



**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

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: \_\_\_\_\_



1051368

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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PAGE	CUST NO	INVOICE DATE
1 of 1	1004409	01/19/2011
INVOICE NUMBER		
1718 - 90504274		

Pratt (620) 672-1201  
 B VAL ENERGY  
 I 200 W DOUGLAS AVE STE 520  
 L WICHITA  
 L KS US 67202  
 T  
 O ATTN:

J LEASE NAME Circle 3-32  
 O LOCATION  
 B COUNTY Barber  
 S STATE KS 65/8  
 I JOB DESCRIPTION Cement-New Well Casing/Pi 3-32  
 T JOB CONTACT  
 E

**RECEIVED**  
 JAN 20 2011

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40275267	19842	<u>9208</u>	Net - 30 days	02/18/2011

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 01/17/2011 to 01/17/2011</i>				
0040275267				
171803174A Cement-New Well Casing/Pi 01/17/2011				
8 5/8" Surface				
60/40 POZ	190.00	EA	8.40	1,596.00 T
Cello-flake	48.00	EA	2.59	124.32 T
Calcium Chloride	492.00	EA	0.74	361.62 T
Wooden Cement Plug 8 5/8"	1.00	EA	112.00	112.00
Unit Mileage Charge-Pickups, Vans & Cars	45.00	HR	2.98	133.88
Heavy Equipment Mileage	90.00	MI	4.90	441.00
Proppant and Bulk Delivery Charges	369.00	MI	1.12	413.28
Depth Charge; 0-500'	1.00	HR	700.00	700.00
Blending & Mixing Service Charge	190.00	MI	0.98	186.20
Plug Container Utilization Charge	1.00	EA	175.00	175.00
Supervisor	1.00	HR	122.50	122.50

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	4,365.80
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	151.98
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	4,517.78
DALLAS, TX 75284-1903	MIDLAND, TX 79702		





**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET  
1718 03174 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB 1-17-11		DISTRICT KANSAS		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 Val Energy, Inc		LEASE Circle		WELL NO. 3-32					
ADDRESS		COUNTY Barber 32-33-10		STATE KANSAS					
CITY		STATE		SERVICE CREW A. worth, J. Anthony, L. Wiser					
AUTHORIZED BY				JOB TYPE: C/W 898 Surface					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
28443 PU	1						1-17-11	AM	600
19889-19842	L					ARRIVED AT JOB	1-17-11	AM	815
19832-19862	1					START OPERATION	1-17-11	AM	1130
						FINISH OPERATION	1-18-11	AM	1230
						RELEASED	1-18-11	AM	100
						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: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP103	60/40 P <sub>2</sub>	SK	190		\$ 2280.00
CC102	Cell FLAK	lb	48		\$ 177.60
CC109	Calcium Chloride	lb	492		\$ 516.60
CF153	wooden cement Plug.	EA	1		\$ 160.00
E100	Unit mileage chg.	mi	45		\$ 191.25
F101	Heavy Equip mileage	mi	90		\$ 630.00
E113	Bulk Delivery chg.	7m	369		\$ 580.40
CE200	Depth Charge 0-500	4-hrs	1		\$ 1000.00
CE240	Blending + mixing service chg.	SK	190		\$ 266.00
CE504	Plug container ut. Lization chg.	Job	1		\$ 250.00
S003	Service Supervisor first 8hrs on loc.	EA	1		\$ 125.00
					SUB TOTAL

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		DLS \$ 4,365.80

SERVICE REPRESENTATIVE: <i>Alfred</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>Randy Smith</i>
FIELD SERVICE ORDER NO.	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)





**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 03174 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB: 1-17-11		DISTRICT: Kansas		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: Val Energy, Inc.				LEASE: Circle				WELL NO.: 3-32		
ADDRESS:				COUNTY: Barber 32-33-10		STATE: Kansas 3-3-				
CITY:				STATE:		SERVICE CREW: A. Worthy, J. Anthony, L. Windsor				
AUTHORIZED BY:				JOB TYPE: C.L.B. 575 System						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
284613-84	1						1-17-11			6:00
19887-19892	1						1-17-11			8:15
19832-19812	1						1-17-11			11:30
							1-18-11			12:00
							1-18-11			1:00
						MILES FROM STATION TO WELL				

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

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SIGNED: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP102	60/45 Por	SK	170		\$ 2280.00
CC102	Cell Flak	lb	48		\$ 177.60
CC109	Calcium Chloride	lb	47		\$ 516.60
CF153	wooden cement Plug	EA	1		\$ 160.00
E100	unit mileage chg	mi	45		\$ 191.25
E101	Heavy Equip mileage	mi	90		\$ 630.00
E115	Boik Delivery chg	Time	3.69		\$ 580.40
CE200	Depth Charge 0-500	4-lbs	1		\$ 1000.00
CE240	Blending & mixing Service chg	SK	170		\$ 266.00
CE304	Plug container ut. 4.21 tons chg.	Job	1		\$ 250.00
S003	Service Spools 3/8" x 8 1/2" x 1000'	EA	1		\$ 175.00

SUB TOTAL

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		DLS \$ 4,365.80

SERVICE REPRESENTATIVE: [Signature]	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.









PAGE	CUST NO	INVOICE DATE
1 of 1	1004409	01/25/2011
<b>INVOICE NUMBER</b>		
<b>1718 - 90508727</b>		

Pratt (620) 672-1201

B VAL ENERGY  
 I 200 W DOUGLAS AVE STE 520  
 L WICHITA  
 L KS US 67202  
 T  
 O **ATTN:**

J LEASE NAME Circle 3-32  
 O LOCATION  
 B COUNTY Barber  
 S STATE KS 5/2  
 I JOB DESCRIPTION Cement-New Well Casing/Pi 3-32  
 T  
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40277430	19842	<i>9308</i>	Net - 30 days	02/24/2011

**For Service Dates: 01/23/2011 to 01/23/2011**

0040277430

171803554A Cement-New Well Casing/Pi 01/23/2011  
 5 1/2" Longstring

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
AA2 Cement	100.00	EA	11.90	1,190.05 T
60/40 POZ	50.00	EA	8.40	420.02 T
De-foamer (Powder)	24.00	EA	2.80	67.20 T
Salt (Fine)	455.00	EA	0.35	159.26 T
Gas-Blok	94.00	EA	3.61	338.88 T
FLA-322	76.00	EA	5.25	399.02 T
Gilsonite	500.00	EA	0.47	234.51 T
Super Flush II	500.00	EA	1.07	535.52 T
Top Rubber Cement Plug 5 1/2"	1.00	EA	73.50	73.50
Guide Shoe-Regular 5 1/2" (Blue)	1.00	EA	175.01	175.01
Flapper Type Insert Float Valves 5 1/2"	1.00	EA	150.51	150.51
Turbolizer 5 1/2" (Blue)	5.00	EA	77.00	385.01
5 1/2" Basket (Blue)	1.00	EA	203.01	203.01
Unit Mileage Charge-Pickups, Vans & Cars	45.00	HR	2.98	133.88
Heavy Equipment Mileage	90.00	MI	4.90	441.02
Proppant and Bulk Delivery Charges	308.00	MI	1.12	344.97
Depth Charge; 4001-5000'	1.00	HR	1,764.05	1,764.05
Blending & Mixing Service Charge	150.00	MI	0.98	147.01
Plug Container Utilization Charge	1.00	EA	175.01	175.01
Supervisor	1.00	HR	122.50	122.50

<b>PLEASE REMIT TO:</b>	<b>SEND OTHER CORRESPONDENCE TO:</b>	<b>SUB TOTAL</b>	<b>7,459.94</b>
<b>BASIC ENERGY SERVICES, LP</b>	<b>BASIC ENERGY SERVICES, LP</b>	<b>TAX</b>	<b>244.15</b>
<b>PO BOX 841903</b>	<b>PO BOX 10460</b>	<b>INVOICE TOTAL</b>	<b>7,704.09</b>
<b>DALLAS, TX 75284-1903</b>	<b>MIDLAND, TX 79702</b>		





**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET  
1718 03554 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB 01-23-11	DISTRICT PRA TT 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 UAL-ENERGY	LEASE Circle	3-32		WELL NO.					
ADDRESS	COUNTY BARBER	STATE KS							
CITY	STATE	SERVICE CREW Sullivan, Nelson, Phye							
AUTHORIZED BY	JOB TYPE: enw 5 1/2 longstrip								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
3378-19842	45 hr					01-23-11		PM	0200
19960-19918	45 hr							AM	0600
19867								AM	1110
								AM	1150
						RELEASED	01-23-11	AM	1245
						MILES FROM STATION TO WELL	45		

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: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA-2 cmt	SK	100		1,700.00
CP 103	60/40 p02 cmt	SK	50		600.00
CC 105	Defogger	lb	24		96.00
CC 111	SALT	lb	455		227.50
CC 115	GAS-Blok	lb	94		484.10
CC 129	FLA-222	lb	76		570.00
CC 201	gelsolite	lb	500		325.00
CF 103	TOP Rubber Plug 5 1/2	SA	1		105.00
CF 251	guide shoe	SA	1		250.00
CF 1451	Flapper float	SA	1		215.00
CF 1651	Turbolizer	SA	5		550.00
CF 1901	BASKET	SA	1		290.00
CC 155	Super Flush II	GAL	500		765.00
P 100	pickup milys	mi	45		191.25
P 101	Heavy cont milys	mi	90		630.00
P 113	Bulk/Delay	TM	308		493.20
PE 205	Depth charges 4001-5000	SA	1		2,520.00
PE 240	Blender - mix ip	SK	150		210.00
PE 504	Plus Customized Planted	SA	1		2500.00
5003	Selud-supramine	SA	1		175.00
SUB TOTAL					7,459.94

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		7,459.94

DLS

SERVICE REPRESENTATIVE Robert Johnson	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: _____
--	--

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. \_\_\_\_\_



# BASIC

energy services, L.P.

## TREATMENT REPORT

Customer <i>VAL-ENERGY</i>	Lease No.	Date <i>01-03-11</i>
Lease <i>CIRCLE</i>	Well # <i>3-32</i>	
Field Order # <i>3534</i>	Station <i>Pratt KS</i>	Casing <i>50 3/4</i>
Type Job <i>CNW 5 1/2 longstrip</i>	Depth <i>4752</i>	County <i>BARBER</i>
	Formation <i>2 1/2" 116</i>	State <i>KS</i>
		Legal Description <i>32-33-10</i>

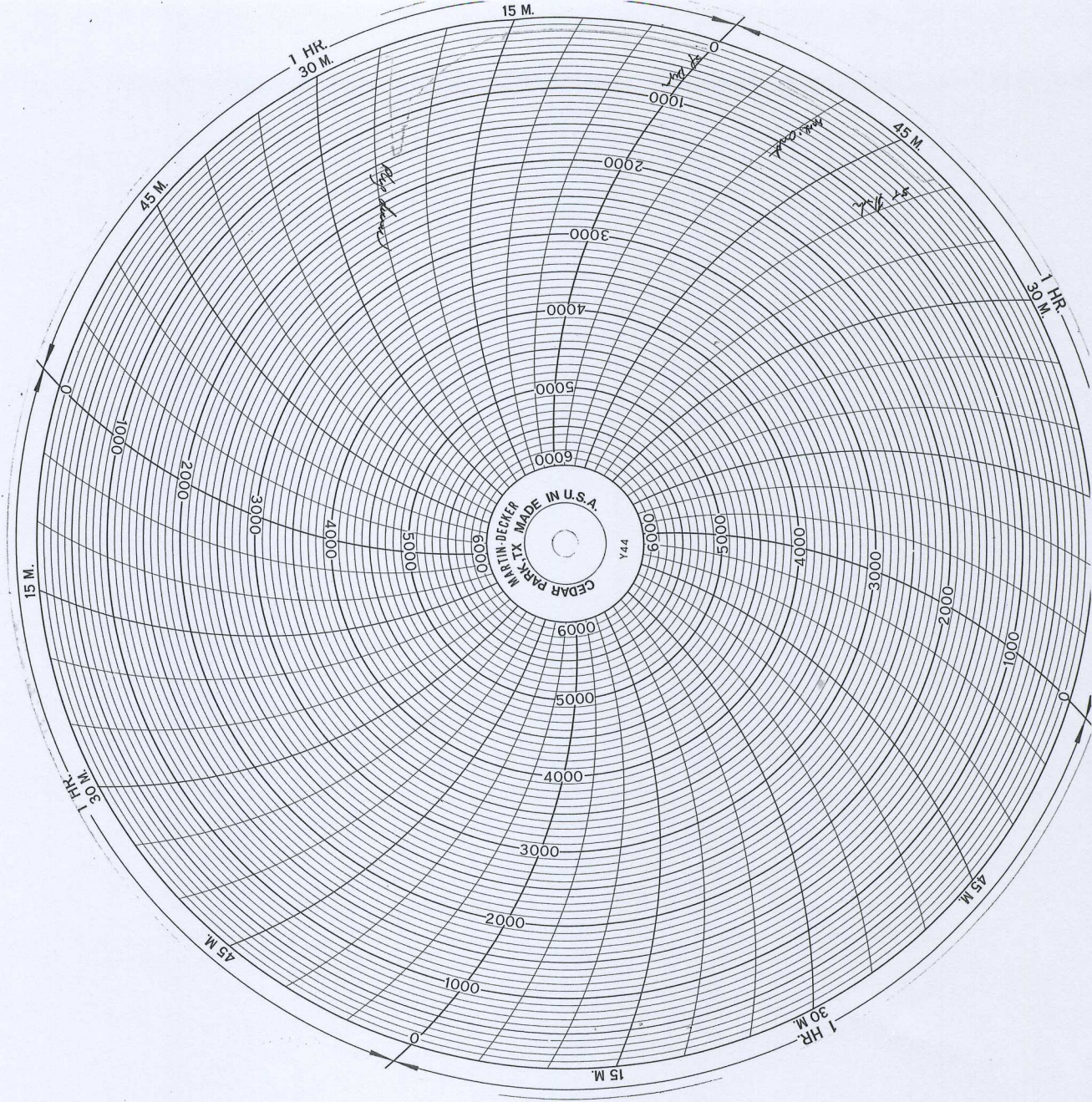
PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>5 1/2</i>	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
Depth <i>4752</i>	Depth	From	To	Pre Pad	Max		5 Min.	
Volume <i>112</i>	Volume	From	To	Pad	Min <i>circle 3-34</i>		10 Min.	
Max Press <i>1500</i>	Max Press	From <i>VAL</i>	To <i>ENERGY</i>	Frac	Avg		15 Min.	
Well Connection <i>2 1/2"</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <i>4712</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Sullivan</i>
-------------------------	--------------------------------------	-----------------------------------

Service Units	<i>19867</i>	<i>33708</i>	<i>19842</i>	<i>19960</i>	<i>19918</i>				
Driver Names	<i>Sullivan</i>	<i>Melson</i>	<i>Phye</i>						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>0600 am</i>					<i>on loc. safety meet</i>
					<i>RUN 118 STS 5 1/2 - 1515</i>
					<i>cont. 1, 3, 5, 7, 10 BASKET #5</i>
<i>0840</i>					<i>CASING ON BOTTOM</i>
<i>0850</i>					<i>HOOK'UP TO CIRC.</i>
<i>1110</i>	<i>150</i>		<i>12</i>	<i>3</i>	<i>1st Supper Flush</i>
			<i>5</i>		<i>1st SPACER</i>
			<i>5</i>		<i>MIX CONT 100% AA-CONT</i>
			<i>24</i>		<i>Shut down cont mixed. with pump down</i>
					<i>Release Plug</i>
<i>1130</i>				<i>6</i>	<i>1st Disp 1</i>
	<i>300</i>				<i>Lift P3</i>
	<i>500</i>			<i>4</i>	<i>Slow Rate</i>
<i>1150</i>	<i>1350</i>		<i>112</i>		<i>Plug down</i>
			<i>6</i>		<i>Plug R+H</i>
			<i>5</i>		<i>Plug M.H.</i>
					<i>1503 Complete</i>
					<i>Thank you</i>







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 08, 2011

K TODD ALLAM  
Val Energy, Inc.  
200 W DOUGLAS AVE STE 520  
WICHITA, KS 67202-3005

Re: ACO1  
API 15-007-23638-00-00  
CIRCLE 3-32  
NW/4 Sec.32-33S-10W  
Barber 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,  
K TODD ALLAM