

**ENERGY SERVICES**  
PRESSURE PUMPING & WIRELINE

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

## FIELD SERVICE TICKET

1718 03139 A

DATE      TICKET NO

|                                        |     |            |     |                                                                                                                                                                                            |     |                            |                       |
|----------------------------------------|-----|------------|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------------------|-----------------------|
| DATE OF JOB 12/21/10 DISTRICT PIQUETTE |     |            |     | 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 GRIFFIN MANAGEMENT            |     |            |     | LEASE LEYSA 1 WELL NO. 1                                                                                                                                                                   |     |                            |                       |
| ADDRESS                                |     |            |     | COUNTY HARPER STATE W.V.                                                                                                                                                                   |     |                            |                       |
| CITY STATE                             |     |            |     | SERVICE CREW KC, CHAS, BRAD                                                                                                                                                                |     |                            |                       |
| AUTHORIZED BY                          |     |            |     | JOB TYPE: CNW - SURFACE                                                                                                                                                                    |     |                            |                       |
| EQUIPMENT#                             | HRS | EQUIPMENT# | HRS | EQUIPMENT#                                                                                                                                                                                 | HRS | TRUCK CALLED               | DATE 12-21 AM PM 1900 |
| 15901                                  |     |            |     |                                                                                                                                                                                            |     | ARRIVED AT JOB             | 12-21 AM PM 2200      |
| 27463                                  | 1/2 |            |     |                                                                                                                                                                                            |     | START OPERATION            | 12-21 AM PM 0800      |
|                                        |     |            |     |                                                                                                                                                                                            |     | FINISH OPERATION           | AM PM 0330            |
| 19959                                  | 1/2 |            |     |                                                                                                                                                                                            |     | RELEASED                   | AM PM 0400            |
| 21010                                  |     |            |     |                                                                                                                                                                                            |     | MILES FROM STATION TO WELL | 70                    |

**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)

[illegible]

| CHEMICAL / ACID DATA: |  |  |  |
|-----------------------|--|--|--|
|                       |  |  |  |
|                       |  |  |  |
|                       |  |  |  |

|                     |            |         |  |
|---------------------|------------|---------|--|
| SERVICE & EQUIPMENT | %TAX ON \$ |         |  |
| MATERIALS           | %TAX ON \$ |         |  |
| TOTAL               |            | 5622.22 |  |

|                                             |                                                                                                                                     |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| SERVICE REPRESENTATIVE<br><i>K. GORSLEY</i> | THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i><br>(WELL OWNER OPERATOR CONTRACTOR OR AGENT) |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|





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

## FIELD SERVICE TICKET

1718 03224 A

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

|                                |  |       |            |                      |     |            |  |                                                                                                                                                                                            |                            |  |                |                                                                    |               |
|--------------------------------|--|-------|------------|----------------------|-----|------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--|----------------|--------------------------------------------------------------------|---------------|
| DATE OF JOB<br>1-3-11          |  |       |            | DISTRICT<br>Pratt    |     |            |  | 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<br>Griffen Management |  |       |            | LEASE<br>Leysa       |     |            |  | WELL NO. 1                                                                                                                                                                                 |                            |  |                |                                                                    |               |
| ADDRESS                        |  |       |            | COUNTY<br>Harper     |     |            |  | STATE<br>KS                                                                                                                                                                                |                            |  |                |                                                                    |               |
| CITY                           |  |       |            | STATE                |     |            |  | SERVICE CREW<br>Orlando, Lesley, Hunter                                                                                                                                                    |                            |  |                |                                                                    |               |
| AUTHORIZED BY                  |  |       |            | JOB TYPE:<br>CNW-PTA |     |            |  |                                                                                                                                                                                            |                            |  |                |                                                                    |               |
| EQUIPMENT#                     |  | HRS   | EQUIPMENT# |                      | HRS | EQUIPMENT# |  | HRS                                                                                                                                                                                        | TRUCK CALLED               |  | DATE<br>1-3-11 | AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> | TIME<br>12:30 |
| 27283                          |  | 1 1/2 |            |                      |     |            |  |                                                                                                                                                                                            | ARRIVED AT JOB             |  |                | AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> | 2:00          |
| 19903-19905                    |  | 1 1/2 |            |                      |     |            |  |                                                                                                                                                                                            | START OPERATION            |  |                | AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> | 4:30          |
| 19826-19860                    |  | 1 1/2 |            |                      |     |            |  |                                                                                                                                                                                            | FINISH OPERATION           |  |                | AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> | 6:30          |
|                                |  |       |            |                      |     |            |  |                                                                                                                                                                                            | RELEASED                   |  |                | AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> | 7:00          |
|                                |  |       |            |                      |     |            |  |                                                                                                                                                                                            | MILES FROM STATION TO WELL |  |                |                                                                    | 45            |

**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)

[illegible]

| CHEMICAL / ACID DATA: |  |  |  |
|-----------------------|--|--|--|
|                       |  |  |  |
|                       |  |  |  |
|                       |  |  |  |

SUB TOTAL

|    |      |    |
|----|------|----|
| K9 | 3827 | 17 |
|----|------|----|

|                     |            |  |  |
|---------------------|------------|--|--|
| SERVICE & EQUIPMENT | %TAX ON \$ |  |  |
| MATERIALS           | %TAX ON \$ |  |  |
| TOTAL               |            |  |  |

|                                             |                                                                                                                                     |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| SERVICE REPRESENTATIVE <i>Steve Orlando</i> | THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>James Smith</i><br>(WELL OWNER OPERATOR CONTRACTOR OR AGENT) |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|

FIELD SERVICE ORDER NO.