

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

the same are true and correct, so help me God.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1073165

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:			APIN	No. 15						
Name:			I	Description:						
Address 1:				Sec T	wp S. R East West					
Address 2:				Feet from	North / South Line of Section					
City:	State:	Zip:+		Feet from	East / West Line of Section					
Contact Person:			Foota	ages Calculated from Near	est Outside Section Corner:					
Phone: ()				NE NW	SE SW					
Type of Well: (Check one)			ic Coun	ty:						
Water Supply Well			Leas	e Name:	Well #:					
	_	orage Permit #:	Date	Well Completed:						
Is ACO-1 filed? Yes	No If not, is well	I log attached? Yes	A.		roved on: (Date)					
Producing Formation(s): List A			, , ,		(KCC District Agent's Name)					
Depth to		m: T.D	l Plugo	ging Commenced:						
Depth to		m: T.D	Plugg	ging Completed:						
Depth to	o Top: Botto	m: T.D								
Ob d	all contain all and man famous									
Show depth and thickness of		ations.	0 ' 0 '	(0.60						
Oil, Gas or Water				g Record (Surface, Conductor & Production)						
Formation	Content	Casing	Size	Setting Depth	Pulled Out					
cement or other plugs were us	. 00		•		ods used in introducing it into the hole. If					
Plugging Contractor License #	# :		Name:							
Address 1:			Address 2:							
City:			State	:	Zip:+					
Phone: ()										
Name of Party Responsible fo	or Plugging Fees:									
State of	County, _		, SS.							
	(Print Name)			Employee of Operator or	Operator on above-described well,					

Submitted Electronically

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and

BASIC ENERGY SERVICES

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

FIELD SERVICE TICKET 1718 04957 A

PR				T							
DATE OF JOB	- () D	ISTRICT Pratt, IT	ansas		MEN DY	VELL P	PROD INJ	☐ WDW		STOMER RDER NO.:	
CUSTOMER	.1.	m. Incorpo	-		LEASE W	iden	er			WELL NO	7-26
ADDRESS		·);			COUNTY	taft	ford	STATE	Har	505	
CITY		STATE			SERVICE CF	-	Nessich:/				'ey
AUTHORIZED BY			W-Sorf								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CALL		DATE	AM T	IME
37,216	5						ARRIVED AT			PM 2	30
							START OPER	IATION)	SAMP 3	45
9,903-19905	2						FINISH OPER	IATION /	7	AM 8	45
9.832-21010	5						RELEASED	11-22-		AMP .	30
1,000 81010							MILES FROM	STATION TO	O WELL	45	
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SERVICE & EQUIPMENT

MATERIALS

	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY

Service Supervisor

CHEMICAL / ACID DATA:

%TAX ON \$

%TAX ON \$

SUB TOTAL

TOTAL



TREATMENT REPORT

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Customer	Drillin	CI.	Inc	OYL	Le	ease No.			311	1 4	Date	1 /	1	1011
Lease M	dener	-			W	/ell# 7	-26)			1 _/		- d	/ /- / /
Field Order	# Station	Pr	att.	tra	nso	75		(Saa)hg	231 Dept	372Fe	Count	y 5t	aff	ord State
Type Job	N.W	Sui	Δ.	ce		2.51			Formation	7.72			Legal D	escription 12W
PIP	E DATA		PERF	ORAT	ING	DATA		FEUID	USED			TREA	TMENT	RESUME
Casing Size	3 Tubing Si	ze S	hots/F	t	17	5 5 40	AZEIO	A·Co	nwith3	8 Calc	RATE	PRE	ss .	15 LUIST. COllflat
Depth 2 Fe	e Depth	F	rom		To]	2.6L	13 P		.89 <i>Gal</i> ,	/Max STC.	2.12		FILE	
Volume B	Volume	F	rom		то∫`	75	ac ac	TS COM	monwith	Mirg Co	desig	nchl	oride i	10 Min. Ist cell flut
Max Press	Max Pres	F	rom		То	5.6L	D. C		.23Gal.	/AVA	.200		T./5	_15 Min.
Vacc	on Annulus V	F	rom		То					HHP Úse				Annulus Pressure
Plug Depth	≥e T	epth F	rom		То		Flush	d0.	Bbl. Fre	Gas Volu	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN			Total Load
Customer Re	presentative	m	ich	05		Station	Manag	er Dal	11d Sce	+	Trea	ater are	nce R	Messich
Service Units	37,216	19,9	63	19,90	<u> </u>	19,83	2 2	1,010						
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Time A./	Pressure	Pres		Bbls	. Pumj	ped	R	ate				Servi	ce Log	
2:30	_								locatio				1.4	eeting.
2:40	Petros	Park	D	illir	195	tart	tor	un 87	oints no	ew 23			^	
3:36								-t-	Casing	inwe	11.0			or 5 minutes
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BASIC ENERGY SERVICES

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

FIELD SERVICE TICKET 1718 04961 A

EIN	ENGI	OLITATORO XIII	THE ONE O	12 2002						
PRESSU	JRE PUMF	PING & WIRELINE 2	6-6	115-	-12 W	/	DATE TICKET NO			
DATE OF JOB	11 0	DISTRICT Pratt.	Tans	NEW DY C	VELL□ F	PROD INJ WDW CUSTOMER ORDER NO.:				
CUSTOMER	Dril	ing Incorpo	- /4	LEASE Widener WELL NO.						
ADDRESS		<i>y</i> ,			COUNTY Stafford STATE TO 11595					
CITY		STATE			SERVICE CR	EW.C.	Messich: M. Mattal: S. Young			
AUTHORIZED BY					JOB TYPECN, W Plug To Abandon					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CALLED 1129 DATE AM 51ME			
37,216	2.5			- vi-			ARRIVED AT JOB			
						-	START OPERATION AM 8:30			
19,903-19,905	2.5		-				FINISH OPERATION AM 100			
19.932-21010	2.5					7	RELEASED 11-29-11 AM 11:30			
LING TO POLIVIO	M. Carlo		1	-	-	2	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 103 60/40 Poz Cement 517 200 \$ 2400 \$ 500

0	REF. NO.	10/110 B C-1 +	7	SIT	200	/	4	2400	na
٢	CP103	60/40 Poz Cement		211	000		7	05,700	30_
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D	66.000	C-+ +Cal		Lb	344 -		4	86	50
	CC 200	Cement Gel		LD			7	- 00	70
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			1					المرزينة عيدة	
P	F 100	Pickup Mileage		Mi	45		\$	19	25
P	FIOI	Heavy Favioment Milegae		Mi	90		5	630	00
P	F 113	Pickup Mileage Heavy Equipment Mileage Bulk Delivery		+ m	387	4	\$	619	20
	0.100							Later II II II	1 =7
3									
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P	CE 204	Cement Pump: 3,00 Feet To4 Blending and Mixing Serv	000 Feet	NIS	7		\$		00
4	CE240	Blending and Mixing Serv	ice	51	300		\$	280	00
p	5003	Service Supervisor		hrs,	8		\$	175	00
		De Ville Dopologia	THE A I			SUB TO	TAL	5	
	CHI	EMICAL / ACID DATA:				DUS	5	5.67	75
			SERVICE & EQUIPM	MENT		X ON \$	T		-
			MATERIALS		%TA	X ON \$			
						то	TAL	(T III '211)	

REPRESENTATIVE UNE X MILLOCOLD

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



TREATMENT REPORT

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Customer	lina:	Inco	rpora	La	ase No.			314		Date	1		10	111
Lease Wic	ener		7		ell#	-26) 1116		**			90	4	1
Field Order #	Station		H. To	anso	25		Casing	Drillepth	be (County	Sta	7	ord	state n595
Type Job	1.W	Plyg	TOAL	pand	on			Formation			L c	egal De	seription _	12W
PIPE	DATA		RFORAT	LIME	DATA	nt	FUND	USED					RESUME	
Casing Size	Tubling Si	Shot	VFbe	20	050	AT DE	560]	40 Poz	with	ATE 2	PRESS	5	ISIP	
Depth	Depth	From		То	3.81	Bro F	adGal.	6.900	Max /sh	- 1 6	1200	J.FT	δMin.	
Volume	Volume	From		То		Pati	-		Min				10 Min.	
Max Press	Max Press	From		То		Fiac			Avg				15 Min.	
Well Compedion	Annulus V	ol. From		То					HHP Used				Annulus Pr	essure
Plug Depth	Packer De	epth From		То		Flush	III na /	nud and	Gās Volume		er		Total Load	
Customer Repre	se ntat ive	n Nic	hols		Station	n Manag	er Da	vid Sca	ott	Treate	reno	e R	Mes	sich
Service Units	7,216	19.90	3 19,9	105	19,8	32 2	1,016							
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Time P.M.,	Casing Pressure	Tubing Pressure	Bbls	. Pump	ed	R	ate		·		Service I	Log -	n vi e	
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7:30	100		Tu	10/	500	loca	tion	and hol	dsafe	TYA	leet	ino	1e	
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10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • (620) 672-1201 • Fax (620) 672-5383

11:15P.m. Job Complete. Thank You, Clarene, Milte, Steve,

Taylor Printing, Inc. 620-672-365