



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Double D's LLC
133 E 12th
Hays, Kansas 67601
ATTN: Al Downing

23-15s-19w
Reichert #2
Job Ticket: 52219 **DST#: 1**
Test Start: 2013.04.13 @ 17:47:02

GENERAL INFORMATION:

Formation: **LKC "A-B-C"**
Deviated: No Whipstock: 0.00 ft (KB)
Time Tool Opened: 20:20:00
Time Test Ended: 23:45:30
Interval: **3267.00 ft (KB) To 3316.00 ft (KB) (TVD)**
Total Depth: 3316.00 ft (KB) (TVD)
Hole Diameter: 7.80 inches Hole Condition: Fair
Test Type: Conventional Bottom Hole (Initial)
Tester: Jason Mclemore
Unit No: 54
Reference Elevations: 1987.00 ft (KB)
1981.00 ft (CF)
KB to GR/CF: 6.00 ft

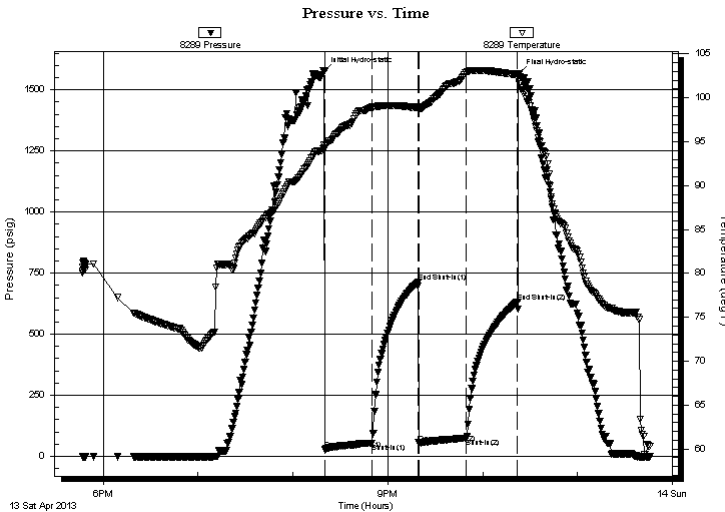
Serial #: 8289

Inside

Press @ Run Depth: 75.49 psig @ 3303.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2013.04.13 End Date: 2013.04.13 Last Calib.: 2013.04.13
Start Time: 17:47:02 End Time: 23:45:30 Time On Btm: 2013.04.13 @ 20:19:45
Time Off Btm: 2013.04.13 @ 22:22:45

TEST COMMENT: IFP- Weak blow . Built 3 inches.
IS- Dead.
FFP- Weak blow . Built 2 inches.
FS- Dead.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1574.64	94.63	Initial Hydro-static
1	29.26	94.25	Open To Flow (1)
31	55.01	98.92	Shut-In(1)
60	712.31	98.88	End Shut-In(1)
60	55.52	98.57	Open To Flow (2)
90	75.49	102.91	Shut-In(2)
123	632.54	102.61	End Shut-In(2)
124	1565.41	102.01	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
90.00	Muddy water. 75% w / 25% m	1.26

Gas Rates

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



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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:

78000 ppm

Viscosity: 49.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.20 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 2800.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
90.00	Muddy water. 75% w / 25% m	1.262

Total Length: 90.00 ft Total Volume: 1.262 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

