III Approved by: _____ Date: _____

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

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

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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
---	---	------------------------------------

Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
----------------	-------	---------	------------	--

Form	ACO1 - Well Completion
Operator	Downing-Nelson Oil Co Inc
Well Name	Hogan Family Trust 1-21
Doc ID	1311655

All Electric Logs Run

Micro
Sonic
Dual Induction
Compensated Density Neutron

Form	ACO1 - Well Completion
Operator	Downing-Nelson Oil Co Inc
Well Name	Hogan Family Trust 1-21
Doc ID	1311655

Tops

Name	Top	Datum
Top Anhydrite	1182'	+938
Base Anhydrite	1199'	+921
Heebner	3736'	-1616
Douglas Shale	3767'	-1647
LKC	3850'	-1730
BKC	4155'	-2035
Fort Scott	4301'	-2181
Conglomerate Sand	4352'	-2232
Mississippi	4402'	-2282
Gilmore City	4445'	-2325

Summary of Changes

Lease Name and Number: Hogan Family Trust 1-21

API/Permit #: 15-145-21807-00-00

Doc ID: 1311655

Correction Number: 1

Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved By	NAOMI JAMES	Karen Ritter
Approved Date	01/11/2016	07/14/2016
Date of First or Resumed Production or SWD or Enhr Disposition Of Gas - Sold	No	06/12/2016 Yes
Method Of Completion - Perf	No	Yes
Perf_Record_1		4360'-4364'
Perf_Shots_1		4
Producing Method Flowing	No	Yes
Production - MCF Gas		208
Save Link	../..kcc/detail/operatorEditDetail.cfm?docID=1264190	../..kcc/detail/operatorEditDetail.cfm?docID=1311655

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Tubing Set At		4360'
Tubing Size		2.3750
Well Type	OIL	GAS



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1264190
OIL & GAS CONSERVATION DIVISION

Form ACO-1
August 2013

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

CONFIDENTIAL WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD 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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
-----------------------------------	-----------------	---

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 1025

Date	Sec.	Twp.	Range	County	State	On Location	Finish
8-22-15	21	23	18	Pawnee	KS		2:15 PM

Location Sanford 105 to D Rd 1/4 E S into

Lease Hogan Family Trust	Well No. 1-21	Owner
--------------------------	---------------	-------

Contractor Discovery #2		To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
-------------------------	--	--

Type Job Surface		Charge To Downing-Nelson
------------------	--	--------------------------

Hole Size 12 1/4	T.D. 1189	
------------------	-----------	--

Csg. 8 5/8	Depth 1189	Street
------------	------------	--------

Tbg. Size	Depth	City State
-----------	-------	------------

Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
------	-------	--

Cement Left in Csg. 42.20	Shoe Joint 42.20	Cement Amount Ordered 450 80/20 3% cc 2% Gel
---------------------------	------------------	--

Meas Line	Displace 73 bbl	1/2# Gels
-----------	-----------------	-----------

EQUIPMENT

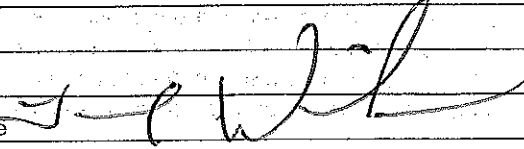
Pumptrk 20 No. Cementer		Common 360
	Helper Craig	Poz. Mix 90
Bulktrk 19 No. Driver	Nick	Gel. 9
	Driver Brett	Calcium 16

JOB SERVICES & REMARKS

Remarks:	Hulls
Rat Hole	Salt
Mouse Hole	Flowseal 225#
Centralizers	Kol-Seal
Baskets	Mud CLR 48
DV or Port Collar	CFL-117 or CD110 CAF 38
	Sand
	Handling 475
	Mileage 8 5/8

FLOAT EQUIPMENT

Ran 1189 8 5/8 surface	Guide Shoe 1 Baffle plate
Est circulation	Centralizer
Mix 450 sx	Baskets
Displaced Rubber plug w/ 77 bbl	AFU Inserts
Plug did not land	Float Shoe
Cement did circulate	Latch Down
	Rubber Plug 1
	Pumptrk Charge Long Surface
	Mileage 45

Signature 	Tax
	Discount
	Total Charge

JOB LOG

SWIFT Services, Inc.

DATE: 9-5-15 PAGE NO. 7

CUSTOMER: Downing & Nelson WELL NO: 1-21 LEASE: Hogan Family Trust JOB TYPE: Long String TICKET NO: 27042

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1900							On Loc. Rig Laying Down D.P.
	2015							Start in hole 5 1/2" 14 # Csg. Insert Float Shoe 4454' Latch down Baffle 4427' Cen. # 1, #3, #5, #7, #9 Back to top #1
	2145							Drop Ball
	2210							Circulate + Rotate
	2230							Plug R.H. + M.H. 30-20s/s
	2245		12					Pump 500gal Mud Flush
			20					2000 KCL Flush
	2250							Mix 125s/s EA-2 Cement
			30					Finish mixing
								wash out pump + line
	2300							Displ. Latch down Plug
	2315		108					Plug down
								Release Press. Float hold
	2345							wash + Rack up tool Job Complete

[Signature]
Rogers, Steve E., Isaac



DRILL STEM TEST REPORT

Prepared For: **Downing Nelson Oil Co Inc**

PO Box 1019
Hays KS 67601

ATTN: Al Downing

Hogan Family #1-21

21-23s-18w Pawnee,KS

Start Date: 2015.08.31 @ 22:38:00

End Date: 2015.09.01 @ 05:56:00

Job Ticket #: 62436 DST #: 1

Trilobite Testing, Inc
1515 Commerce Parkway Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2015.09.07 @ 10:44:12

Downing Nelson Oil Co Inc

21-23s-18w Pawnee,KS

Hogan Family #1-21

DST # 1

Cong. Sand

2015.08.31



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Dow ning Nelson Oil Co Inc

21-23s-18w Pawnee,KS

PO Box 1019
Hays KS 67601

Hogan Family #1-21

Job Ticket: 62436

DST#: 1

ATTN: Al Dow ning

Test Start: 2015.08.31 @ 22:38:00

GENERAL INFORMATION:

Formation: **Cong. Sand**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 01:34:15

Time Test Ended: 05:56:00

Test Type: Conventional Bottom Hole (Initial)

Tester: Cody Bloedorn

Unit No: 73

Interval: 4330.00 ft (KB) To 4353.00 ft (KB) (TVD)

Reference Elevations: 2115.00 ft (KB)

Total Depth: 4353.00 ft (KB) (TVD)

2107.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 8.00 ft

Serial #: 8940 Outside

Press@RunDepth: 558.11 psig @ 4335.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2015.08.31

End Date:

2015.09.01

Last Calib.:

2015.09.01

Start Time:

22:38:05

End Time:

05:55:59

Time On Btm:

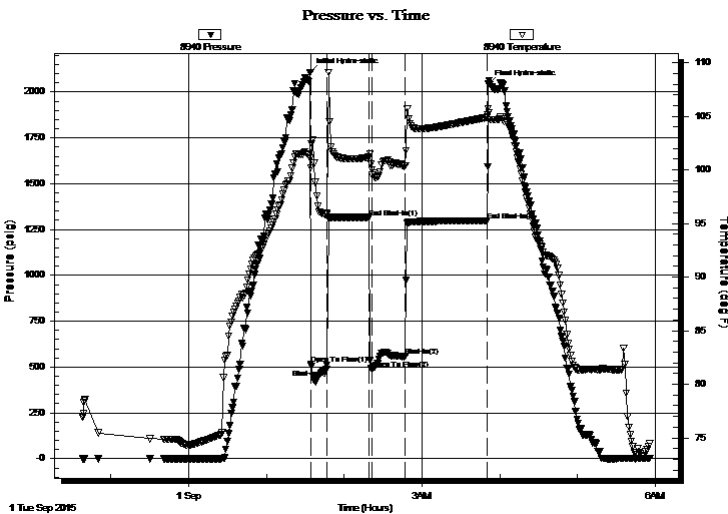
2015.09.01 @ 01:33:45

Time Off Btm:

2015.09.01 @ 03:51:00

TEST COMMENT: 15 - IF- B.O.B. instantly. G.T.S @ 6 minutes -Gauging
30 - IS- Did not bleed off
30 - FF- B.O.B. instantly - Gauging
60 - FS- bled off in 15 minutes, B.O.B. in 30 seconds

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2107.15	101.10	Initial Hydro-static
1	516.20	100.21	Open To Flow (1)
13	488.82	95.86	Shut-In(1)
45	1315.93	101.17	End Shut-In(1)
48	486.71	99.98	Open To Flow (2)
74	558.11	100.40	Shut-In(2)
137	1296.34	104.91	End Shut-In(2)
138	2042.60	105.71	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
120.00	GM - Show of oil, 5%G, 95%M	0.88
144.00	GVSOCM, 2%O, 5%G, 93%M	1.79
0.00	GTS	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
First Gas Rate	1.00	40.00	1563.93
Last Gas Rate	1.00	70.00	2426.40
Max. Gas Rate	1.00	70.00	2426.40



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Downing Nelson Oil Co Inc

21-23s-18w Pawnee,KS

PO Box 1019
Hays KS 67601

Hogan Family #1-21

Job Ticket: 62436

DST#: 1

ATTN: Al Downing

Test Start: 2015.08.31 @ 22:38:00

Tool Information

Drill Pipe:	Length: 4160.00 ft	Diameter: 3.80 inches	Volume: 58.35 bbl	Tool Weight: 2500.00 lb
Heavy Wt. Pipe:	Length: 155.00 ft	Diameter: 2.75 inches	Volume: 1.14 bbl	Weight set on Packer: 30000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 56000.00 lb
			<u>Total Volume: 59.49 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	13.00 ft			String Weight: Initial 50000.00 lb
Depth to Top Packer:	4330.00 ft			Final 51000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	23.00 ft			
Tool Length:	51.00 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			4303.00	
Shut In Tool	5.00			4308.00	
Hydraulic tool	5.00			4313.00	
Jars	5.00			4318.00	
Safety Joint	3.00			4321.00	
Packer	5.00			4326.00	28.00 Bottom Of Top Packer
Packer	4.00			4330.00	
Stubb	1.00			4331.00	
Perforations	4.00			4335.00	
Recorder	0.00	8648	Inside	4335.00	
Recorder	0.00	8940	Outside	4335.00	
Perforations	15.00			4350.00	
Bullnose	3.00			4353.00	23.00 Bottom Packers & Anchor

Total Tool Length: 51.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Dow ning Nelson Oil Co Inc

21-23s-18w Pawnee,KS

PO Box 1019
Hays KS 67601

Hogan Family #1-21

Job Ticket: 62436

DST#: 1

ATTN: Al Dow ning

Test Start: 2015.08.31 @ 22:38:00

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: sec/qt

Cushion Volume:

bbbl

Water Loss: 19.16 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 20000.00 ppm

Filter Cake: 2.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
120.00	GM - Show of oil, 5%G, 95%M	0.882
144.00	GVSOCM, 2%O, 5%G, 93%M	1.786
0.00	GTS	0.000

Total Length: 264.00 ft

Total Volume: 2.668 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

GAS RATES

Dow ning Nelson Oil Co Inc

21-23s-18w Pawnee,KS

PO Box 1019
Hays KS 67601

Hogan Family #1-21

Job Ticket: 62436

DST#: 1

ATTN: Al Dow ning

Test Start: 2015.08.31 @ 22:38:00

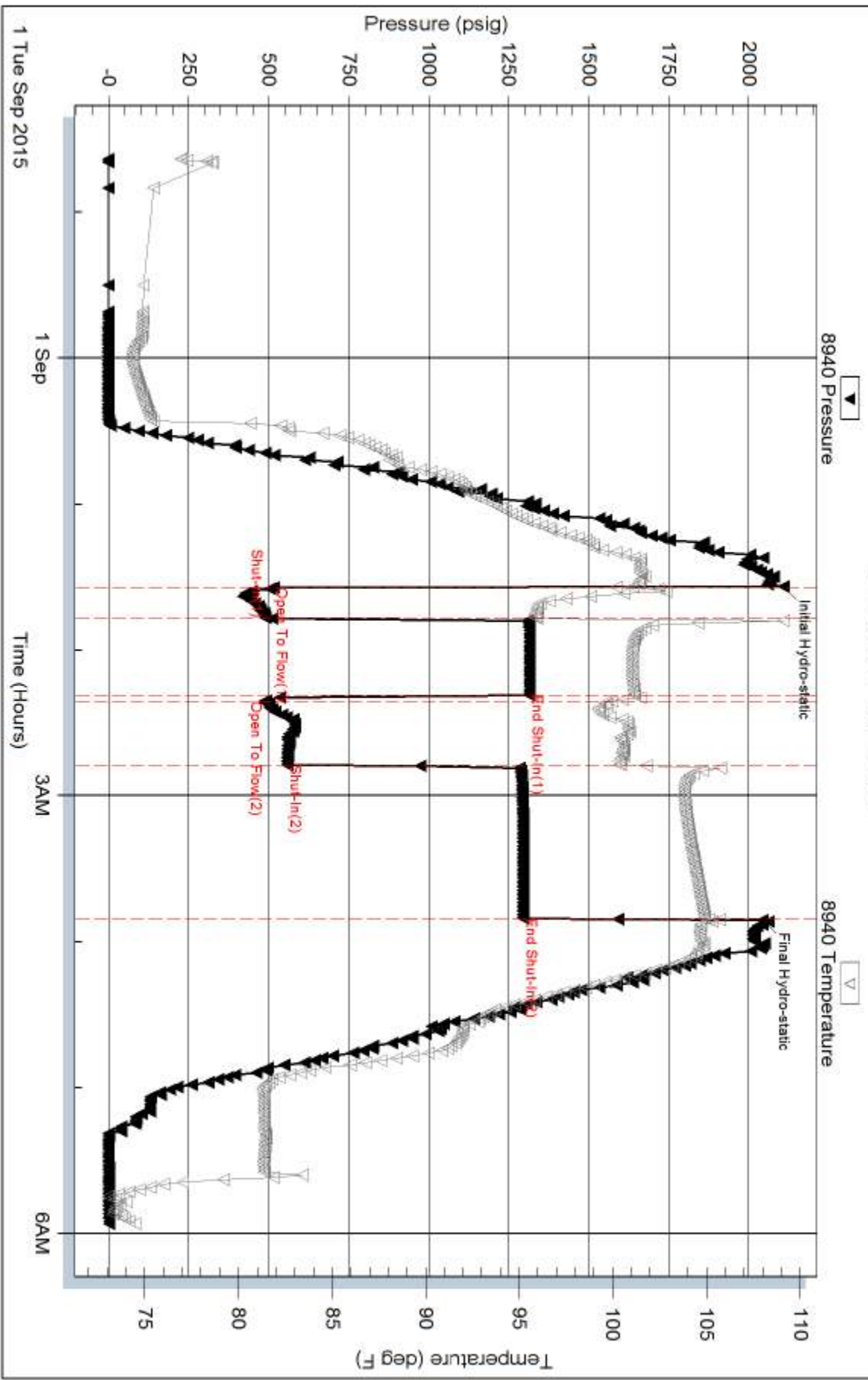
Gas Rates Information

Temperature: 59 (deg F)
Relative Density: 0.65
Z Factor: 0.8

Gas Rates Table

Flow Period	Elapsed Time	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
1	6	1.00	40.00	1563.93
1	6	1.00	40.00	1563.93
1	10	1.00	50.00	1851.42
1	15	1.00	60.00	2138.91
2	5	1.00	40.00	1563.93
2	10	1.00	60.00	2138.91
2	15	1.00	65.00	2282.66
2	20	1.00	69.00	2397.65
2	30	1.00	70.00	2426.40

Pressure vs. Time



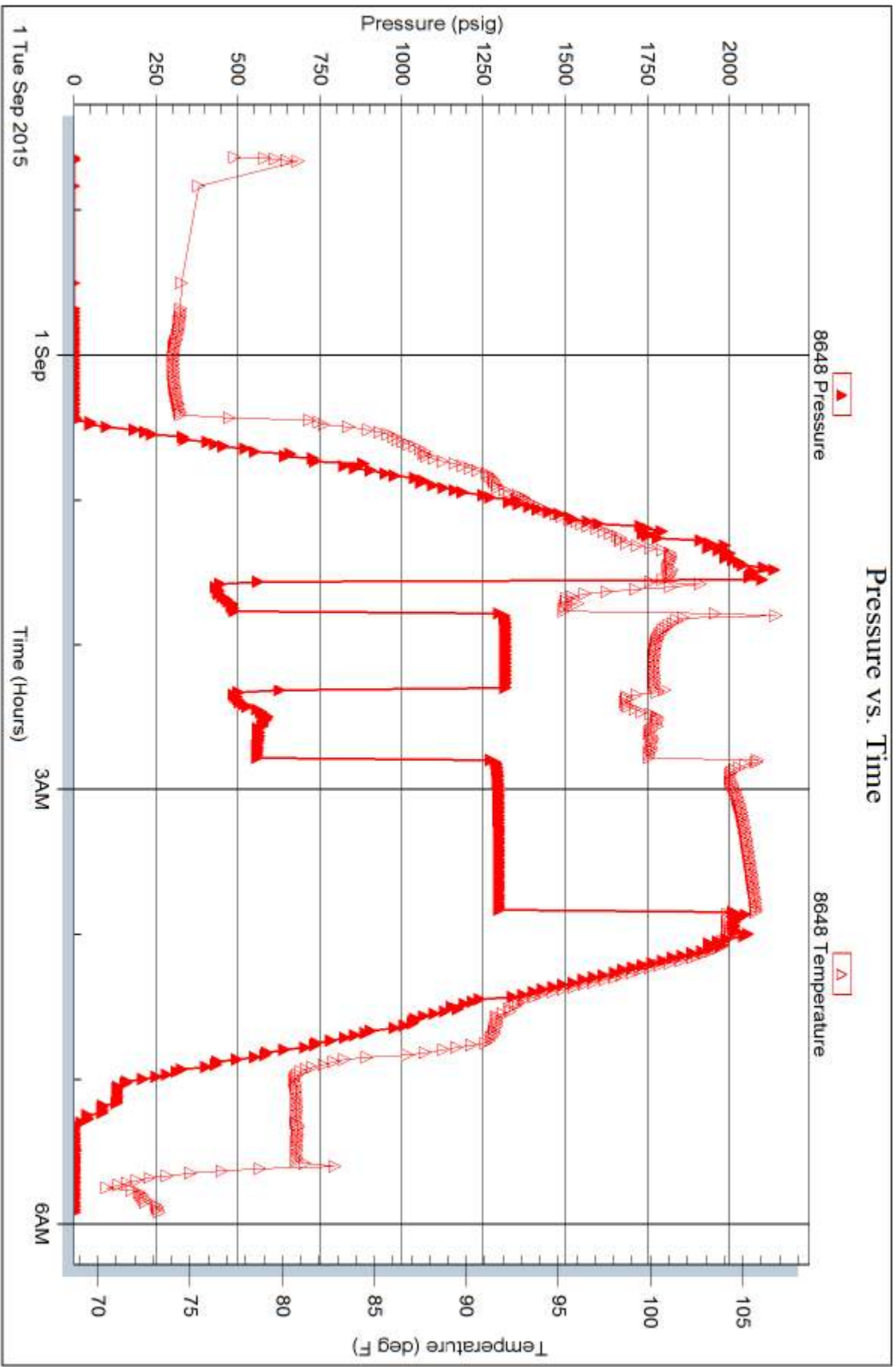
Serial #: 8648

Inside

Downing Nelson Oil Co Inc

Hogan Family #1-21

DST Test Number: 1





TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 62436


Well Name & No. Hogan Family Trust 1-21 Test No. 1 Date 8-31-15
 Company Downing Nelson Oil Company Inc Elevation 2113 KB 2107 GL
 Address Po Box 1019, Hays KS, 67601
 Co. Rep / Geo. Al Downing Rig Discovery #2
 Location: Sec. 21 Twp. 23S Rge. 18W Co. Pawnee State KS

Interval Tested 4330-4353 Zone Tested Cong. Sand
 Anchor Length 23' Drill Pipe Run 4160' Mud Wt. 8.9
 Top Packer Depth 4325 Drill Collars Run — Vis NA
 Bottom Packer Depth 4330 Wt. Pipe Run 155' WL 19.2
 Total Depth 4353 Chlorides 20,000 ppm System LCM 2#
 Blow Description IF-B.O.B. instantly. G.T.S. @ 6 minutes gauging
ISI - Did not bleed off
FF-B.O.B. instantly - Gauging
FSI - bled off in 15 minutes. B.O.B. in 30 seconds.

Rec	Feet of	%gas	%oil	%water	%mud
<u>120</u>	<u>6M - show of oil</u>	<u>5</u>			<u>95</u>
<u>144'</u>	<u>6USOCM</u>	<u>5</u>	<u>2</u>		<u>93</u>
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 164' BHT 104° Gravity — API RW — @ — °F Chlorides — ppm

(A) Initial Hydrostatic <u>2107</u>	<input checked="" type="checkbox"/> Test <u>1150</u>	T-On Location <u>2218</u>
(B) First Initial Flow <u>516</u>	<input checked="" type="checkbox"/> Jars <u>250</u>	T-Started <u>2238</u>
(C) First Final Flow <u>488</u>	<input checked="" type="checkbox"/> Safety Joint <u>75</u>	T-Open <u>0134</u>
(D) Initial Shut-In <u>1315</u>	<input type="checkbox"/> Circ Sub	T-Pulled <u>0349</u>
(E) Second Initial Flow <u>486</u>	<input type="checkbox"/> Hourly Standby	T-Out <u>0556</u>
(F) Second Final Flow <u>558</u>	<input checked="" type="checkbox"/> Mileage <u>121RT</u>	Comments <u>loaded tools 9/5 12:00</u>
(G) Final Shut-In <u>1296</u>	<input type="checkbox"/> Sampler	
(H) Final Hydrostatic <u>2042</u>	<input type="checkbox"/> Straddle	<input type="checkbox"/> Ruined Shale Packer
	<input type="checkbox"/> Shale Packer	<input type="checkbox"/> Ruined Packer
Initial Open <u>15</u>	<input type="checkbox"/> Extra Packer	<input type="checkbox"/> Extra Copies
Initial Shut-In <u>30</u>	<input type="checkbox"/> Extra Recorder	Sub Total <u>0</u>
Final Flow <u>30</u>	<input type="checkbox"/> Day Standby <u>?</u>	Total <u>1596</u>
Final Shut-In <u>60</u>	<input type="checkbox"/> Accessibility	MP/DST Disc't
	Sub Total <u>1596</u>	

Approved By _____ Our Representative Cody Blocker 

TriLOBITE 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.



TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Gas Volume Report

Downing Nelson Oil Co Inc
Operator

Hogan Family Trust 1-21
Well Name and No.

62436
DST No.

Initial				Final				
Min.	Ins. of Water PSIG	Orifice Size	MCF/D	Min.	Ins. of Water PSIG	Orifice Size	MCF/D	
6	40	1"	GTS. 1563.935	0	40	1"		
10	50	}	1851.424	5	40	}	1563.935	
14	60		2138.912	10	60		2138 2138.912	
					15		65 65	2282 2282.656
					20		69	2397 2397.651
					25		70	2426.400
				30	70		2426.400	

Remarks:

Marc A. Downing		Geologic Report	
Consulting Petroleum Geologist		Drilling Time and Sample Log	
Operator Downing-Nelson Oil Co., Inc.		Elevation 2120	
Lease Hogan Family Trust No. 1-21		Casing Record Surface 8 5/8" @ 1189'	
API # 15-145-21807-0000		Production 5 1/2" @ 4456'	
Field Wildcat		Electrical Surveys	
Location 564' FNL & 335' FWL		CNDL, DIL, MEL, SONIC	
Sec. 21	Twp. 23s	Rge. 18w	
County Pawnee		State Kansas	
Formation		Sample tops	Log Tops
Top Anhydrite		1178	1182
Base Anhydrite		1199	1199
Datum		Struct Comp	
Heebner		3732	3736
Douglas Sh		3763	3767
LKC		3847	3850
BKC		4151	4155
Fort Scott		4295	4301
Conglomerate Sand		4347	4352
Miss		4396	4402
Gilmore City		4441	4445
Total Depth		4460	4456
Reference Well for Structural Comparison		DNOCI	
Leta Faye #1-20		565' FNL & 1595' FEL	
Sec. 20-23s-18w			

Drilling Contractor Discovery Drilling, Rig #2	
Commenced 8-21-15	Completed 9-5-15
Samples Saved From 3700	To RTD
Drilling Time Kept From 3600	To RTD
Samples Examined From 3700	To RTD
Geological Supervision From 3700	To RTD

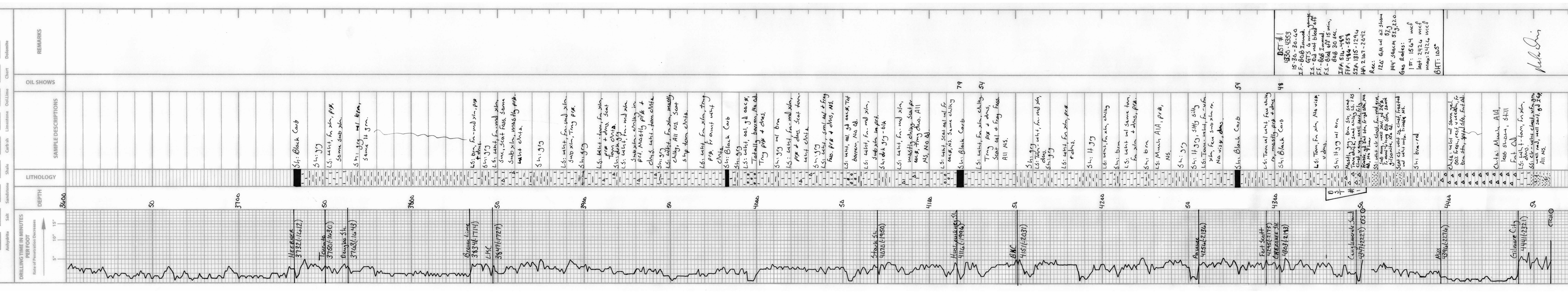
Summary and Recommendations

Due to structural position, DST recovery, and log evaluation, it was decided to set 5 1/2" production casing for completion.

During short trip for DST #1, a portion of the blocks broke while working a tight spot. The elevators hit the table, came open, and released the drill pipe down hole 600'. Only one DST was conducted due to hole conditions.

Respectfully Submitted,

Marc A. Downing



DST #1
 15-30-30-40
 I.F.-608 Immed.
 GTS 4 min, gauge
 I.S.-0-0 not bleed off
 F.F.-608 Immed.
 F.S.-0-0 15 min,
 608 30 sec.
 I.F.A. 516-489
 P.F.P. 484-658
 S.T.A. 1315-1294
 H.P. 2107-2042
 Rec.:
 120' GM w/ oil show
 8 1/2"
 144' 500CM ST, 210
 Gas Rates:
 1ST: 1564 mcf
 last: 2426 mcf
 max: 2426 mcf
 6HT: 105'

Handwritten signature: *M.A. Downing*