

### Kansas Corporation Commission Oil & Gas Conservation Division

### 1048872

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

# WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
☐ New Well ☐ Re-Entry ☐ Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd.  CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	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: sx cmt
If Workover/Re-entry: Old Well Info as follows:	
Operator: Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:   Deepening Re-perf. Conv. to ENHR Conv. to SWD  Conv. to GSW	Chloride content: ppm Fluid volume: bbls  Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec TwpS. R
☐ ENHR         Permit #:           ☐ GSW         Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date	

#### **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:						

Side Two

1048872

Operator Name:			Lease Name: _			_ Well #:	
Sec Twp	S. R	East West	County:				
time tool open and clo	sed, flowing and shut es if gas to surface tes	d base of formations per -in pressures, whether s st, along with final chart( well site report.	shut-in pressure rea	ached static level,	hydrostatic press	sures, bottom he	ole temperature, fluid
Drill Stem Tests Taken (Attach Additional S		Yes No		₋og Formatio	n (Top), Depth an	d Datum	Sample
Samples Sent to Geol	·	☐ Yes ☐ No	Nan	ne		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	d Electronically	Yes No Yes No Yes No					
List All E. Logs Run:							
		CASING Report all strings set-		lew Used termediate, producti	on, 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
	1	ADDITIONAL	_ _ CEMENTING / SQ	UEEZE RECORD	I		
Purpose:  Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used		Type and F	Percent Additives	
Shots Per Foot		ON RECORD - Bridge Pluç ootage of Each Interval Per			cture, Shot, Cement mount and Kind of Ma	•	Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or EN	HR. Producing Met	hod:		other (Explain)		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf Wa	ter Bl	pls. (	Gas-Oil Ratio	Gravity
DISPOSITIO	Used on Lease	Open Hole		ly Comp. Con	nmingled mit ACO-4)	PRODUCTIO	N INTERVAL:

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	HERRICK A 1
Doc ID	1048872

# All Electric Logs Run

CEMENT BOND LOG
MICROLOG
SPECTRAL DENSITY DUAL SPACED NEUTRON LOG
ARRAY COMPENSATED RESISTIVITY LOG
BOREHOLE SONIC ARRAY LOG

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	HERRICK A 1
Doc ID	1048872

# Tops

Name	Тор	Datum
HEEBNER	3794	-533
LANSING	3876	-615
SWOPE	4305	-1044
MARMATON	4468	-1207
CHEROKEE	4666	-1405
ATOKA	4964	-1703
MORROW	5149	-1888
CHESTER	5540	-2279
ST. GENEVIEVE	5587	-2326
ST. LOUIS	5634	-2373

# BASIC\* ENERGY SERVICES PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd. P.O. Box 129 Liberal, Kansas 67905 Phone 620-624-2277

# 1717 01040 A

e 620-624-2277

PRESSURE PUMPING & WIRELINE						DATE	TICKET NO.	·			
DATE OF 9-1/-10 DISTRICT /7/7				NEW X	OLD □ F	ROD []NJ	□WDW	□S	JSTOMER RDER NO.:		
CUSTOMER 6	Dxy b	15A	•		LEASE /	erric	ck 'A	11		WELL NO.	/
ADDRESS			•	:	COUNTY STANTON STATE KS						
CITY		STATE						ribson S	Cha	vcz, V199	Me Z
AUTHORIZED BY				JOB TYPE:	Z41	95/8	Serla	جرير	<del></del>		
EQUIPMENT	# HRS	EQUIPMENT#	HRS	EQI	JIPMENT#	HRS	TRUCK CALL	_	9-17		ΛE
21755	8	33021	8				ARRIVED AT		<u>7-//</u>	1/ 030 44	00
27208	8	33016	8		-				7-1		30
19553							START OPER	RATION	9-11	1 2 19:	30
14354	9						FINISH OPER	RATION	9311	<i></i>	0
19578	1						RELEASED		9-11	AN 22:	70
7 7 7 7 7							MILES FROM	STATION T	O WELL	70	
become a part of th		at the written consent of an o				· ·   · · · · · ·	· 			RACTOR OR AG	
REF. NO.		MATERIAL, EQUIPMENT	AND SERVIC	CES US	FD	UNIT	QUANTITY	UNIT PR	ICE	\$ AMOUN	11
C'2 101	'A-con	Blend				5K	480			8928	$\alpha$
CL110	Premium Plus					5K	200			3260	60
CC109	Calcium Chloride					16	1732			1818	60
CC102	Cellofl	éke	<del> </del>			16	291			1076	70
CC130	C-51					16	51		_	2275	<u>8</u>
CF1453	Inser					eđ	/			280	20
CF 253	bruide s					eð	/			<u>380</u>	<u>80</u>
CF1773	Centre	tlizer				43	5	<del></del>		_725	<u></u>
CF 1903	BISKE	+				12				3/5	20
CF 105	TOP P	lug				13	./			225	
EIUL	Heavy		1/2190			MI	195			1	
CE240	Blendin	2 - MIKING S	ervice	<u>Chr</u>	<i>,</i>	5K	680			952	ည
E/13	Bulk	Delivery'				TM	2090			3328	<u>ps</u>
CE 202	Depth	Chrg 1001	-2000	7 <b>'</b>		4hr	7			1500	
62504	Plug C	ontrinen				job	1			250	
E 100	Pick-u	p Mileage	•			mi	65-				25/
5003	Pick-up Mileage Service Supervisor					८३				175	ထ
CHE	EMICAL / ACID D	ATA:	Ī					SUB	TOTAL	1655h	48
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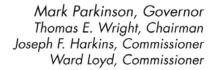
SERVICE REPRESENTATIVE Ticky Coch	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:	M. Ur
	(WELL OWNER OPER/	ATOR CONTRACTOR OR AGENT)



# TREATMENT REPORT

	87 5	77700	U .J, !				4.	· .						
Customer	24 115	A		L	ease No	-			i	Date	_			
Lease #	Frick	'A"		W	/eli #	/		₹			9	- //·	-10	
Field Order	# Station	Liber	11				Casing	Depti	1727	Coun	tu .	···		State K5
Type Job	742	85/8	•	UV)	10	ے		Formation			•	Legal D	escription	-30-40
PIP	PE DATA	PERI	FORAT	ΓING	NG DATA FLUID USED						TREA		RESUME	
Casing Size	Tubing Si	ze Shots/F	t 4/8	10:	-/-	A.	id COH	- 3%	10-	PARE	PRE	Flak	ISIP 1	Z WCA-1
Depth	Depth	From	2.	161	43/5	Pre	Pad/4/	-1/1-K	Mayo /	2/7	1	1	5 Min.	<u> </u>
Volume	Volume	From	20	7	KP	Pa	duille	Plus	Min	CC	1/	y#Ce	10 Mis	the
Max Press	Max Pres	s From	1.	41	47/5	- P		321/51	Avg	14.	8	91/	15 Min.	
Well Connect	ion Annulus \	/ol. From		To				7-7-	HHP Used	i	Ţ <i>'</i>	'	Annulus I	Pressure
Plug Depth	Packer De	epth From		То		Flu	sh		Gas Volun	ne			Total Loa	d
Customer Re	presentative				Statio	n Man	ager		•	Tre	ater		·· <del>-</del>	•••
Service Units	21755	27908	1950	55	1435	-4	19578	33021	33016	:				
Driver Names	Cochron	T. Gibs	on		5.6	ho	vez	1 1	GUEZ					
Time	Casing Pressure	Tubing Pressure	Bbls	. Pum	ped		Rate		<i></i>		Servi	ce Log		
14:30								onto	c.//	401	45,	1.fet	u Ma	ecting
17:10								51817	r C19	,		,		/
19:30								Csq.	en l	otto	rpa .	Cir.	W RI	. 9
19:50	1500							Test	Pump		Linc			<del>/</del>
19:58	400		20	26		3	7	Start	Lead	1 _	mt	480	sk @	12.1#
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21:16	1200		10	27	<u> </u>		<u>2</u> 9	Bamp	o Plu	9				
<u> 20:17</u>	0		10	<u> </u>		7	<del>2</del>	Rele	s Plu	P	ost	He	<u>/{</u>	
<u> 21:30</u>		· · · · · · · · · · · · · · · · · · ·						End	Job					
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1700 S. Country Estates • P.O. Box 129 • Liberal, KS 67905 • (620) 624-2277 • Fax (620) 624-2280





January 04, 2011

LAURA BETH HICKERT OXY USA Inc. 5 E GREENWAY PLZ PO BOX 27570 HOUSTON, TX 77227-7570

Re: ACO1

API 15-187-21186-00-00 HERRICK A 1 SW/4 Sec.25-30S-40W Stanton 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, LAURA BETH HICKERT



1700 S. Country Estates Rd. P.O. Box 129

### FIELD SERVICE TICKET 1717 0104**3** A

Liberal, Kansas 67905 Phone 620-624-2277 PRESSURE PUMPING & WIRELINE DATE TICKET NO. DATE OF JOB CUSTOMER ORDER NO.: OLD □ PROD □ INJ □ WDW DISTRICT /7/17 CUSTOMER WELL NO. LEASE . **ADDRESS** COUNTY STATE SERVICE CREW CITY STATE **AUTHORIZED BY** Ennett JOB TYPE: **EQUIPMENT# EQUIPMENT#** HRS HRS **EQUIPMENT#** HRS TRUCK CALLED ARRIVED AT JOB START OPERATION **FINISH OPERATION** RELEASED MILES FROM STATION TO WELL 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:

ITEM/PRICE REF. NO. MATERIAL, EQUIPMENT AND SERVICES USED UN  CLIOI 'A-con' Blend  CLIOO Premium Plus	T	QUANTITY	UNIT PRICE	Т		
CL101 'A-con' Blend 51	4		UNIT FRICE	- 1	\$ AMOUN	iT
CLIO Premius Plus	_	430			7998	درا
	k	200			3260	00
CC109 Colcium Chloride 11	6	1591			1670	55
CC102 Celloflake 18	5	265			980	50
CC130 C-51	6	81			2015	حم
CF 1453 Insert	7				2800	<u>در</u>
CF 253 Guide Shoe	7				380	حو
CF 1773 Centralizer	d	5			725	حلم
CF 1903 Basket e	7				315	(D)
CF105 Top Plug	7				225	<u>(20</u>
E101 HEZVY Equip Miletge M	11	150			/050	<u>ආ</u>
CE 240 Olanding + Mixing Servi Chrg, 51	K	630			882	<u> </u>
E113 Bulk Delivery TI	19	1483			2372	<u>.</u> ඉප
CE202 Depth Chrg. 1001-2000' 4k	14			_	1500	(22)
CESOY Flug Container jo	6				<u>250</u>	8
£100 Pick-up Miktge M	/	50		_	212	50
5003 Service Supervisor e	7				175	حط
<u>'</u>	$\dashv$			$\dashv$		┼
CHEMICAL / ACID DATA:		<u> </u>	SUB TOT.	AL	14869	56
SERVICE & EQUIPMENT	T	%TAX	ON \$	ľ		
MATERIALS		%TAX		$\neg$		$\top$
			тот	AL		$\dagger \dagger$

		D OPERATOR CONTRACT	TOP OR AGENT)	_
SERVICE REPRESENTATIVE	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED B	Y: ANR	Hensen	
	1			
		7	TOTAL	Г
	MATERIALS	%TAX ON \$		
	SERVICE & EQUIPMENT	761AX UN \$		$\vdash$



# TREATMENT REPORT

Customer	2	151		ease No.	<del></del>			Date			<u>- , </u>				
Lease 1	E:ur	"J"	- v	/ell#	7			9	-17-	10					
Field Order	# Station	Lihr	111		Casing	5/6 Dept	1912	County F	unev		State /				
Type Job	242	85%	Sur	fac	2	Formation	1		Legal Des	scription 7	26 33				
PIP	E DATA	PERI	FORATING		FLUID	USED		TREA	ATMENT F	ESUME					
Casing Size	Tubing Si	ze Shots/F	1430-	4 2	Acid n' B	land.	770	PATE PI	82 11 1X	ISIP -	27 WCA				
Depth	Depth	From	29/10	11/	Pre Pay	2//-/	May	11.4	57/	5 Min.	Z / POCA				
Volume	Volume	From	2000	KA	Pad millim	Plus	M27	CC 1/4	#Cel	MYYIK	le				
Max Press	Max Pres	s From	1.345	13/5-R	Frac 6. 33	91/5	₩g €	3/48	#/95	15 Min.					
	ion Annulus \	From	То		-		HHP Used	d		Annulus P	ressure				
Plug Depth	Packer De	epth From	То		Flush		Gas Volur	ne		Total Load					
Customer Re	presentative	1. Hans	on	Station	Manager J	Benn	cH	Treater	<u>M. C.</u>	ochr	dn				
Service Units	21755	27808	1955	19729	1 19883	14354	19578	7							
Names	Cached n Casing	7. Gil	son	V. 13	19UCZ	R.C.	IVEZ	:		<u> </u>					
Time	Pressure	Pressure	Bbls. Pum	ped	Rate	Service Log									
18:30				-		on L	oc/	Held	Safe	741	Meeting				
18:10	<u> </u> 					2,781	y Cs	<u> </u>							
1943	2/100					450	onk	1011011	Circ	42/10	<del>'9</del>				
21:15	2600		000	,	7-5	1 <u>es</u> 1	1 4 m		Line.	5 (120-)	601111				
22:14	300		40		5-5.5	Stan	1 TI	:1 P	my 1	10051	£ 14.9				
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22:54	1100		119		2	Bur	up 1	1/49		ē					
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											118)				
1700	S. Count	try Estat	es • P.O.	Box 12	29 • Libera	I, KS 679	05 • (62	0) 624-22	277 • Fax	(620)	524-2280				



## **FIELD SERVICE TICKET** 1717 01065 A

				1e 620-6	24-2277							
	PRESSUR	KE PUMI	IPING & WIRELINE			_		DATE	TICKET NO			
DATE OF 9—	18-1	0 1	DISTRICT Libera	NEW C	OLD □ F	PROD □INJ	□WDW□	CUSTORD	TOMER ER NO.:			
CUSTOMER (	3 X	У 1	USA	LEASE H	rri	ck "/	11) T	V	VELL NO	. 1		
ADDRESS				COUNTY S	tan	ton	STATE	ک\				
CITY			STATE	SERVICE CF	REW A	ringto	n/5 teg m	<i>an</i>				
AUTHORIZED B	3Y J	err	ry Bennet	ナニ	JOB TYPE:	Z 4	4 P	TA	-			
EQUIPMENT	Г#	HRS	EQUIPMENT#	UIPMENT#	HRS	TRUCK CALI	LED 9-18-18	PATE	<b>APP</b> 7	IME 1,00		
30464 7								ARRIVED AT	JOB 9-18-10			4:50
19919		7							RATION 9-18-			7,20
19828		7					-		RATION 9-18-		<u>鐵17</u> 微21:	<u>.39</u> 25
19883							<del> </del>	RELEASED	9-18-1		AM 21	
	+					•		MILES FROM	A STATION TO W	-	65	17
	nis contrac	t withou	at the written consent of an office	cer of Basi	c Energy S	ervices LP.	s	GIGNED: (WELL OWN)	ER, OPERATOR, CO	ONTRAC	CTOR OR	AGENT)
ITEM/PRICE REF. NO.		N	MATERIAL, EQUIPMENT A	AND SER	SED	UNIT	QUANTITY	UNIT PRICE		\$ AMOL		
CL103	601	40	Poz			5K	185		Ê	1220	<u> </u>	
CC 200	Cen	101	1 6el			16	320			80	<u></u>	
E 101	Hea	vy E	Equipment 1		Mi	130			910	<u>60</u>		
CE 240	13/e	<u>hdi</u>	ng & Mixing		<u> </u>	185			259	<u>100</u>		
<u>  = ] 3</u>	PROP	pai	1+ PBUTK 1		+m	520			832			
CEZOZ	Vep	<u>th</u>	Charge 1001-	2000	2 1/		Thrs	. /			<u>150</u>	
F 100	Pic	K U	p Mileage				Mi	65		<u> </u>	276	25
5003	Ser	بادء	: Supervisor				EA	/			175	<u>- 60</u>
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Comme Contract
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FIELD SERVICE ORDER NO.

TOTAL



# TREATMENT REPORT

0	87 5		•••	U 15, E														
Customer	4		L	ease No.			,		Date									
Lease Herrick "A"						/ell#					9-18-10							
Field Order # Station Liberal								Casing	A Depth	1750	County	Sta	ntan Legal De		State	Kc		
Type Job	TA	1					Formation	1			Legal De	scription	40					
PIPE DATA PERFORATIN						DATA		FLUID (	JSED		TF	REA	TMENT F	RESUME				
Casing Size Tubing Size Shots/Ft					Ac	id	-	F	SS	ISIP								
Depth	Depth	Depth From To			То	To Pre Pad				Max				5 Min.				
Volume			То		Pad			Min				10 Min.						
Max Press				То		Fra	ac	Avg				15 Min.						
Well Connection	on Annulus \	/ol. Fr			То	ō				HHP Used			Annulus Pressure					
Plug Depth	Packer D	epth Fr	от		То		Flu	ısh		Gas Volume				Total Load				
Customer Rep	oresentative (	Cal b	$W_{V}$	lie		Station	Mar	nager Je	erry Be	mett	Treate	" J	- asan -	Accie	15 to	2		
Service Units	30464	1991	19	1982	28	1988	73	19820										
Driver Names	M.Ste	smal	<u>,  </u>	<u>R. C</u>	ha	vez		J.A.	Ington									
Time	Casing <a href="#">Pressure</a>	Tubir Press	ng	Bbls.	Pum	ped		Rate				Servi	ce Log					
14:50									OnL	OC.								
14:55									Safet	y Me	etr.	5						
16:45									Righ	up								
17:20								Safet	<u>s</u>			_						
17:34	<u> </u>	100	2		0			3	Pung	ump H20 Ahead								
17:38		100	<b>&gt;</b>		20		4		Pump 75 sk 60/40 Poz @ 13.5									
17:43		100			<u>.5</u>			4	Pump H20 Behind									
17:45		100		/_	<u>6</u>			1.	Disp w/ Mud w/Rig									
19:20				0			4	Pump H'a Ahead										
	9:30 100 10			_	_		4	Pump 40 ek 60/40 Poz @ 13.5# Disp.										
19:33		0		<u> </u>				4	Disp.							1- <b>4</b> 2		
21:01		0		5			_	<u> </u>	Pump	<u>20sk</u>	- 60	3/0	10 Pa	201	3.5	17		
21:12		0			<u> </u>	_		2	Disp. Pump Plug Rig	KH,	$\mathcal{M}$	H						
21:25						_		<u> </u>	Kig	dows	ı							
4,45			$\dashv$						Leave	e Loc.								
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