



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

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

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1049427

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base 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. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



phone: 316-337-6200
fax: 316-337-6211
<http://kcc.ks.gov/>

Thomas E. Wright, Chairman
Ward Loyd, Commissioner

Corporation Commission

Sam Brownback, Governor

March 14, 2011

D. Mark Rouse
Southern Star Central Gas Pipeline, Inc.
4700 HWY 56
P.O. Box 20010
OWENSBORO, KY 42301-9303

Re: ACO1
API 15-159-19222-00-01
Alden Gas Storage # O-5
SW/4 Sec.22-21S-09W
Rice County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
D. Mark Rouse

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



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fax: 316-337-6211
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Corporation Commission

Sam Brownback, Governor

March 15, 2011

D. Mark Rouse
Southern Star Central Gas Pipeline, Inc.
4700 HWY 56
P.O. Box 20010
OWENSBORO, KY 42301-9303

Re: ACO-1
API 15-159-19222-00-01
Alden Gas Storage # O-5
SW/4 Sec.22-21S-09W
Rice County, Kansas

Dear D. Mark Rouse:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 11/1/2010 and the ACO-1 was received on March 14, 2011 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 02796 A

DATE OF JOB: 11-8-2010		DISTRICT: PRATT, KS.		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:	
CUSTOMER: SOUTHERN STAR CENTRAL PIPELINE, INC.		LEASE: ALDEN GAS STORAGE		WELL NO: 0-5	
ADDRESS:		COUNTY: RICE		STATE: KS.	
CITY:		STATE:		SERVICE CREW: ORLANDO, CIRDLEY, LESLEY, WISER	
AUTHORIZED BY:		JOB TYPE: CNW - 4 1/2" 2-STAGE L.S.			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS
19907	13				
27283	13				
27463	13				
19831/19862	13				
				TRUCK CALLED	DATE: 11-7-10 TIME: 12:00
				ARRIVED AT JOB	DATE: 11-8-10 TIME: 1:00
				START OPERATION	DATE: 11-8-10 TIME: 1:00
				FINISH OPERATION	DATE: 11-8-10 TIME: 1:00
				RELEASED	DATE: 11-8-10 TIME: 2:00
				MILES FROM STATION TO WELL	65

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: *Robert Stroh*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 101	A CON BLEND	SK	70		1,260.00
CP 101	A CON BLEND	SK	25		450.00
CP 101	A CON BLEND	SK	205		3,690.00
CP 101	A CON BLEND	SK	30		540.00
CC 102	CELL-FLAKE	lb	83		307.10
CC 105	DE-FOAMER	lb	78		312.00
CC 109	CALCIUM CHLORIDE	lb	624		655.20
CC 112	CEMENT FRICTION REDUCER	lb	234		1,404.00
CC 115	GAS BLOC	lb	234		1,205.10
CF 400	TWO STAGE CMT. COLLAR, 4 1/2"	EA	1		4,500.00
CF 500	STOP RING, 4 1/2"	EA	10		300.00
CF 600	LATCH DOWN PLUG & BAFFLE 4 1/2"	EA	1		720.00
CF 1250	AUTO FILL FLOAT SHOE, 4 1/2"	EA	1		330.00
CF 1750	CENTRALIZER, 4 1/2"	EA	10		700.00
CF 3000	THREAD LOCK KIT	EA	1		34.00

SUB TOTAL

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	% TAX ON \$
MATERIALS	% TAX ON \$

TOTAL

KS

SERVICE REPRESENTATIVE: *K. GORDLEY*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

Robert Stroh

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer SOUTHERN STAR CENTRAL PIPELINE INC	Lease No. 5	Date 11-8-10
Lease OLDEN GAS STORAGE	Well # 0-5	
Field Order #	Station PRATT, KS	Casing 4 1/2
Type Job CINW - LUNG STRONG	Depth 3538	County RICE
	Formation TD-3540'	State KS
		Legal Description 22-21-9

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 4 1/2	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth 3538	Depth	From	To	Pre Pad	Max			5 Min.
Volume	Volume	From	To	Pad	Min			10 Min.
Max Press	Max Press	From	To	Frac	Avg			15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth 3510	Packer Depth	From	To	Flush	Gas Volume			Total Load

Customer Representative MIKE FOWSE	Station Manager SCOTT	Treater CONLEY
Service Units 19407	27203	27463
Driver Names VA	STEVE	VICUON
		LUKAS

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1200					<p>LIU LOCATION 117-10 RUN 122 JIS 4 1/2 C/S = 3537' FRONT SIDE LITCHEL BITTLE 12' COLLAR DV TOOL ON TOP #38 AT 2514' CEUT. - BOTTOM #2, BOTTOM #6, BOTTOM #9, HINDYE #26, HINDYE #43, HINDYE #60, HINDYE #77, HINDYE #97, HINDYE #124, HS OUT - 14, 19, 93, 94, 97 WED 127</p>
1630					<p>THE BOTTOM - DROP BAR - BREAK CIRC. BOTTOM SITE:</p>
730	300	6	5		Pump 6 bbl. SUPERFLUSH II
	300	6	5		Pump 6 bbl. H2O
	300	24	5		Pump 70 SK H-COM (CONV) 29.00 1/4" SACCELLINATE, 75% GAS BUL, 75% OER, 75% DEFINTN AT 13.0 ppg
	200	7	5		Pump 25 SK H-COM (CONV) AT SITE HINDYES AT 14.0 ppg STOP - WATCH LOWE C/L - DV - DV? LITCHEL 200 b

BASIC

energy services, L.P.

TREATMENT REPORT

Customer SOUTHERN STAR CENTRAL PIPELINE, INC.	Lease No. 0-5	Date 11-8-10
Lease HEDEN GAS STORAGE	Well # 0-5	
Field Order #	Station PRATT, KS	Casing 4 1/2
Type Job C/W - LOWCSTIRING	Depth 3538	County RICE
	Formation TD-3540	State KS
		Legal Description 22-21-9

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size 4 1/2	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
Depth 3538	Depth	From	To	Pre Pad	Max		5 Min.
Volume	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth 3510	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative	Station Manager SCOTTY	Treater MURPHY
Service Units 19907	27283	27463
Driver Names KC	STEVE	HERVEY
		19831-19862
		LUCAS

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
	0		0	5	START DESP WITH H ₂ O
	100		20	5	START DESP WITH H ₂ O
	200		35	5	LEFT CEMENT
	700		50	3	SLOW RATE
1800	1500		55.8	3	PLUG DOWN - HELD
	800			1	DROP DU OPEN PLUG
1830					OPEN DU TOOL
					CIRC 6 HRS. WITH REC PUMP
					CIRC 5 HRS CEMENT TO PLS
					TOP STAGE:
			10	4 1/2	PUMP 10 bbl H ₂ O
			71	4 1/2	PUMP 205 SC H-CM CEMENT
					24.00 1/4" H ₂ O CEMENT, .75% GEL, .75% CER, .25% DETON AT 13.0 APPS
					STOP - WITHSLIGHTLY -
					DROP DU CLOSE PLUG
			0	1 1/2	START DESP WITH H ₂ O
1900			40	3	PLUG DOWN - DU (HOLD)
					CIRC 15 HRS CEMENT
					PLUG RAT HOLE - 30 MIN - CONNECTION

JOB COMPLETE - HEVEN Taylor Printing, Inc. 620-672-3658



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Southern Star Central Gas Pipeline
4700 Highway 56
Owensboro, KY 42304-0010
ATTN: Mark Rouse

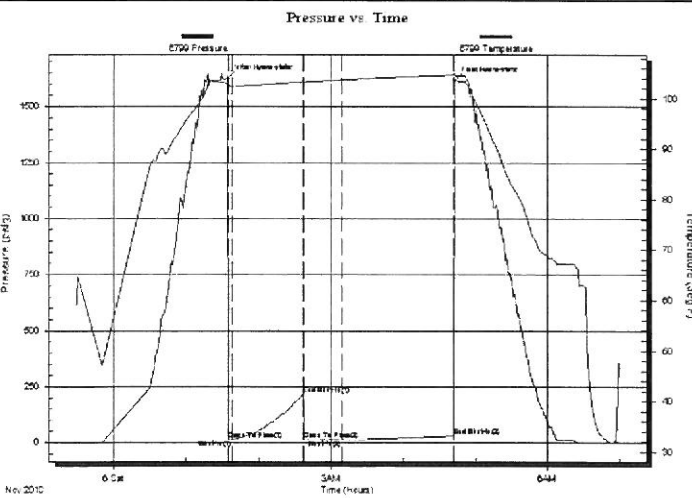
ALDEN GAS STORAGE #0-5
22-21s-9w-RICE-KS
Job Ticket: 39470 **DST#: 1**
Test Start: 2010.11.05 @ 23:28:00

GENERAL INFORMATION:

Formation: **Viola**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 01:34:40
Time Test Ended: 06:59:39
Interval: **3400.00 ft (KB) To 3432.00 ft (KB) (TVD)**
Total Depth: 3432.00 ft (KB) (TVD)
Hole Diameter: 6.25 inches Hole Condition: Good
Reference Elevations: 1685.00 ft (KB)
1672.00 ft (CF)
KB to GR/CF: 13.00 ft

Serial #: 6799 Inside
Press@RunDepth: 13.93 psig @ 3401.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2010.11.05 End Date: 2010.11.06 Last Calib.: 2010.11.06
Start Time: 23:28:05 End Time: 06:59:39 Time On Btm: 2010.11.06 @ 01:34:00
Time Off Btm: 2010.11.06 @ 04:42:30

TEST COMMENT: IF: Weak surface blow.
IS: No blow back.
FF: No blow.
FSI: No blow back.



PRESSURE SUMMARY

Time (Mn.)	Pressure (psig)	Temp (deg F)	Annotation
0	1624.46	103.04	Initial Hydro-static
1	14.28	102.33	Open To Flow (1)
5	14.55	102.41	Shut-In(1)
63	216.56	103.27	End Shut-In(1)
64	14.43	103.24	Open To Flow (2)
95	13.93	103.66	Shut-In(2)
188	29.93	104.64	End Shut-In(2)
189	1616.92	105.09	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
1.00	DRILLING MUD 100%m	0.00

Gas Rates

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



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Southern Star Central Gas Pipeline

ALDEN GAS STORAGE #0-5

4700 Highway 56
Owensboro, KY 42304-0010

22-21s-9w-RICE-KS

Job Ticket: 39470

DST#: 1

ATTN: Mark Rouse

Test Start: 2010.11.05 @ 23:28:00

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:	ppm
Viscosity: 44.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.99 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 1000.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
1.00	DRILLING MUD 100%m	0.004

Total Length: 1.00 ft Total Volume: 0.004 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments:

Pressure vs. Time

