

Kansas Corporation Commission Oil & Gas Conservation Division

1063441

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
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 #:	QuarterSec TwpS. R
ENHR Permit #:	County: Permit #:
GSW Permit #:	. 5
Spud Date or Date Reached TD Completion Date or Recompletion Date 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 Approved by: Date:					

Side Two

1063441

Operator Name:			Lease	Name:			Well #:		
Sec Twp	S. R	East West	County	/:					
INSTRUCTIONS: Show time tool open and close recovery, and flow rates ine Logs surveyed. Atta	ed, flowing and shut- if gas to surface tes	in pressures, whether t, along with final char	shut-in pres	sure reach	ed static level,	hydrostatic press	sures, bottom h	ole tempe	erature, fluid
Drill Stem Tests Taken (Attach Additional Sh	eets)	Yes No		Log	Formation	n (Top), Depth an	d Datum	□ s	ample
Samples Sent to Geolog	,	☐ Yes ☐ No		Name			Тор	D	atum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)		Yes No Yes No							
List All E. Logs Run:									
		CASIN Report all strings se	G RECORD	New	Used	on, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Wei	ight	Setting Depth	Type of Cement	# Sacks Used		nd Percent
	Diffied	Set (III O.D.)	LDS.	/ I t.	Берш	Cement	Osed	Ac	luitives
		ADDITION	AL CEMENTI	NG / SQUE	EZE RECORD				
Purpose: —— Perforate —— Protect Casing —— Plug Back TD	Depth Top Bottom	Type of Cement	# Sacks	s Used		Type and F	Percent Additives		
Plug Off Zone									
Shots Per Foot	PERFORATIO Specify Fo	N RECORD - Bridge Plootage of Each Interval P	ugs Set/Type erforated			cture, Shot, Cement nount and Kind of Ma		d	Depth
TUBING RECORD:	Size:	Set At:	Packer A	At:	Liner Run:	Yes No			
Date of First, Resumed Pr	roduction, SWD or ENH	R. Producing Me	ethod:	ng Ga	as Lift	ther (Explain)			
Estimated Production Per 24 Hours	Oil B	bls. Gas	Mcf	Water	Bk	ols. (Gas-Oil Ratio		Gravity
DISPOSITION	N OF GAS:		METHOD OF				PRODUCTIO	ON INTERV	AL:
Vented Sold	Used on Lease	Open Hole	Perf.	Dually C (Submit AC		nmingled mit ACO-4)			
(If vented, Subm	nit ACO-18.)	Other (Specify)							

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	WIGGAINS 12-7
Doc ID	1063441

All Electric Logs Run

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



FIELD SERVICE TICKET 1717 01755 A

WELL OWNER OPERATOR CONTRACTOR OR AGENT)

		SERVICES Phonor & WIRELINE	one 620-62	24-2277			DATE	TICKET NO			
DATE OF JOB	23-11	DISTRICT /7/1	7		NEW NEW	OLD □ P	ROD INJ	□ WDW		STOMER DER NO.:	
CUSTOMER	D	/- 1			LEASE Z	W-		·			,,,,
-	exy u	OH				1990	7145			WELL NO.	<i>Z-Z</i>
ADDRESS					COUNTY	teve	US	STATE	Kr	12.21	
CITY		STATE			SERVICE C	REW Co	chrsn i	Mendo	:7/	My NO	<u> </u>
AUTHORIZED B	Y ToD	11115			JOB TYPE:	241	2 85	- James	120	=	
EQUIPMENT	# HRS	EQUIPMENT#	HRS	EQU	IPMENT#	HRS	TRUCK CALL	.ED	DATE		1E
19816	5-	19821	5-				ARRIVED AT	JOB	<u> </u>	AM Not	()
27408	300	19566	5				START OPER	<i>\</i>	<u> </u>	AM	4.0
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								A CTATION TO	<u>"ZJ</u>	2 17 C	00
]	MILES PHON	1 STATION TO	WELL	<u> 20 </u>	
products, and/or su become a part of th	pplies includes all	execute this contract as an of and only those terms and the written consent of an o	l conditions ap	pearing on	the front and ba	ck of this doo	es and acknowled cument. No addit IGNED: (WELL OWNE	ional or substitute	toms fr	actor or Ac	s shall
ITEM/PRICE REF. NO.	M	IATERIAL, EQUIPMENT	AND SERV	ICES US	ED	UNIT	QUANTITY	UNIT PRIC	Æ	\$ AMOUN	Т
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CL110	Prem	ium Plus				5k	160			2608	200
CC109	Calcil	41.	<u>'</u> ~			16	1475			1548	75
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			J	PROJES	CT#_ <u>\ \ \ </u>	3084	_CAPEX/C	PEX - Circle	one		
SERVICE	- 74·	yloch	THE ABOV	PRINTE	D NAME (RIALAND SEI TOMER AND	RVICE	911	SUPPORTEI			
REPRESENTATIV	1 MM	ylow	KOHDEHEL	D BY CUS	IOMER AND	COLUMN TO SERVICE	d Sprvices Male	de a have been rec	hive g		



Cement Report

	Liberai	, Kansas		1.				
Customer	Dxy 4	15A		Lease No.			Date c	5-23-11
Lease 1/2	Vigga	ins		Well # /2	2-7		ervice Receip	1717 01785
Casing Casing	1/244	Dooth	100	County 5	ever	s	tate X5	
Job Type	747 8	of sur	Formation			Legal Description	12 3	5 36
		Pipe I	-			Perforating		Cement Data
Casing size	85/		Tubing Size	-		Shots/F	t	Lead 4K 5K A-com
Depth	1800	· · · · · · · · · · · · · · · · · · ·	Depth	<u> </u>	From	T		37CC-12 Cell flake
Volume			Volume		From	T	<u> </u>	14/2/10/ 19/2/19/
Max Press			Max Press		From	· 1	5	Tail in 160 ok Prem
Well Connec	tion Prd	,	Annulus Vol.		From	T	9	-2760-44 Cellflo
Plug Depth			Packer Depth		From	T	0	1.54ft/5k b.3392/
<u> </u>	Casing	Tubing		T		<u></u>		- 111 /301
Time	Pressure	Pressure	Bbls. Pumbed	Rate		, ,	Service	Log
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14:50	260		177	4	54	rt Ledd	Cm	7 418 -KE12.1
15:27	200		36	4.3	Sta	11-1-1811	Cin	+ 1605K @148
1537					Shu	1down	+ Dro	p Plug
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16:07	250		102	25	5/0	w Rate		
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Service Unit	s s	19816	2740119553 Mendo 23	193551	4294	19827198	66	
Driver Name	s Con	chAH	Mendors	Man	02	CINIDAN	-	

Customer Representative

J. Bennett
Station Manager

M. Cochisu

Cementer

Taylor Printing, Inc.



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

FIELD SERVICE TICKET 1717 01760 A

DATE TICKET NO. ☐ CUSTOMER ORDER NO.: DATE OF OLD PROD INJ □ WDW DISTRICT CUSTOMER WELL NO. // **ADDRESS** CITY STATE **AUTHORIZED BY** 12015 JOB TYPE: **EQUIPMENT#** HRS **EQUIPMENT#** HRS **EQUIPMENT#** HRS TRUCK CALLED b ARRIVED AT JOB START OPERATION 6 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 supplies includes all of and only those terms and/or conditions appearing on the front and back of this document. No additional or supplies includes all of and only those terms and/or conditions appearing on the front and back of this document. become a part of this contract without the written consent of an officer of Basic Energy Services LP. SIGNED: X (WELL OWNER, OPERATOR CONTRACTOR OR AGENT) ITEM/PRICE REF. NO. MATERIAL, EQUIPMENT AND SERVICES USED UNIT QUANTITY **UNIT PRICE** \$ AMOUNT 168912 1202□NON DO2□ ELEMENT APEX / OPEX - direid Circle Doc Type

CRIMTED NAME SIGNATURE: 500 SUID. 430 SUB TOTAL CHEMICAL / ACID DATA: **SERVICE & EQUIPMENT** %TAX ON \$ %TAX ON \$ MATERIALS TOTAL

SERVICE REPRESENTATIVE The Manual Control of the Co	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:	ndut	Sleme
FIELD SERVICE ORDER NO.	(WELL OWNER OPE	RATOR/CONTRAC	TOR OR AGENT)



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

TICKET NO. /1170/760

P	RESSURE PUMPING & WIREL			TICKET NO. ////0/760				
ITEM/PRICE REF. NO.		, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE		\$ AMOUN	
£100	Pick-up	Miledge Supervisor Chrq.	145	20			85	03
5003	Service	Supervisor	12				175	<u> </u>
16007	Parniste	Chra.	CF	-/			-300	10
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Cement Report

Lease	Customer	DXU U	25A		Lease No.			Date	°5-28-	-//
Job Type Z 4 1	Lease //				Well #	2-7		Service Re	ceipt /7/7 C	917:60
Legal Description 7 7 7 7 7 7 7 7 7	Casing	12	Donath 6	300	County <	teve	45	State		
Pipe Data	Job Type	7425	1/2 4.5.				Legal Descriptio	n 12 -	- 75-,	6
Depth Volume Volume From To Soft bolleport Volume Volume From To 1.72 ft kt 7.3 galle Volume From To 1.72 ft kt 7.3 galle Volume From To Tail in 570 ft 50 ft kt Volume From To Tail in 570 ft 50 ft kt Volume From To Soft ft 10 ft ft Volume Volume From To Soft ft Volume Volume Volume From To Soft ft Volume Volum			Pipe [) Data			Perforating	g Data		
Volume	Casing size			Tubing Size			Shots/	Ft	Lead	Rata Mouse
Max Press Max Press From To Tail in 5/1015 State Well Connection Annulus Vol. From To Tail in 5/1015 State Piug Depth Packer Depth From To State Tail in 5/1015 State Time Casing Tubing Pressure	Depth		····	Depth		From		То		
Well Connection	Volume			Volume	<u>.</u>	From	* *	To	1.72	~
Packer Depth	Max Press			Max Press		From		То	Tail ir	58051 5010
Packer Depth	Well Connec	tion		Annulus Vol.		From		То	-57W	15 - 1/4 Dolosma
Time Pressure Pr	Plug Depth			Packer Depth		From		То	5 61	forite 1.52 ft
07:00 10:00 11:00 11:00 11:00 11:45 10										93//5/ (4 /3.8
10:30 11:00 Spot + Riq up Equip. (cracen Between) 11:47 5000 12:48 700 12:48 700 12:41 700 12:50 700 13:50 700 103 5.5 Start Fresh Had 13:50 700 13:10 Shutdown + Wash up 13:10 13:16 150 0 5.5 Start Disp. w/fresh Had 13:49 1200 147 2 Slov Bate 13:49 1200 157 2 Bump Plug 13:50 & O Release / Float Held 13:51 500 157 2 Plug Rat Hole w/30sk @ 13.54 15:35 100 158 100 159 2 Plug Rat Hole w/30sk @ 13.54 15:35 100 159 2 Plug Rat Hole w/20sk @ 13.54 15:35 100 159 2 Plug Rat Hole w/20sk @ 13.54 15:35 100 159 2 Plug Rat Hole w/20sk @ 13.54 15:35 100 159 2 Plug Rat Hole w/20sk @ 13.54 15:35 100 159 2 Plug Rat Hole w/20sk @ 13.54 15:35 100 159 2 Plug Rat Hole w/20sk @ 13.54 15:36 159 159 1595 1435 1400 159 2 Plug Rat Hole w/20sk @ 13.54 15:36 159 159 1595 1435 1435 1400 159 159 159 1595 1435 1400 159 159 159 1595 1435 1400 14354 1590		Pressure	Pressure	Bbls. Pumbed	Hate	11	1117	Z	vice Log	
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12:45 700 5 5.5 Start fresh Hyp 12:47 700 5 5.5 Start fresh Hyp 12:50 700 5 5.5 Start fresh Hyp 12:51 700 103 5.5 Start fresh Hyp 13:08 Sheetdown + Wash up 13:10 Drop Plag 13:14 1200 147 2 Slov Bate 13:44 1200 147 2 Slov Bate 13:50 & D Release I float Held 13:51 2500 Prersure Test Cog. 14:25 2600 9 Plag Rot Hole w/ 30sk & 13.54 14:53 100 9 Plag Rot Hole w/ 20sk & 13.54 15:28 Kart Market Hole w/ 20sk & 13.54 15:28 Kart Market Hole w/ 20sk & 13.54 15:28 Kart Market Hole w/ 20sk & 13.54 15:35 End Job						00	Loc.	178/0	DATETY	recting
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12:47 700 17 55 Start Super flush H 12:50 700 5 5.5 Start forsh Hy0 12:51 700 103 5.5 Start Court 380 s kB 13.8# 13:08 Shut Sown & Wash up 13:10 Drop Plug 13:16 150 O 5.5 Start Disp. w/fresh Hy0 13:44 1200 147 2 Slov Rate 13:45 1700 157 2 Bump Plug 13:50 9 O Release / Float Held 13:51 2500 Pressure Test Cog. 14:25 2600 9 12.9 Held 15.33 100 9 100 9 100				 	سد سعر	125	y Pagno	1 + Li	hes	
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13:44 1200 147 2 5100 Bate 13:48 1900 157 2 Bump Plug 13:50 & 0 Release / flost Held 13:51 2500 Pressure Test Cog. 14:25 2600 Csg. Held 15:33 100 9 Plug Rot Hole w/30sk E/3.54 14:53 100 6 2 Plug Rot Hole w/20sk E/3.54 15:38 End Job Service Units 2/155 219081888 143581424 1435418898	13:10					12r	p Pla	9		
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13:51 2500 14:25 2600 15:33 100 9	13:50	0			0	Rele	ase /	flost	Held	
14:25 2600 15:23 100 9 12 Plug Ret Hole w/30sk @ /3,5# 14:53 100 6 2 Plug Morre Hole w/20sk@/3,5# 15:35 End Job Service Units 2/755 27081855 143551424 14354/9596		2500				Pre				
19:33 100 9 9.2 Plug Ret Hole w/30sk & 13.5# 14:53 100 6 2 Plug Morre Hole w/20sk & 13.5# 15:35	. [4	2600		ļ		159				
14:53 100 6 2 Plug Morse Hole w/20568/3.34 15:35 End Job Service Units 2/757 290818513 14355/424 14354/9548		100		9	12	Plug	Ret H	lole a	v/30sk	@ 13.3#
18:18 Wash up 15:35 End Job Service Units 2/757 290818513 14355/424 14354/9548		100		6	2	Plus	MORSE	Hole	w/20sk	1813.34
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Service Units 2/755 2790818573 /4355/427 /4354/9578 Driver Names Conbrid Mendozz 5 Chavez T Ontiz					•					
Service Units 2/755 2790819553 /4355/424 /4354/9548 Driver Names Conhrin Mendozi 5 Chavez T Ontiz							,	·		
Driver Names Conbrin Mendozi 5 Chavez T Datiz	Service Units	212	سرس	19081988	14955	1491	1410010			
		Con	brin	Mendozz	5 1.43	VE7_	T Bat			

And	V
Customer	Representative

J. Bennett	
Station Manager	

Attachment to Wiggains 12-7 (API 15-189-22767)

Cement & Additives

String	Туре	# of Sacks Used	Type and Percent Additives
Surface	A-Con	Lead:415	3% CC, 1/2# Cellflake, 0.2% WCA1
	Prem Plus	Tail: 160	2% CC, 1/4# Cellflake
Production	50-50 Poz	380	5% W-60, 10% Salt, 0.6% C-15, 1/4# Defoamer, 5# Gilsonite

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/

Sam Brownback, Governor

Mark Sievers, Chairman Ward Loyd, Commissioner Thomas E. Wright, Commissioner

September 15, 2011

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

Re: ACO1 API 15-189-22767-00-00 WIGGAINS 12-7 NE/4 Sec.12-35S-36W Stevens 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