

# DIAMOND TESTING

## Pressure Survey Report

### General Information

|                  |                              |                |                              |
|------------------|------------------------------|----------------|------------------------------|
| Company Name     | GRAND MESA OPERATING COMPANY | Job Number     | M413                         |
| Well Name        | GLENNIS #3-27                | Representative | MIKE COCHRAN                 |
| Unique Well ID   | DST#1 4041-4112 LANS. H&I    | Well Operator  | GRAND MESA OPERATING COMPANY |
| Surface Location | SEC.27-13S-31W GOVE CO.KS.   | Report Date    | 2012/10/24                   |
| Field            | WILDCAT                      | Prepared By    | MIKE COCHRAN                 |
| Well Type        | Vertical                     | Qualified By   | BOB SCHREIBER                |
|                  |                              | Test Unit      | NO. 1                        |

### Test Information

|                     |                           |                 |          |
|---------------------|---------------------------|-----------------|----------|
| Test Type           | CONVENTIONAL              |                 |          |
| Formation           | DST#1 4041-4112 LANS. H&I |                 |          |
| Test Purpose (AEUB) | Initial Test              |                 |          |
| Start Test Date     | 2012/10/23                | Start Test Time | 23:25:00 |
| Final Test Date     | 2012/10/24                | Final Test Time | 06:35:00 |
|                     |                           | Well Fluid Type | 01 Oil   |
| Gauge Name          | 30037                     |                 |          |
| Gauge Serial Number |                           |                 |          |

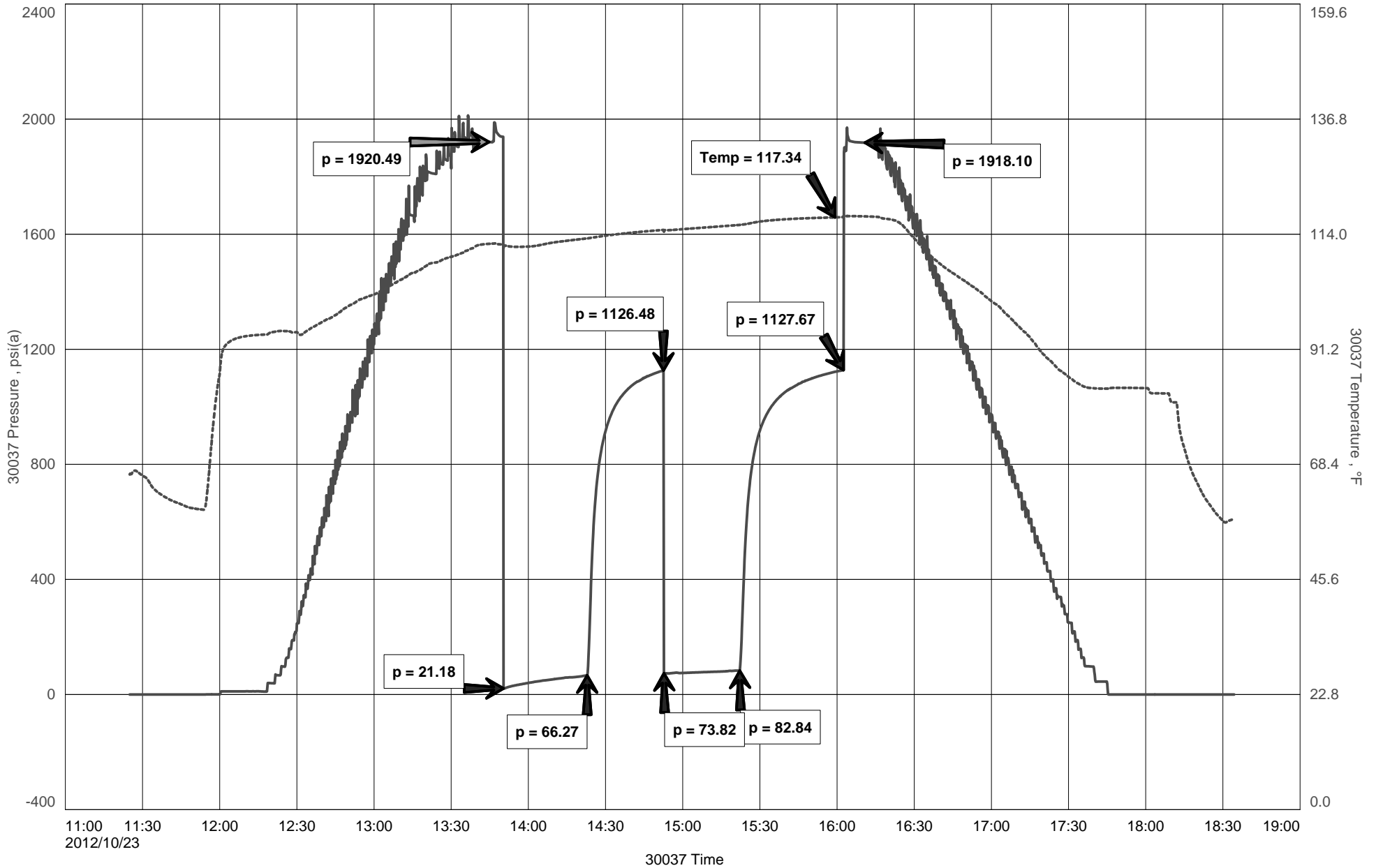
### Test Results

Remarks **RECOVERED:**

150' DM ~100% DRLG MUD W/ SOME OIL SPOTTING & GASSY ODOR & A TR OF WTR (32'DP, 118'DC)  
150' TOTAL FLUID

**TOOL SAMPLE:** 100% MUD W/ SOME SPOTS OF OIL, GAS BUBBLES

# GLENNIS #3-27





**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<br>Other Charges<br>Insurance<br>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.