

## RAILROAD COMMISSION OF TEXAS

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Status: Submitted

Oil and Gas Division

API No. 42- 241-30834

7. RRC District No.

03

8. RRC Gas ID No.

Gas Well Back Pressure Test,  
Completion or Recompletion Report, and Log

1. FIELD NAME (as per RRC Records or Wildcat) <b>WILDCAT</b>		2. LEASE NAME <b>FISTFUL OF DOLLARS UNIT</b>		9. Well No. <b>1H</b>	
3. OPERATOR'S NAME (Exactly as shown on Form P-5, Organization Report) <b>BBX OPERATING, L.L.C.</b>			RRC Operator No. <b>058908</b>		10. County of well site <b>JASPER</b>
4. ADDRESS <b>3698 RANCH ROAD 620 S STE 113 BEE CAVES, TX 78738-0000</b>					
5. Location (Section, Block, and Survey) <b>HANKS, W , A-18</b>			5b. Distance and direction to nearest town in this county. <b>5.24 MILES NE OF TOWN BLUFF</b>		
6. If operator has changed within last 60 days, name former operator					
11. Purpose of filing Initial Potential <input checked="" type="checkbox"/> Retest <input type="checkbox"/> Reclass <input type="checkbox"/> Well record only (Explain in remarks) <input type="checkbox"/>					
12. If workover or reclass, give former field (with reservoir) & Gas ID or oil lease no. <b>FIELD &amp; RESERVOIR</b>				GAS ID or OIL LEASE #	Oil-0 Gas-G
N/A					Well #
13. Pipe Line Connection <b>EAGLE ROCK OPERATING, L.P.</b>					
14. Completion or recompletion date <b>04/24/2013</b>			15. Any condensate on hand at time of workover or recompletion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		16. Type of Electric or other Log Run. <b>Combo of Induction/Neutron/Density</b>

## GAS MEASUREMENT DATA

Date of Test <b>05/04/2013</b>		Gas Measurement Method (Check One) Orifice Meter <input checked="" type="checkbox"/> Flange Taps <input checked="" type="checkbox"/> Pipe Taps <input type="checkbox"/> Positive Choke <input type="checkbox"/> Orifice Vent Meter <input type="checkbox"/> Pitot Tube <input type="checkbox"/> Critical-flow Prover <input type="checkbox"/>				Gas produced during test <b>9720</b> MCF				
Run Size	Line Size	Orif. or Choke Size	24 hr Coeff. Orif. or Choke	Static Pm or Choke Press	Diff h <sub>w</sub>	Flow Temp. ° F	Temp. Factor F <sub>tf</sub>	Gravity Factor F <sub>g</sub>	Compress Factor F <sub>pv</sub>	Volume MCF/DAY
1	5.761	1.750	19370.53	917.0	36.52	123.0	0.9447	0.9104	1.0627	3240.0
2										
3										
4										

## FIELD DATA AND PRESSURE CALCULATIONS

Gravity (Dry Gas) <b>0.724</b>		Gravity Liquid Hydrocarbon <b>47.1</b> Deg. API		Gas-Liquid Hydro Ratio <b>3266</b> CF/Bbl		Gravity of Mixture G <sub>mix</sub> = <b>1.368</b>		Avg. Shut-in Temp. <b>180.0</b> ° F		Bottom Hole Temp. <b>286.0</b> ° F @ <b>13278.0</b> (Depth)	
$D_{eff}^{8/3} =$		$\sqrt{T_f} = \sqrt{\quad} =$		$\sqrt{GL} = \sqrt{\quad} =$							
$C = \frac{1118 \times (D_{eff})^{8/3}}{\sqrt{T}} =$		$=$		$\frac{\sqrt{GL}}{C} =$		$=$					
Run No.	Time of Run Min	Choke Size	Wellhead Press. PSIA P <sub>w</sub>	Wellhead Flow Temp ° F	P <sub>w</sub> <sup>2</sup> (Thousands)	R	R <sup>2</sup> (Thousands)	P <sub>1</sub>	P <sub>w</sub> / P <sub>1</sub>		
Shut-in	1440	SI	7211	74.0							
1	4320	13/64	6974	141.0							
2											
3											
4											
Run No.	F	K	$S = \frac{1}{Z}$	E <sup>ks</sup>	P <sub>f</sub> and P <sub>s</sub>	P <sub>f</sub> <sup>2</sup> and P <sub>s</sub> <sup>2</sup> (Thousands)	P <sub>f</sub> <sup>2</sup> - P <sub>s</sub> <sup>2</sup> (Thousands)	Angle of Slope θ ..... n ..... Absolute Open Flow ..... MCF/DAY			
Shut-in											
1											
2											
3											
4											

WELL TESTERS CERTIFICATION: I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I conducted or supervised this test and that data and facts shown in Sections I and II above are true, correct, and complete, to the best of my knowledge. Bottomhole temperature and the diameter and length of flow string were furnished by the operator of the well.

JON JACKSON

FESCO, LTD

Signature: Well Tester

Name of Company

RRC Representative

OPERATORS CERTIFICATION: I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this report, that I or prepared supervised and directed this report, and that data and facts stated therein are true, correct, and complete, to the best of my knowledge.

Brenda Ramirez

Signature: Operator's representative

Title

11/06/2013

Date

Tel: (512) 917-1482

A/C

Number

SECTION III										DATA ON WELL COMPLETION AND LOG (Not Required on Retest)									
17. Type of Completion New Well <input checked="" type="checkbox"/> Deepening <input type="checkbox"/> Plug Back <input type="checkbox"/> Other <input type="checkbox"/>										18. Permit to Drill, Plug Back or Deepen DATE <b>01/23/2013</b> PERMIT NO. <b>754951</b> Rule 37 Exception CASE NO. _____									
19. Notice of Intention to Drill this well was filed in Name of <b>BBX OPERATING, L.L.C.</b>										Water Injection Permit PERMIT NO. _____									
20. Number of producing wells on this lease in this field (reservoir) including this well <b>1</b>					21. Total number of acres in this lease <b>480.0</b>					Salt Water Disposal Permit PERMIT NO. _____									
22. Date Plug Back, Deepening, Workover or Drilling Operations: Commenced <b>02/18/2013</b> Completed <b>03/23/2013</b>					23. Distance to nearest well, Same Lease & Reservoir <b>0.0</b>					Other PERMIT NO. _____									
24. Location of well, relative to nearest lease boundaries <b>688.0</b> Feet From <b>North</b> Line and <b>1330.0</b> Feet from <b>East</b> Line of the <b>FISTFUL OF DOLLARS UNIT</b> Lease																			
25. Elevation (DF, RKB, RT, GR ETC.) <b>128</b> <b>GL</b>										26. Was directional survey made other than inclination (Form W-12)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
27. Top of Pay <b>13222</b>		28. Total Depth <b>13505</b>		29. P. B. Depth		30. Surface Casing Determined by Field Rules <input type="checkbox"/>		Recommendation of T.D.W.R. <input checked="" type="checkbox"/> Railroad Commission (Special) <input checked="" type="checkbox"/>		Dt. of Letter <b>01/24/2013</b>		Dt. of Letter <b>01/29/2013</b>							
31. Is well multiple completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																			
32. If multiple completion, list all reservoir names (completions in this well) and Oil Lease or Gas ID No. <b>FIELD &amp; RESERVOIR</b>										GAS ID or OIL LEASE #		Oil-0 Gas-G		Well #					
<b>N/A</b>																			
33. Intervals Drilled by:		Rotary Tools <input checked="" type="checkbox"/> Cable Tools		34. Name of Drilling Contractor <b>ENSIGN</b>										35. Is Cementing Affidavit Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
36. CASING RECORD (Report All Strings Set in Well)																			
CASING SIZE	WT #/FT.	DEPTH SET	MULTISTAGE TOOL DEPTH	TYPE & AMOUNT CEMENT (sacks)	HOLE SIZE	TOP OF CEMENT	SLURRY VOL. cu. ft.												
10 3/4	45.5	2500		A 1705	14 3/4	SURFACE	3539.0												
7 5/8	39.0	12580		H 720	9 7/8	10417	1067.0												
4 1/2	15.5	13505		A 135	6 1/2	12260	206.0												
37. LINER RECORD																			
Size		Top		Bottom		Sacks Cement		Screen											
5 1/2		0		12262															
38. TUBING RECORD																			
Size		Depth Set		Packer Set		From 13222		To 13390											
2 3/8		12262		12262		From		To											
						From		To											
						From		To											
40. ACID, SHOT, FRACTURE, CEMENT SQUEEZE. ETC.																			
Depth Interval				Amount and Kind of Material Used															
13222.0		13390.0		FRAC W/4619 BBLS & 194000 LBS PROPPANT															
41. FORMATION RECORD (LIST DEPTHS OF PRINCIPAL GEOLOGICAL MARKERS AND FORMATION TOPS)																			
Formations		Depth		Formations		Depth													
SARATOGA		11438.0																	
AUSTIN CHALK		12579.0																	
WOODBINE		13136.0																	
REMARKS: N/A																			