Confide	ntiality F	Requested:
Yes	No No	

CORRECTION #1

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1324253

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 #			API No.:			
Name:				Spot Description:		
Address 1:			Sec.	TwpS. R East West		
Address 2:			F	eet from 🗌 North / 🗌 South Line of Section		
City:	State: Z	ip:+	F	eet from East / West Line of Section		
Contact Person:			Footages Calculated from	Nearest Outside Section Corner:		
Phone: ()				N SE SW		
CONTRACTOR: License #			GPS Location: Lat:	, Long:		
Name:				(e.g. xx.xxxx) (e.gxxx.xxxx)		
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84		
Purchaser:			County:			
Designate Type of Completion:			Lease Name:	Well #:		
	e-Entry	Workover	Field Name:			
	SWD		Producing Formation:			
	EOR		Elevation: Ground:	Kelly Bushing:		
	GSW		Total Vertical Depth:	Plug Back Total Depth:		
CM (Coal Bed Methane)			Amount of Surface Pipe S	et and Cemented at: Feet		
Cathodic Other (Co	ore, Expl., etc.):		Multiple Stage Cementing Collar Used?			
If Workover/Re-entry: Old Well	nfo as follows:		If yes, show depth set:	Feet		
Operator:			If Alternate II completion,	cement circulated from:		
Well Name:			feet depth to:	w/sx cmt.		
Original Comp. Date:	Original T	otal Depth:				
Deepening Re-per	f. Conv. to E	OR Conv. to SWD	Drilling Fluid Manageme	nt Plan		
Plug Back	Conv. to C	SSW Conv. to Producer	(Data must be collected from			
			Chloride content:	ppm Fluid volume: bbls		
Commingled			Dewatering method used:			
Dual Completion SWD			Lagation of fluid diagonal i	f hould officiate		
			Location of fluid disposal i	naued onsite.		
			Operator Name:			
			Lease Name:	License #:		
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R East _ West		
Recompletion Date		Recompletion Date	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:					

CORRECTION #1

1324253

Operator Nar	ne:			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 (Attach Additional Si	haats)	Y	′es 🗌 No		L	og	Formatio	n (Top), Depth	and Datum	Sample
Samples Sent to Geolo			′es 🗌 No		Nam	e			Тор	Datum
Cores Taken Electric Log Run Geolgist Report / Mud List All E. Logs Run:		Y	Yes ☐ No Yes ☐ No Yes ☐ No							
		Rep	CASING ort all strings set-c	RECORD [Ne Ne, inte		Used e, productio	on, etc.		
Purpose of String	Size Hole Drilled		ze Casing et (In O.D.)	Weight Lbs. / Ft.			etting epth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTING	/ SQU	EEZE F	RECORD			
Purpose: Perforate Protect Casing	Depth Top Bottom	Туре	e of Cement	# Sacks Us	ed			Type and	I Percent Additives	
Plug Back TD Plug Off Zone										
 Did you perform a hydr Does the volume of the Was the hydraulic fract 	total base fluid of the	hydraulic fr	acturing treatment		-	ns?] Yes] Yes] Yes	No (If No,	skip questions 2 ar skip question 3) fill out Page Three	
Date of first Production/In Injection:	ijection or Resumed Pr	oduction/	Producing Meth	iod:		Gas Lift	0	ther <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er	Bb	ls.	Gas-Oil Ratio	Gravity
DISPOSITIO	N OF GAS:		N Open Hole	IETHOD OF CC		TION: Comp.	Com	mingled	PRODUCTIC Top	DN INTERVAL: Bottom
(If vented, Subr					-	ACO-5)		nit ACO-4)		
Shots Per Per Foot	rforation Perfora Top Botto		Bridge Plug Type	Bridge Plug Set At			Acid,		ementing Squeeze	
TUBING RECORD:	Size:	Set At:		Packer At:						

Form	ACO1 - Well Completion
Operator	Val Energy, Inc.
Well Name	JOHN A 2-20
Doc ID	1324253

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Type and Percent Additives
Surface	12.25	8.625	24	266	6040	3%CC 4%GEL
Production	7.875	5.5	15.5	4845	AA2	3%CC 4%GEL

Summary of Changes

Lease Name and Number: JOHN A 2-20 API/Permit #: 15-193-20958-00-00 Doc ID: 1324253 Correction Number: 1 Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved By	NAOMI JAMES	Karen Ritter
Approved Date	10/26/2015	12/07/2016
Date of First or Resumed Production or		1/2/2016
SWD or Enhr Perf_Depth_1		4700-4704
Perf_Record_1		4700-4704
Perf_Shots_1		4
Producing Method Pumping	No	Yes
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 68846	//kcc/detail/operatorE ditDetail.cfm?docID=13 24253



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1268846

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

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

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from D North / D South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
OG GSW Temp. Abd. CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
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	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Permit #:	
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
Recompletion Date Recompletion Date	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:

KOLAR Document ID: 1268846

Operator Nam	ne:			Lease Name:	Well #:
Sec	Twp	S. R	East West	County:	

Page Two

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 (Attach Additional Sh	acate)	Y	′es 🗌 No			og Formatio	n (Top), Depth a	and Datum	Sample
Samples Sent to Geolo			⁄es 🗌 No	1	Name	Э		Тор	Datum
Cores Taken Electric Log Run Geologist Report / Mud List All E. Logs Run:		□ Y □ Y	Yes ☐ No Yes ☐ No Yes ☐ No						
		Rep	CASING ort all strings set-c] Ne	w Used rmediate, productio	on. etc.		
Purpose of String	Size Hole Drilled	Siz	ze Casing et (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
[ADDITIONAL	CEMENTING /	SQU	EEZE RECORD			
Purpose:	Perforate Top Bottom						Type and	Percent Additives	
Protect Casing Plug Back TD Plug Off Zone									
 Did you perform a hydra Does the volume of the Was the hydraulic fracture 	total base fluid of the	hydraulic fr	acturing treatment		-	☐ Yes ns? ☐ Yes ☐ Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three	
Date of first Production/Inj Injection:	jection or Resumed Pr	oduction/	Producing Meth	iod:		Gas Lift 🗌 O	ther <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er Bb	ls.	Gas-Oil Ratio	Gravity
DISPOSITIO	N OF GAS:		Ν	IETHOD OF COM	MPLE	TION:		PRODUCTIC Top	DN INTERVAL: Bottom
Vented Sold (If vented, Subn	Sold Used on Lease Open Hole Perf.					·	nit ACO-4)	юр	Bollom
	foration Perform Top Botto		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeezend of Material Used)	
TUBING RECORD:	Size:	Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	Val Energy, Inc.
Well Name	JOHN A 2-20
Doc ID	1268846

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Type and Percent Additives
Surface	12.25	8.625	24	266	6040	3%CC 4%GEL
Production	7.875	5.5	15.5	4845	AA2	3%CC 4%GEL



PAGE	CUST N	YARD #	INVOICE DATE									
1 of 1	100440ອ	1718	09/29/2015									
	INVOICE NUMBER											
91928905												

	Pratt	(620)	672-1201	J	LEASE NAME LOCATION	John A	2-20
I L	VAL ENERGY 125 n marl	Y ket ste 1710		B	COUNTY STATE	Thomas KS	
т	WICHITA KS US	67202		I T E	JOB DESCRIPTION JOB CONTACT	Cement-New	Well Casing/Pi

o ATTN: ACCOUNTS PAYABLE

JOB #	JOB # EQUIPMENT # PURCHA		ORDER NO.		TERMS	DUE DATE
40878881	86779				Net - 30 days	10/29/2015
		1	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates	s: 09/23/2015 to 0	9/23/2015				
0040878881						
171919690A Com	ent-New Well Casing/Pi	09/22/2015				
Cement 5 1/2" Long	-	09/23/2015				
AA2 Cement			150.00	EA	8.16	1,224.00 T
A-Con Blend Commo	on		400.00		8.64	
60/40 POZ			50.00		5.76	1 1
Celloflake			138.00		1.78	
Calcium Chloride			1,128.00		0.50	
C-41P			36.00		1.92	
Salt			751.00		0.24	
FLA-322			113.00 500.00		3.60	
Super Flush II Gilsonite			750.00	1	0.73 0.32	
Mag Chem 10CR			423.00		1.30	
-	Collar, 5 1/2"" (Blue)		1.00		2,160.00	
"Auto Fill Float Shoe			1.00		172.80	
"Turbolizer, 5 1/2""			12.00		52.80	
"5 1/2"" Basket (Blu			1.00		139.20	
"Unit Mileage Chg (F	PU, cars one way)"		100.00	мі	2.16	216.00
Heavy Equipment Mi	ileage		300.00	MI	3.60	1,080.00
"Proppant & Bulk De	el. Chgs., per ton mil		2,800.00	EA	1.20	3,360.00
Depth Charge; 4001	'-5000'		1.00	EA	1,209.60	1,209.60
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						1. A. C.
PLEASE REMIT	TO: SE	ND OTHER CORRES	PONDENCE TO	D:		17 173 77
		SIC ENERGY SERV			SUB TOTAL	17,172.77
PO BOX 841903 DALLAS,TX 752		1 CHERRY ST, ST ORT WORTH, TX 763		- 	TAX	569.58
		HOILEN 11 /0.		TNVC	DICE TOTAL	17,742.35

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FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

		SERVICES	P.O. Prati	4 NE Hwy. 61 Box 8613 t, Kansas 6712 te 620-672-120	1		17	Cont	462	A	
	PRESSURE PU		2	Same Calancia Inc.	<u>-35W</u> NEWL @/		DATE PROD INJ	TICKET NO.		ISTOMER IDER NO.:	
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BASIC Page # 1012

TREATMENT REPORT

energy services, L.P.

Feb Order Station PLatt Kransas Open County Transas Istance Pipe doc. M. W. 2. Stage Long String Formation Log Description: 3 State Pipe dot. M. W. 2. Stage Long String Formation Log Description: 3 State Pipe dot. M. W. 2. Stage Long String Formation Log Description: 3 State Pipe dot. M. W. 2. Stage Long String Formation Log Description: 3 State Pipe dot. M. Stage Long String Formation Log Description: 3 State Pipe dot. Construction Formation Formation Log Description: 3 State Pipe dot. Construction Formation Formation Formation Pipe dot. Construction Formation Formation Log Description: 3 State Pipe dot. Construction Formation Formation Formation Formation Pipe dot. Construction Formation Formation Formation Formation Pipe dot. Construction Formation Formation Formation Formation Pipe dot. Construction Formation Formation Formation Forma	Customer	· · · · · · · · · · · · · · · · · · ·	Lgy, I	nc.	Lease Well #					Date	1_	γz	-10	C	<u></u>
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PIPE DATA PERFORATING DATA FUBID USED Box Unit Start TRATE PRESSURE geldg Size Tubing Size ShotePt Add 15.25 as hs AAD with PATE PRESSURE (SMine) geldg Size Point From To ProPad 252.Def Context Max 101.511, SATUR 15Min. geldg Size ShotePt From To ProPad 252.Def Context Max 101.511, SATUR 15Min. geldg Size From To ProPad 252.Def Context Max 101.511, SATUR 15Min. SMine 37.000 (SMine) geldg Size From To Prom To Propad 15.050 (SMine) geldg Size From To Propad 15.050 (SMine) Annuk Vellg Used 15.050 (SMine) To SUM geldg Size From To Propad 15.050 (SMine) Annuk Vellg Used 15.050 (SMine) Annuk Vellg Used 15.050 (SMine) geldg Size From To From To From To Staton Manager If Vellg Used 15.050 (SMine) Annuk Vellg Used 15.050 (SMine) <td< td=""><td></td><td><u>N.W.:</u> 2</td><td><u>} 51aq</u></td><td><u>e Lon</u></td><td><u>a Strin</u></td><td></td><td>nent</td><td>1 onnation</td><td>, T</td><td></td><td>2000 (100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100</td><td>20-</td><td>35</td><td>35h</td><td>/</td></td<>		<u>N.W.:</u> 2	<u>} 51aq</u>	<u>e Lon</u>	<u>a Strin</u>		nent	1 onnation	, T		2000 (100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100	20-	35	35h	/
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amose Are beside Franklin Antifal Chatvez Immed Areasing Pressure Bbbs. Pumped Rate Service Log 6:15 Trucks on location and hold safety meeting. 5:30 WWD.illim, start to run 127 55 into used. Tested Auto Fill Float shoe, shoe Saint with Latel Down Baffle Screwed into collar and atotal of 127 51s. Used Tested S12" cas ing. A Turbridger was installed on 51# 52. A DUTaol was installed on top of 51 H SI or 2789 Feet down from surface. Start for 1 Hour. 1:30 Casing in well Circulate for 1 Hour. 1:50 Soo Shut in well Pressure Test. Open well. 1:53 2000 Shut in well Pressure Test. Open well. 1:53 2000 Shut in well Pressure Test. Open well. 1:53 2000 Shut in well Pressure Test. Open well. 1:53 2000 Shut in well Pressure Test. Open well. 1:53 2000 Shut in well Pressure Test. Open well. 1:53 2000 Shut in well Pressure Test. Open well. 1:53 2000 Shut in well Pressure Test. Open well. 1:50 2000 Shut in well Pressure Test. Open well. 1:50 5 Start Fresh Water spacer 1:000 Shu		37,216	1898:	2 86.7	79 70	959	13,768				·				
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BASIC Page # 2012

energy services, L.R.

TREATMENT REPORT

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10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • (620) 672-1201 • Fax (620) 672-5383

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PO BOX 841903	00	1 CHERRY ST,	CTT 2100		1	TAX		82.0



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

FIELD SERVICE TICKET 1718 12769 A

PRES		PING & WIRELINE					DATE TICKET NO			
DATE OF			4 10					STOMER DER NO.:		
		x 6 Y		-	LEASE	JOK.	NA 2-20	WELL NO.		
ADDRESS		i		COUNTY THOMAS STATE KC						
CITY		STATE			SERVICE CR	IEW Ser	Mian Editado Fr	(s. I. d		
AUTHORIZED BY					JOB TYPE:	C	in sty suppor	te c		
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CALLED			
							ARRIVED AT JOB	AM 225		
19443	20	provide the second second					START OPERATION	AM 25		
- 19860	15	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					FINISH OPERATION	AM 820		
			_		<u></u> ,		RELEASED	AM 8 15		
			-				MILES FROM STATION TO WELL	100		

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED:_

				(WELL OWNE	R, OPERATOR, CONT	HACTOH OH AG	JEINT)
ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERV	ICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUN	П
QP 103	Galy page and		SK	200 /		2.400	00
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SERVICE		VE MATERIAL AND SEF D BY CUSTOMER AND	RECEIVE	D BY	9.2.67		

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

BASSE energy services, L.P.

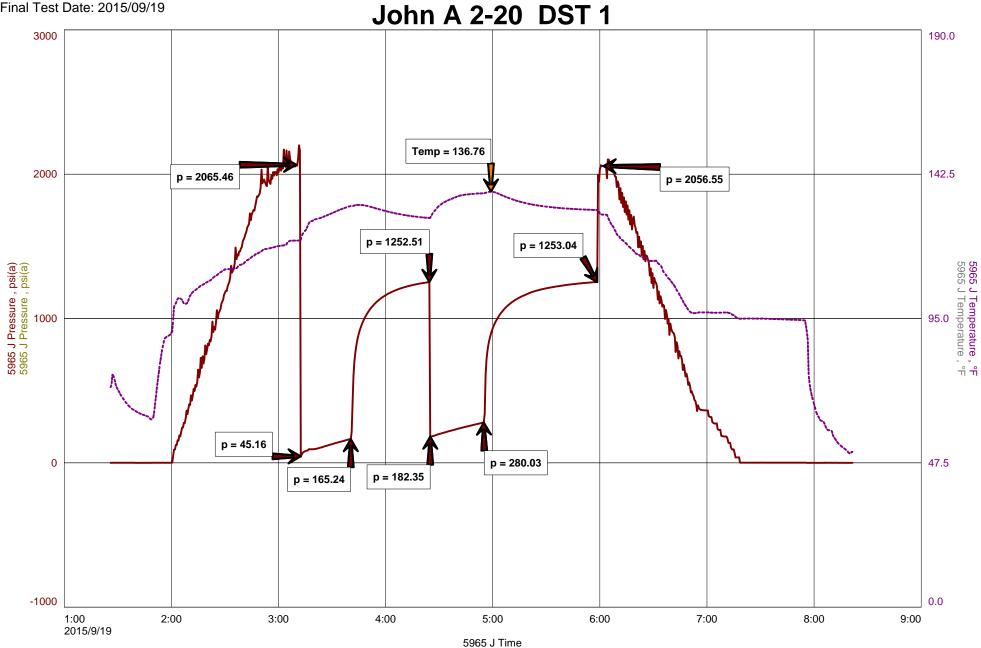
TREATMENT REPORT

Customer	11-8	VERD	7	Lease No.		•		Date			
Lease	Will W	P	<u> </u>	Well #.	-20	· · ·			09-1	4-15	97728 ·
Field Order #	Station	enell	te		Casing	Dept	BY	County	1/a m/4	5	State,
Type Job	J & 5.		ilf phe	ŝ		Formatior)		Legal [Description	-25-
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Casing Size	Tubing Siz	e Shots/F	Ft.		Acid			RATE PI	RESS	ISIP	
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/olume	Volume	From	То		Pad		Min			10 Min.	
Max Press	Max Press	From	То		Frac		Avg			15 Min.	
		From	То		· · .	"	HHP Use				Pressure
Plug Depth /	Packer De	From	То		Flush		Gas Volu		<u></u>	Total Lo	ad 7
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Taylor Printing, Inc. 620-672-3656

Val Energy DST 1 Lan H,I,J 4294-4350 Start Test Date: 2015/09/19 Final Test Date: 2015/09/19





Diamond Testing General Report

Wilbur Steinbeck TESTER CELL: 620-282-1573

General Information

Company Name	Val Energy		
Contact	Harley Sayles	Job Number	W208
Well Name	John A 2-20	Representative	Wilbur Steinbeck
Unique Well ID	DST 1 Lan H,I,J 4294-4350	Well Operator	WW 2
Surface Location	20-8s-35w Thomas/Kans	Report Date	2015/09/19
Field	Wildcat	Prepared By	Wilbur Steinbeck
		Qualified By	Harley Sayles

Test Information

Test Type Formation Well Fluid Type Test Purpose (AEUB)	Conventional Lan H,I,J 01 Oil Initial Test	
Start Test Date	2015/09/19 Start Test Time	01:26:00
Final Test Date	2015/09/19 Final Test Time	08:22:00

Test Recovery

Recovery	656' Gassy Free Oil
-	150' GMCO 25%G 25%M 50%O
	806' Total Fluid
	400' GIP

Tool Sample GMCO 10%G 20%M 70%O

Corrected Gravity=35.8



DIAMOND TESTING P.O. Box 157 HOISINGTON, KANSAS 67544 (800) 542-7313 DRILL-STEM TEST TICKET

TIME ON: 1:26

TIME OFF: 8:22

	/		FILE: Johr	n A 2-20 DS	<u>[1</u>					
Company Val Energy I	nc			Lease &	Well NoJ	ohn A 2-20				
Contractor WW 2				Charge	to_Val					
Elevation3320 KB	Formati	on	Lan I	H,I,J Effective	e Pay		Ft	. Ticket	No.	W208
Date 9-19-15 Sec.	20	Twp	<u>8</u> S					homas		KANSAS
Test Approved By Harley Say	/les							our Steii	nbeck	
Formation Test No.	1 Int	hotseT levre	from	4294 ft to		4350 н т	otal Do	oth		4350 ft.
Packer Depth						n. i				in.
Packer Depth		Size6 3								in.
Depth of Selective Zone Sel								0120		
Top Recorder Depth (Inside			4280 ft.	Recorde	r Number	59	965 Car))	500	0 P.S.I.
Bottom Recorder Depth (Ou	All Contractions		4205		100	55		0	= 0.0	⁰⁰ P.S.I.
Below Straddle Recorder De	 Alter Marchael 				*					
Mud Type Chem			63			1				
Weight9.0	Water Loss		8.8	The Design Design		1	151121			
Chlorides	,		4000 P.P.M.		Length					/2 ir
	Serial Nur		7	C	.					
Did Well Flow?Y		rsed Out	NO				56 _{ft.}		4 1/	
Main Hole Size 7 7/8		Joint Size	4 1/2ir	n. Surface	Choke Size	a1				
Blow: 1st Open: BOB in	5 min		BOB	in 13 min						
2nd Open: BOB in			BOB i	n 14 min						1
Recovered 656 ft. of	Gassy Free C	Dil								
	GMCO 25%G		50							
	Total Fluid									
Recovered ⁴⁰⁰ ft. of										
Recovered ft. of					130 Miles	RT	Price	e Job		
Recoveredft. of		194 - 11 - 11 - 11 - 11 - 11 - 11 - 11 -					Othe	er Charge	es	
Remarks:							Insu	rance		
Tool Sample=GMCO 10)%G 20%M 7	70%O								
Corrected Gravity=35.8							Tota	1		
Time Set Packer(s)		A.M. P.M. Tir	ne Started Off	Bottom	5:55	A.M. P.M. N	laximun	n Tempe	rature	137
Initial Hydrostatic Pressure				5/ S		2065 P.S.I.				
Initial Flow Period		Minutes	30	О(В)		45 _{P.S.I.}	to (C)_		165	P.S.I.
Initial Closed In Period		Minutes		(U)		1253 P.S.I.				
Final Flow Period		Minutes		(Ľ/		182 P.S.I.			80 _F	P.S.I.
Final Closed In Period		Minutes	6	0(G)		1253 P.S.I.				
Final Hydrostatic Pressure				(H)		2057 _{P.S.I.}				

Diamond Testing shall not be liable for damages of any kind to 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 statement or opinion concerning the result 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.

Val Energy DST 2 Lan K 4346-4382 Start Test Date: 2015/09/19 Final Test Date: 2015/09/19





Diamond Testing General Report

23:13:00

Wilbur Steinbeck TESTER CELL: 620-282-1573

General Information

Final Test Date

Company Name Val	Energy		
Contact	Harley Sayles	Job Number	W209
Well Name	John A 2-20	Representative	Wilbur Steinbeck
Unique Well ID	DST 2 Lan K 4346-4382	Well Operator	WW 2
Surface Location	20-8s-35w Thomas/Kans	Report Date	2015/09/19
Field	Wildcat	Prepared By	Wilbur Steinbeck
		Qualified By	Harley Sayles

Test Information

Test Type Formation Well Fluid Type Test Purpose (AEUB)	Conventional Lan K 01 Oil Initial Test	
Start Test Date	2015/09/19 Start Test Time	15:00:00

2015/09/19 Final Test Time

Test Recovery

Recovery	70' Gassy Free Oil
	80' GWMCO 15%G 10%W 25%M 40%O
	150' Total Fluid
	180' GIP

Tool Sample GWMCO 10%G 10%W 40%M 40%O

Corrected Gravity=38



DIAMOND TESTING P.O. Box 157 HOISINGTON, KANSAS 67544 (800) 542-7313 DRILL-STEM TEST TICKET

TIME ON: 15:00

TIME OFF: 23:13

	2	FILE: John A	<u>2-20 DST 2</u>				
Company Val Energy Ir	าต		_Lease & Well No	lohn A 2-20			
Contractor WW 2			_ Charge to Val				
Elevation3320 KB	Formation	Lan	K Effective Pay		Ft. Ticket	No.	W209
Date 9-19-15 Sec.			ange				KANSAS
Test Approved By Harley Sayl	les		Diamond Representa	tive	Wilbur Stei	nbeck	
Formation Test No.	2 Interval Test	ed from 4	346 ft to	4382 ft To	tal Depth		4382 ft.
Packer Depth	10.11				•		in.
Packer Depth			Packer depth				 in.
Depth of Selective Zone Set					1. 0120		
Top Recorder Depth (Inside)		4332 ft.	Recorder Number	596	65 Cap	5000) P.S.I.
Bottom Recorder Depth (Out	2	40.47	Recorder Number_				^D _P.S.I.
Below Straddle Recorder De		ft.	Recorder Number_				
Mud Type Chem	Viscosity		Drill Collar Length				
0.0	Water Loss		. Weight Pipe Length		AND DESCRIPTION OF A DE		
Chlorides		5000 P.P.M.	Drill Pipe Length	440		3 1/2	
	Serial Number	CALCULATE CONTROLS	Test Tool Length_			ze 3 1/2	
Did Well Flow?Ye			Anchor Length			And a second	
Main Hole Size 7 7/8							
Blow: 1st Open: Built to 6		No Retu			_		
2nd Open: BOB in 5		No Retur	'n				1
	Gassy Free Oil						
	GWMCO 15%G 10%W	/ 35%M 40%O					
	Total Fluid						
Recovered 180 ft. of							
Recovered ft. of			130 Miles	s RT	Price Job		
Recoveredft. of					Other Charg	es	
Remarks:					Insurance		
Tool Sample=GWMCO 1	10%G 10%W 40%M	40%O					
Corrected Gravity=38					Total		
Time Set Packer(s)	17:25 A.M. P.M.	Time Started Off B	ottom 20:40	A.M. P.M. Ma	iximum Tempe	erature	126
Initial Hydrostatic Pressure			(A)	2123 P.S.I.			
Initial Flow Period	Minut	es 30	(B)	10 _{P.S.I.} t	o (C)	44 _F	9.S.I.
Initial Closed In Period	Minut	es45	(D)	1255 P.S.I.			
Final Flow Period	Minut	es60	(E)	44 P.S.I. to	o (F)	65 _P	.S.I.
Final Closed In Period	Minut	es60	(G)	1265 P.S.I.			
Final Hydrostatic Pressure			(H)	2119 _{P.S.I.}			

Diamond Testing shall not be liable for damages of any kind to 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 statement or opinion concerning the result 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.

Val Energy DST 3 Pawnee 4508-4559 Start Test Date: 2015/09/20 Final Test Date: 2015/09/21





Diamond Testing General Report

Wilbur Steinbeck TESTER CELL: 620-282-1573

General Information

Company Name V	/al Energy		
Contact	Harley Sayles	Job Number	W210
Well Name	John A 2-20	Representative	Wilbur Steinbeck
Unique Well ID	DST 3 Pawnee 4508-4559	Well Operator	WW 2
Surface Location	20-8s-35w Thomas/Kans	Report Date	2015/09/20
Field	Wildcat	Prepared By	Wilbur Steinbeck
		Qualified By	Harley Sayles

Test Information

Test Type Formation Well Fluid Type Test Purpose (AEUB)	Conventional Pawnee 01 Oil Initial Test	
Start Test Date	2015/09/20 Start Test Time	17:32:00
Final Test Date	2015/09/21 Final Test Time	01:42:00

Test Recovery

Recovery	3000' Gassy Free Oil
-	180' GMCO 10%G 35%M 55%O
	3180' Total Fluid
	Gas to surface

Tool Sample MCO 15%M 85%O

Corrected Gravity=38.6



DIAMOND TESTING P.O. Box 157 HOISINGTON, KANSAS 67544 (800) 542-7313 DRILL-STEM TEST TICKET

TIME ON: 17:32

TIME OFF: 1:42

		FIL	E: John A	2-20 DST 3	_				
Company Val Energy									
Contractor WW 2				_ Charge to_Va	I				
Elevation3320 KE	Formation		Pawne	e Effective Pay			Ft. Ticket	No.	W210
Date 9-20-15 Sec	20 т	wp		ange			Thomas		KANSAS
Test Approved By Harley Sa				_ Diamond Repre			Vilbur Stei	nbeck	
Formation Test No.	3 Interv	al Tested from	45	508 ft. to	4559	ft Total I	Depth		4559 ft.
Packer Depth		e6_3/4		and the second second					in.
Packer Depth		e 63/4		Packer depth					in.
Depth of Selective Zone Se									
Top Recorder Depth (Insid		4		Recorder Nun	nber	5965 (Сар.	500	0 P.S.I.
Bottom Recorder Depth (O			1509 _{ft.}		nber			=	0 P.S.I.
Below Straddle Recorder D	No. 100-000-00		ft.	×	nber		Сар		
Mud Type Chem		57			ngth				
Weight 9.3	Water Loss	9.6	CC.	Weight Pipe L					
Chlorides		5000	P.P.M.	Drill Pipe Leng	gth	4358 fl	t. I.D	3 1/	'2in
Jars: Make STERLING	Serial Numbe	r7	,	Test Tool Len	gth	33 ft	. Tool Siz	ze3_1/	2-IF in
Did Well Flow?	Yes Reverse	d Out	Yes	Anchor Length	1	51 _f	t. Size	4 1/	<u>2-FH</u> ir
Main Hole Size 7 7/8	Tool Join	nt Size 4 1/2	2in.	Surface Choke	e Size	1in	. Bottom	Choke Siz	ze_ 5/8 _ ir
Blow: 1st Open: BOB in	10 sec			BOB in 1	min				
2nd Open: BOB in	16 sec			BOB in 45	sec				
Recovered 3000 ft. of	Gassy Free Oil								
Recovered 180 ft. of	GMCO 10%G 38	%M 55%O							
Recovered 3180 ft. of	Total Fluid								
Recovered ft. of	Gas To Surfac	Э							
Recoveredft. of				25 N	liles RT	Р	rice Job		
Recoveredft. of						0	ther Charg	es	
Remarks:						In	isurance		
Tool Sample=MCO 159	%M 85%O								
Corrected Gravity=38.6							otal		
Time Set Packer(s)	19:57 A.M		arted Off Bo	ottom 21	:47 A.M. P.M.		num Tempe	erature	143
Initial Hydrostatic Pressure				(A)	2286				
Initial Flow Period		Minutes	15	(B)		P.S.I. to (0	C)	964	P.S.I.
Initial Closed In Period		. Minutes	30	(D)	1233			4007	
Final Flow Period		. Minutes	5	(E)		P.S.I. to (F)	1067 _F	P.S.I.
Final Closed In Period	······	.Minutes	60	(G)	1228				
Final Hydrostatic Pressure.				(H)	2240	P.S.I.			

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Val Energy DST 4 Myric Station/Fort Scott/Cherokee 4552-4666 Start Test Date: 2015/09/21 Final Test Date: 2015/09/21 John A 2-20 Formation: Myric Station/Fort Scott/Cherokee Job Number: W211





Diamond Testing General Report

Wilbur Steinbeck TESTER CELL: 620-282-1573

General Information

Company Name Val Energy Contact Well Name **Unique Well ID Surface Location** Field

Harley Sayles Job Number John A 2-20 Representative Wilbur Steinbeck DST 4 Myric Station/Fort Scott/Cherokee 4552-4666 Well Operator 20-8s-35w Thomas/Kans Report Date 2015/09/21 Wilbur Steinbeck Wildcat Prepared By Qualified By **Harley Sayles**

Test Information

Test Type Formation Well Fluid Type **Test Purpose (AEUB)**

Conventional Myric Station/Fort Scott/Cherokee 01 Oil **Initial Test**

Start Test Date **Final Test Date** 2015/09/21 Start Test Time 14:10:00 2015/09/21 Final Test Time 22:26:00

W211

WW 2

Test Recovery

Recovery 1350' Gassy Free Oil 180' GMCO 10%G 30%M 60%O 1530' Total Fluid Gas to surface

Tool Sample MCO 20%M 80%O

Corrected Gravity=34.2



DIAMOND TESTING P.O. Box 157 HOISINGTON, KANSAS 67544 (800) 542-7313 DRILL-STEM TEST TICKET

TIME ON: 14:10

TIME OFF: 22:26

		FILE: John	n A 2-20 DST 4					
Company Val Energy	•							
Contractor WW 2			Charge to_Val					
Elevation 3320 KE	Formation Myric	Station/Fort Scott/Cher	okee Effective Pay		Ft. Ticket	NoW2	11	
Date 9-21-15 Sec	20 Twp					StateK	ANSAS	
Test Approved By Harley Sa	yles		Diamond Represent	tative	Wilbur Stei	nbeck		
Formation Test No.	4 Interval Te	sted from	4552 ft to	4666 ft Tot:	al Denth	46	566 ft.	
Packer Depth	45.47				•		in.	
Packer Depth							- " in.	
Depth of Selective Zone Se			- dollo: copin					
Top Recorder Depth (Insid		4538 ft.	Recorder Number	Recorder Number 5965 Cap. 5000 P.S.				
Bottom Recorder Depth (Outside) 4555 ft. Below Straddle Recorder Depthft.				Recorder Number 5587 Cap. 5,000 P Recorder Number Cap. P				
Mud Type Chem		66		117				
Weight 9.0	Water Loss	8.8	cc. Weight Pipe Leng					
Chlorides		6200 P.P.M.	Drill Pipe Length	4400		3 1/2		
	Serial Number	_		33				
Did Well Flow?			Anchor Length	114	ft. Size	4 1/2-F	H ir	
Main Hole Size 7 7/8	Tool Joint Siz	e <u>4 1/2</u> ir	n. Surface Choke Si	ze1	in. Bottom	Choke Size_	5/8 in	
Blow: 1st Open: BOB in	26 sec		BOB in 44 se	ec				
2nd Open: BOB in			BOB in 1 min	6 sec			0	
Recovered 1350 ft. of	Gassy Free Oil							
	GMCO 10%G 30%M	60%O		Reve	ersing sub us	ed		
	Total Fluid							
	Gas To Surface							
Recoveredft. of			25 Miles RT		Price Job			
Recoveredft. of					Other Charg	es		
Remarks:					Insurance			
Tool Sample=MCO 209	%M 80%O							
Corrected Gravity=34.2					Total			
Time Set Packer(s)	16:15 A.M. P.M.	Time Started Off	Bottom 18:05	A.M. P.M. Max	kimum Tempe	erature1	42	
Initial Hydrostatic Pressure				2187 P.S.I.				
Initial Flow Period	Min		(B)	188 P.S.I. to	o (C)	470 _{P.S}	.I.	
Initial Closed In Period	Min	1	(D)	1269 P.S.I.		500		
Final Flow Period	Min		(Ľ)	490 P.S.I. to	(F)	562 _{P.S.}	l.	
Final Closed In Period	Min	utes60	0(G)	1279 P.S.I.				
Final Hydrostatic Pressure.			(H)	2173 P.S.I.				

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