



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1073791  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
August 2013

Form must be Typed  
Form must be Signed  
All blanks must be Filled

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
- Plug Back       Conv. to GSW       Conv. to Producer
- 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

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx)      (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical 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

- Confidentiality Requested  
Date: \_\_\_\_\_
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1073791

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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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/>

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

Sam Brownback, Governor

February 21, 2012

405-840-9876  
Quinque Operating Company  
908 NW 71ST ST  
OKLAHOMA CITY, OK 73116-7402

Re: ACO1  
API 15-119-21304-00-00  
Adams Trust 1  
SW/4 Sec.33-34S-30W  
Meade 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,  
405-840-9876



PAGE	CUST NO	INVOICE DATE
1 of 1	1001945	11/30/2011
INVOICE NUMBER		
1717 - 90765570		

Liberal (620) 624-2277

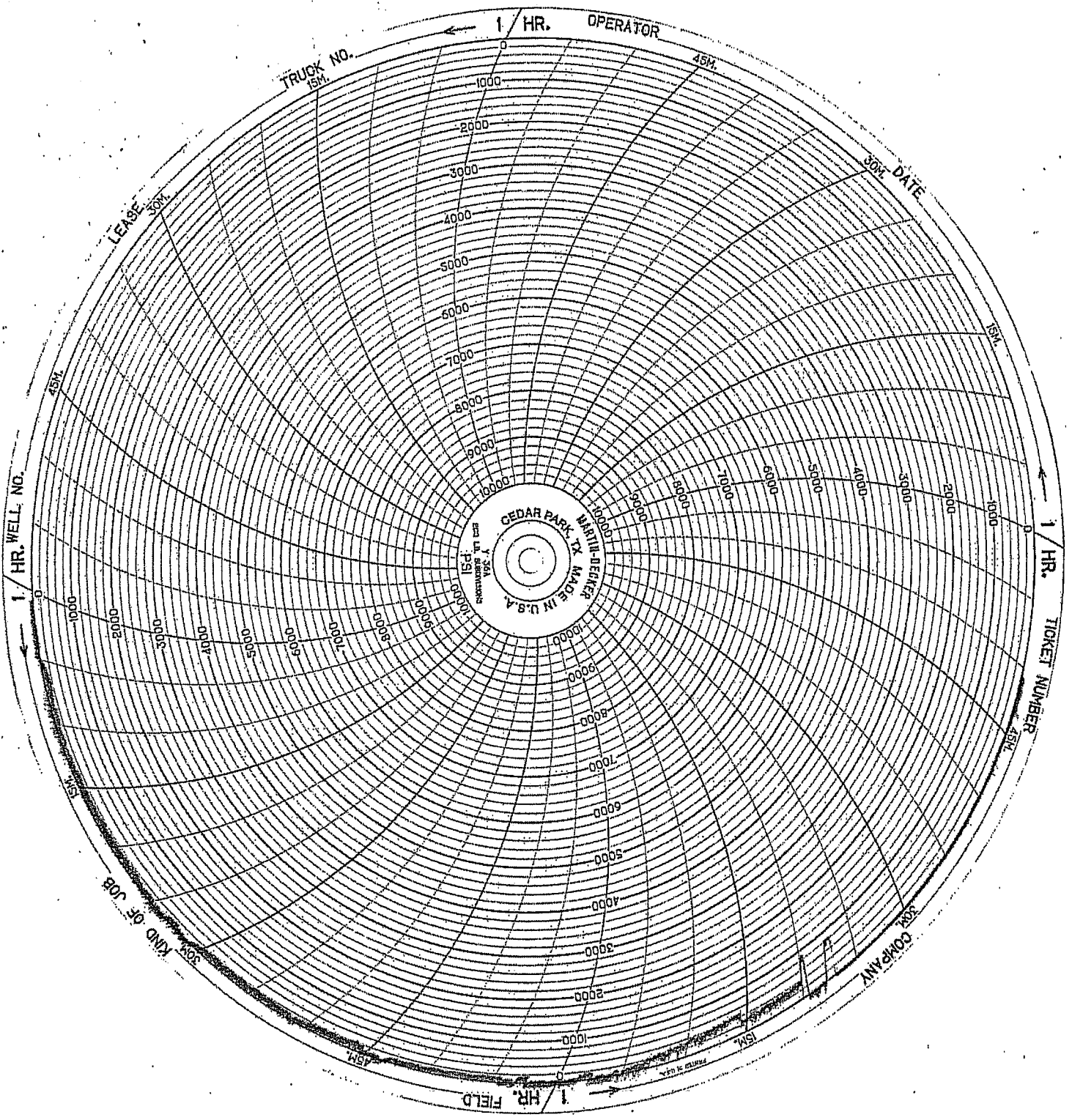
B HUNTINGTON ENERGY  
 I 908 NW 71ST ST  
 L OKLAHOMA CITY  
 OK US 73116  
 O ATTN: JENNY THOMPSON

J LEASE NAME Adams Trust #1-33  
 O LOCATION  
 B COUNTY Meade  
 S STATE KS  
 I JOB DESCRIPTION Cement-New Well Casing/Pi  
 T JOB CONTACT

## EDI INVOICE

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE		
40401563	27462		Net - 30 days	12/30/2011		
			QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 11/27/2011 to 11/27/2011</i>						
0040401563						
AFE #/LOCATION # =414500;CONTACT ID =JEREMY; 171702200A Cement-New Well Casing/Pi 11/27/2011 8 5/8" Surface						
A-Con Blend		360.00	EA	13.95	5,022.00	T
Premium Plus Cement		150.00	EA	12.23	1,833.75	T
Calcium Chloride		1,299.00	EA	0.79	1,022.96	T
Celloflake		128.00	EA	2.78	355.20	T
C-51		68.00	EA	18.75	1,275.00	T
Guide Shoe - Regular - 8 5/8"		1.00	EA	285.00	285.00	T
Insert Float Valve - 8 5/8"		1.00	EA	210.00	210.00	T
Economizer Centralizer - 8 5/8"		4.00	EA	108.75	435.00	T
Canvas Basket - 8 5/8"		1.00	EA	787.50	787.50	T
Top Rubber Cement Plug - 8 5/8"		1.00	EA	168.75	168.75	T
Heavy Equipment Mileage		75.00	MI	5.25	393.75	T
Blending & Mixing Service Charge		510.00	MI	1.05	535.50	T
Proppant and Bulk Delivery Charge		600.00	MI	1.20	720.00	T
Depth Charge; 1001' - 2000'		1.00	EA	1,125.00	1,125.00	T
Plug Container Utilization Charge		1.00	EA	187.50	187.50	T
Pickup Mileage		25.00	MI	3.19	79.69	T
Service Supervisor		1.00	HR	131.25	131.25	T
PLEASE REMIT TO:		SEND OTHER CORRESPONDENCE TO:		SUB TOTAL	14,567.85	
BASIC ENERGY SERVICES,LP		BASIC ENERGY SERVICES,LP		TAX	694.15	
PO BOX 841903		PO BOX 10460		INVOICE TOTAL	15,262.00	
DALLAS, TX 75284-1903		MIDLAND, TX 79702				







PAGE	CUST NO	INVOICE DATE
1 of 1	1001945	12/05/2011
INVOICE NUMBER		
1717 - 90769478		

Liberal (620) 624-2277

B HUNTINGTON ENERGY  
 I 908 NW 71ST ST  
 L OKLAHOMA CITY  
 L OK US 73116  
 T  
 O ATTN: JENNY THOMPSON

J LEASE NAME Adams Trust #1-33  
 O LOCATION  
 B COUNTY Meade  
 S STATE KS  
 I JOB DESCRIPTION Cement-New Well Casing/Pi  
 T JOB CONTACT  
 E

## EDI INVOICE

JOB #	EQUIPMENT #	PURCHASE ORDER NO.		TERMS	DUE DATE
40403212	27462			Net - 30 days	01/04/2012
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 12/03/2011 to 12/03/2011</i>					
0040403212					
AFE #/LOCATION # =414500;CONTACT ID =JEREMY; 171702278A Cement-New Well Casing/Pi 12/03/2011 4 1/2" Longstring					
60/40 POZ		50.00	EA	9.00	450.00 T
AA2 Cement		490.00	EA	13.65	6,688.49 T
Gypsum		2,305.00	EA	0.56	1,296.56 T
Salt		2,714.00	EA	0.38	1,017.75 T
C-15		277.00	EA	9.38	2,596.88 T
C-42P		116.00	EA	6.00	696.00 T
Gilsonite		2,450.00	EA	0.50	1,231.13 T
Auto Fill Float Shoe - 4 1/2"		1.00	EA	247.50	247.50
Latch Down Plug & Baffle - 4 1/2"		1.00	EA	277.50	277.50
Econlmizer Centralizer - 4 1/2"		18.00	EA	52.50	945.00
Stop Collar - 4 1/2"		1.00	EA	60.00	60.00
Mud Flush		500.00	EA	0.65	322.50 T
CC-1		5.00	EA	33.00	165.00 T
Heavy Equipment Mileage		75.00	MI	5.25	393.75
Blending & Mixing Service Charge		540.00	MI	1.05	567.00
Proppant and Bulk Delivery Charge		630.00	MI	1.20	756.00
Depth Charge; 6001' - 7000'		1.00	EA	2,430.00	2,430.00
Plug Container Utilization Charge		1.00	EA	187.50	187.50
Pickup Mileage		25.00	MI	3.19	79.69
Service Supervisor		1.00	HR	131.25	131.25
PLEASE REMIT TO:		SEND OTHER CORRESPONDENCE TO:		SUB TOTAL	20,539.50
BASIC ENERGY SERVICES,LP		BASIC ENERGY SERVICES,LP		TAX	1,055.89
PO BOX 841903		PO BOX 10460		INVOICE TOTAL	21,595.39
DALLAS, TX 75284-1903		MIDLAND, TX 79702			



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

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

**FIELD SERVICE TICKET**

1717 02278 A

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

DATE OF JOB <b>12-3-11</b>	DISTRICT	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 <b>Huntington Energy</b>		LEASE <b>Adams Trust</b>					<b>1-33</b> WELL NO.
ADDRESS		COUNTY <b>Madison</b>					STATE <b>KS</b>
CITY	STATE	SERVICE CREW <b>J. Chao, Adam, Eddie, Shaun</b>					
AUTHORIZED BY <b>Tony Bennett</b>	<b>JRB</b>	JOB TYPE: <b>242 4 1/2 Long String</b>					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE <b>12-3-11</b> AM <b>1200</b> PM
<b>19820</b>	<b>12</b>	<b>304641</b>	<b>12</b>	<b>19828</b>	<b>12</b>	ARRIVED AT JOB	<b>12-3-11</b> AM <b>300</b> PM
		<b>19808</b>	<b>2</b>	<b>19883</b>	<b>2</b>	START OPERATION	<b>12-3-11</b> AM <b>400</b> PM
<b>27462</b>	<b>12</b>					FINISH OPERATION	<b>12-3-11</b> AM <b>850</b> PM
						RELEASED	<b>12-3-11</b> AM <b>955</b> PM
						MILES FROM STATION TO WELL	<b>25</b>

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 **Roger Pearson**  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

414500

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL103	60-410 POT	SK	50		600.00
CL105	AA2 Cement	SK	490		8918.00
CC113	Gypsum	LB	2305		1728.75
CC111	Salt	LB	2714		1357.00
CC103	C-15	LB	277		3462.50
CC107	C-42P	LB	116		928.00
CC201	Gilsonite	LB	2450		1641.50
CF1250	AFU Shoe	EA	1		330.00
CF6016	Latch Run Plug + Baffle	EA	1		370.00
CF4451	Centralizers 4 1/2	EA	18		1260.00
CF4103	Stop Collar	EA	1		80.00
CC151	Mud Push	SK	500		430.00
C706	CC-1	SK	5		220.00
E101	Heavy Equipment Mileage	mi	75		525.00
CE240	Blending & Mixing Charge	SK	540		756.00
E113	Bull Delivery Charge	tm	1030		1008.00
CE207	Depth Charge	4hrs	1		3240.00
CE504	Plug Container Charge	EA	1		250.00
E100	Pickup Mileage	mi	25		175.00
SUB TOTAL					<b>20539.50</b>

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE <b>Samuel Chao</b>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <b>Roger Pearson</b> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO.







