



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: _____



1056647

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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Form	ACO1 - Well Completion
Operator	Molz Oil Company
Well Name	MOLZ 16
Doc ID	1056647

Tops

Name	Top	Datum
HEEBNER	3739	3740
LANSING	4389	4389
CHEROKEE	4660	4659
MISSISSIPPIAN	4712	4713
KINDERHOOK	4945	4947
VIOLA`	5108	5102
SIMPSON	5200	5203
SIMPSON SAND	5225	5226
ARBUCKLE	5397	5398
TD	5417	5417



PAGE 1 of 1	CUST NO 1004016	INVOICE DATE 04/19/2011
INVOICE NUMBER 1718 - 90573271		

Pratt (620) 672-1201
 B MOLZ OIL CO
 I 19159 SW CLAIRMONT
 L L
 L KIOWA
 T KS US 67070
 O ATTN:

J LEASE NAME Molz 16
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.		TERMS	DUE DATE
40309387	19842			Net - 30 days	05/19/2011
For Service Dates: 04/15/2011 to 04/15/2011					
0040309387					
171803962A Cement-New Well Casing/Pi 04/15/2011 5 1/2" Longstring ✓					
AA2 Cement	510030	255.00	EA	13.09	3,337.95 T
De-foamer (Powder)		48.00	EA	3.08	147.84 T
Salt (Fine)		1,264.00	EA	0.39	486.64 T
Gas-Blok		240.00	EA	3.97	951.72 T
FLA-322		192.00	EA	5.78	1,108.80 T
Gilsonite		1,275.00	EA	0.52	657.77 T
Latch Down Plug & Baffle 5 1/2" (Blue)		1.00	EA	308.00	308.00
Auto Fill Float Shoe 5 1/2" (Blue)		1.00	EA	277.20	277.20
Turbolizer 5 1/2" (Blue)		7.00	EA	84.70	592.90
5 1/2" Basket (Blue)		2.00	EA	223.30	446.60
CS-1L KCL Substitute		5.00	EA	26.95	134.75 T
Mud Flush		500.00	EA	0.66	331.10 T
Super Flush II		500.00	EA	1.18	589.05 T
Unit Mileage Charge-Pickups, Vans & Cars		50.00	HR	3.27	163.63
Heavy Equipment Mileage		100.00	MI	5.39	539.00
Proppant and Bulk Delivery Charges		600.00	MI	1.23	739.20
Depth Charge; 5001-6000'		1.00	HR	2,217.60	2,217.60
Blending & Mixing Service Charge		255.00	MI	1.08	274.89
Plug Container Utilization Charge		1.00	EA	192.50	192.50
Supervisor		1.00	HR	134.75	134.75

CK 20256
4-28-11

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	13,631.89
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	565.43
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	14,197.32
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



PAGE	CUST NO	INVOICE DATE
1 of 1	1004016	04/07/2011
INVOICE NUMBER		
1718 - 90565300		

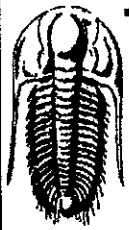
Pratt (620) 672-1201
 B MOLZ OIL CO
 I 19159 SW CLAIRMONT
 L KIOWA
 L KS US 67070
 T
 O ATTN:

J LEASE NAME Molz 16
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
40305312	19842		Net - 30 days	05/07/2011	
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 04/03/2011 to 04/03/2011					
0040305312					
171803981A Cement-New Well Casing/Pi 04/03/2011 13 3/8" Conductor					
60/40 POZ 50 50 50					
Cello-flake					
Calcium Chloride					
Unit Mileage Charge-Pickups, Vans & Cars					
Heavy Equipment Mileage					
Proppant and Bulk Delivery Charges					
Depth Charge; 0-500'					
Blending & Mixing Service Charge					
Supervisor					
		325.00	EA	9.24	3,003.00 T
		82.00	EA	2.85	233.62 T
		840.00	EA	0.81	679.14 T
		50.00	HR	3.27	163.62
		100.00	MI	5.39	539.00
		700.00	MI	1.23	862.40
		1.00	HR	770.00	770.00
		325.00	MI	1.08	350.35
		1.00	HR	134.75	134.75

Ch 22256
4-28-11

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	6,735.88
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	285.85
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	7,021.73
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Molz Oil Co
19159 SW Clairmont
Kiowa, KS 67070
ATTN: Arden Ratzlaff

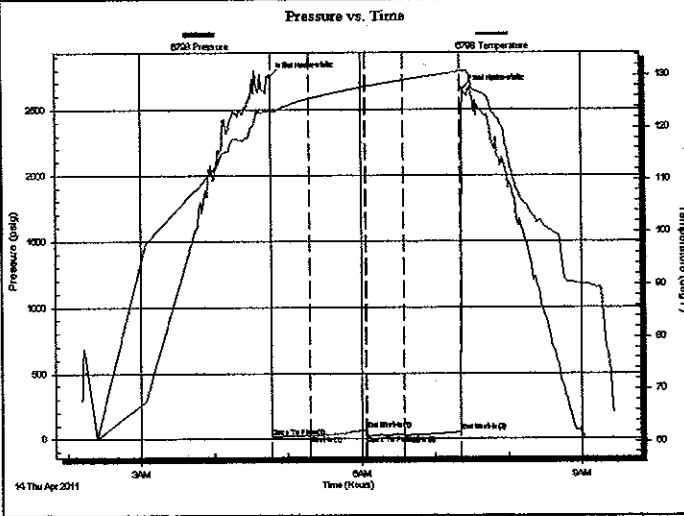
Molz #16
31-34S-11W
Job Ticket: 042430 **DST#: 2**
Test Start: 2011.04.14 @ 02:11:58

GENERAL INFORMATION:

Formation: **Simpson**
Deviated: **No Whipstock** ft (KB)
Time Tool Opened: 04:46:43
Time Test Ended: 09:26:43
Test Type: **Conventional Bottom Hole**
Tester: **Leal Cason**
Unit No: **45**
Interval: **5354.00 ft (KB) To 5366.00 ft (KB) (TVD)**
Reference Elevations: **1377.00 ft (KB)**
1367.00 ft (CF)
Total Depth: **5366.00 ft (KB) (TVD)**
Hole Diameter: **7.88 inches** Hole Condition: **Good**
KB to GR/CF: **10.00 ft**

Serial #: 6798 **Inside**
Press@RunDepth: **26.87 psig @ 5355.00 ft (KB)** Capacity: **8000.00 psig**
Start Date: **2011.04.14** End Date: **2011.04.14** Last Calib.: **2011.04.14**
Start Time: **02:11:58** End Time: **09:26:43** Time On Btm: **2011.04.14 @ 04:46:28**
Time Off Btm: **2011.04.14 @ 07:22:58**

TEST COMMENT: F: Weak Surface Blow
IS: No Blow back
FF: No Blow
FS: No Blow back



PRESSURE SUMMARY

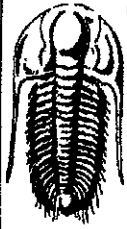
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2753.58	123.63	Initial Hydro-static
1	20.56	122.99	Open To Flow (1)
32	21.92	125.46	Shut-In(1)
77	67.26	127.76	End Shut-In(1)
78	24.36	127.79	Open To Flow (2)
109	26.87	129.07	Shut-In(2)
155	53.91	130.68	End Shut-In(2)
157	2653.98	130.71	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
5.00	DRLG Mud	0.02

Gas Rates

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



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Molz Oil Co
19159 SW Clairmont
Kiowa, KS 67070
ATTN: Arden Ratzlaff

Molz #16
31-34S-11W
Job Ticket: 042429 **DST#: 1**
Test Start: 2011.04.11 @ 22:11:25

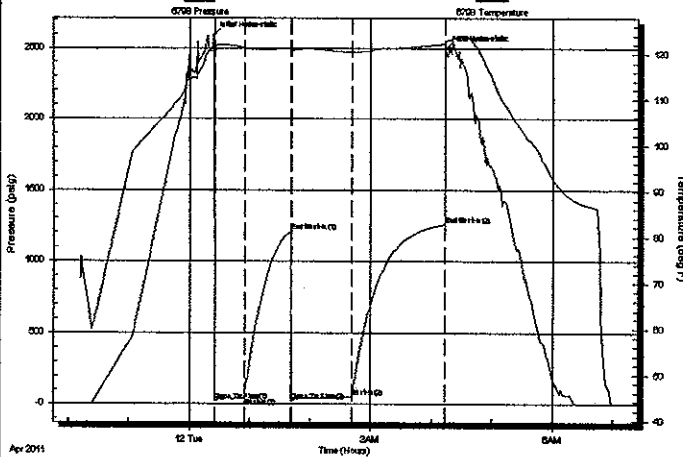
GENERAL INFORMATION:

Formation: **Misener**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 00:25:25
Time Test Ended: 06:58:40
Interval: **5043.00 ft (KB) To 5060.00 ft (KB) (TVD)**
Total Depth: 5060.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Good
Test Type: Conventional Bottom Hole
Tester: Leal Cason
Unit No: 45
Reference Elevations: 1377.00 ft (KB)
1367.00 ft (CF)
KB to GR/CF: 10.00 ft

Serial #: 6798 **Inside**
Press@RunDepth: 52.38 psig @ 5044.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2011.04.11 End Date: 2011.04.12 Last Calib.: 2011.04.12
Start Time: 22:11:25 End Time: 06:58:40 Time On Btm: 2011.04.12 @ 00:23:25
Time Off Btm: 2011.04.12 @ 04:13:40

TEST COMMENT: IF: Strong Blow, BOB in 90 seconds
IS: Bled Off, No Blow back
FF: Strong Blow, BOB in 20 seconds, GTS in 16 minutes, Gauged Gas
FS: Bled Off,

Pressure vs. Time



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2581.79	120.58	Initial Hydro-static
2	25.11	121.41	Open To Flow (1)
32	44.55	121.35	Shut-in(1)
78	1207.23	121.37	End Shut-in(1)
79	25.68	120.83	Open To Flow (2)
138	52.38	120.33	Shut-in(2)
230	1255.08	122.30	End Shut-in(2)
231	2490.62	122.82	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
0.00	4902 feet GIP	0.00
60.00	MCO 24%M 76%O	0.30
80.00	OCM 10%O 90%M	0.58

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
First Gas Rate	0.25	3.00	27.76
Last Gas Rate	0.25	3.50	28.56
Max. Gas Rate	0.25	3.50	28.56