



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

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Depth of Selective Zone Set _____

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.
Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF in.
Did Well Flow? _____ Reversed Out _____ Anchor Length _____ ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

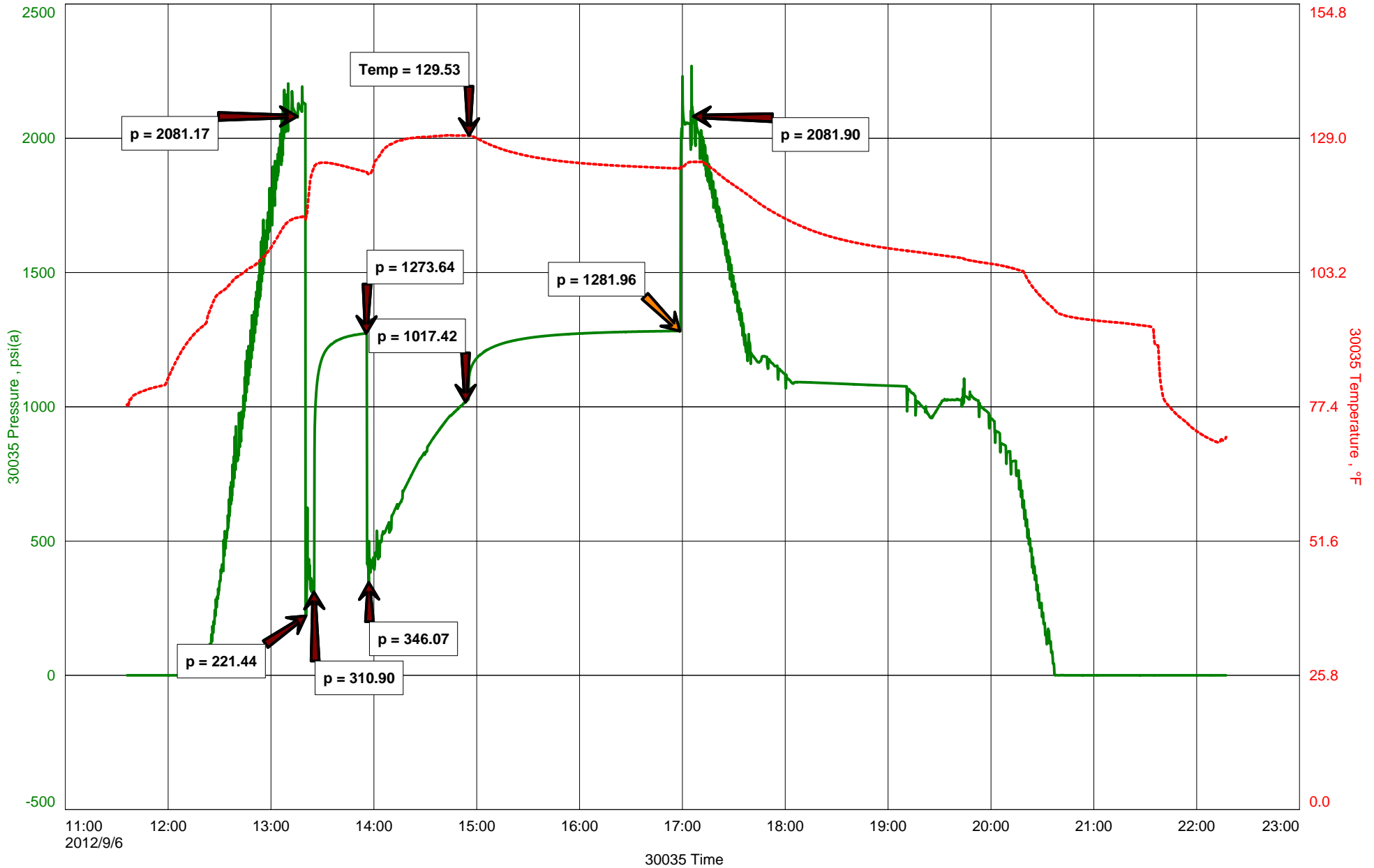
Blow: 1st Open: _____
2nd Open: _____

Recovered _____ ft. of _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____
Initial Hydrostatic Pressure..... (A) _____ P.S.I.
Initial Flow Period..... Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
Initial Closed In Period..... Minutes _____ (D) _____ P.S.I.
Final Flow Period..... Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
Final Closed In Period..... Minutes _____ (G) _____ P.S.I.
Final Hydrostatic Pressure..... (H) _____ 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.

McDonald-Schwieh #1-21



Diamond Testing

General information Report

General Information

Company Name Mull Drilling Co. Inc.

Contact	Mark Shreve	Job Number	S0211
Well Name	McDonald-Schwien #1-21	Representative	Jacob McCallie
Unique Well ID	DST #2 Miss 4240-4325'	Well Operator	Mull Drilling Co. Inc.
Surface Location	SEC 21-15S-23W Trego County	Report Date	2012/09/06
Well License Number		Prepared By	Jacob McCallie
Field	Smokey Hill		
Well Type	Vertical		

Test Type	Drill Stem Test		
Formation	DST #2 Miss 4240-4325'		
Well Fluid Type	06 Water	Start Test Time	11:36:00
		Final Test Time	22:17:00
Start Test Date	2012/09/06		
Final Test Date	2012/09/06		
Gauge Name	30035		
Gauge Serial Number			

Test Results

RECOVERED:

388'	Mud/WTR Cut Oil	94% OIL 4% WTR 2% MUD
1056'	Mud Cut Watery Oil	81% OIL 10% WTR 1% MUD - Circ all to truck
526'	Mud Cut Oily WTR	32% OIL 66% WTR 2% MUD - Circ 3 bbls to truck
245'	Lost down hole	
189'	Oil/Mud Cut WTR	5% OIL 88% WTR 7% MUD- Below circ sub
2404'	TOTAL FLUID	

GRAVITY: 30.5 @ 60 degrees F

PH: 7

RW: .3 @ 70 degrees F

Chlorides: 21,000 ppm

TOOL SAMPLE:

100% OIL