

Confidentiality Requested:

Yes No

### Kansas Corporation Commission Oil & Gas Conservation Division

1077299

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 #			API No. 15					
Name:			Spot Description:					
Address 1:			Sec	Twp S. R [	East West			
Address 2:			Feet	t from North / South	Line of Section			
City: Sta	ıte: Zip	D:+	Feet	t from East / West	Line of Section			
Contact Person:			Footages Calculated from Ne	earest Outside Section Corner:				
Phone: ()			□ NE □ NW	□ SE □ SW				
CONTRACTOR: License #			GPS Location: Lat:	, Long:				
Name:				g. xx.xxxxx) (e.	gxxx.xxxxx)			
Wellsite Geologist:			Datum: NAD27 N					
Purchaser:			County:					
Designate Type of Completion:			Lease Name:	Well #: _				
New Well Re-E	=ntrv	Workover	Field Name:					
	_		Producing Formation:					
☐ Oil ☐ WSW	SWD	SIOW	Elevation: Ground: Kelly Bushing:					
☐ Gas ☐ D&A	☐ ENHR	☐ SIGW	Total Vertical Depth:	Plug Back Total Depth:_				
OG  CM (Coal Bed Methane)	☐ GSW	Temp. Abd.	Amount of Surface Pipe Set a	and Cemented at:	Feet			
Cathodic Other (Core,	Evol etc.):		Multiple Stage Cementing Co					
If Workover/Re-entry: Old Well Info					Feet			
Operator:				nent circulated from:				
•			' '	w/				
Well Name: Original Comp. Date:			loot doptii to.	w/	ox ome.			
-	_	NHR Conv. to SWD						
Deepening Re-perf. Plug Back	Conv. to GS		Drilling Fluid Management (Data must be collected from the					
Commingled	Permit #:		Chloride content:	ppm Fluid volume:	bbls			
☐ Dual Completion	Permit #:		Dewatering method used:					
SWD	Permit #:		Location of fluid disposal if ha	auled offsite:				
ENHR	Permit #:		Operator Name:					
GSW	Permit #:			Licence #				
				License #:				
Spud Date or Date Read	ched TD	Completion Date or		TwpS. R				
Recompletion Date		Recompletion Date	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:								

Page Two



Operator Name:				Lease N	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	:					
	ow important tops of fo ing and shut-in pressu o surface test, along wi	res, whe	ther shut-in pre	ssure reacl	hed stati	c level, hydrosta	tic pressures, bo			
Final Radioactivity Logilles must be submitted						gs must be ema	iled to kcc-well-lo	ogs@kcc.ks.go	v. Digital	electronic log
Drill Stem Tests Taken (Attach Additional S	Ye	es No			3	on (Top), Depth a		Sample		
Samples Sent to Geol	ogical Survey	Ye	es 🗌 No		Nam	9		Тор	L	Datum
Cores Taken Electric Log Run		☐ Y€								
List All E. Logs Run:										
			CASING	RECORD	│ Ne	w Used				
		Repo				rmediate, producti	on, etc.			
Purpose of String	Size Hole Drilled		e Casing t (In O.D.)	Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used		and Percent dditives
Purpose	Depth					EEZE RECORD				
Purpose: Perforate	Top Bottom	Туре	of Cement	# Sacks Used Type and Percent Additives						
Protect Casing Plug Back TD										
Plug Off Zone										
Did you perform a hydrau	ilic fracturing treatment or	this well?	?			Yes	No (If No, sk	ip questions 2 ar	nd 3)	
	otal base fluid of the hydra		•		•			ip question 3)		
Was the hydraulic fractur	ing treatment information	submitted	to the chemical of	disclosure reg	gistry?	Yes	No (If No, fil	out Page Three	of the ACC	)-1)
Shots Per Foot			RD - Bridge Plug Each Interval Perl				cture, Shot, Cemen		d	Depth
TUBING RECORD:	Size:	Set At:		Packer At	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or ENH	R.	Producing Meth Flowing	nod:	g $\square$	Gas Lift C	other (Explain)			
Estimated Production Per 24 Hours	Oil Bl	bls.	Gas	Mcf	Wate	er Bl	ols.	Gas-Oil Ratio		Gravity
DIODOGITI	ON OF CAC			ACTUOD OF	COMPLE	TION		DDODUGT		
Vented Sold	ON OF GAS:  Used on Lease		N Open Hole	NETHOD OF $\Box$ Perf.	Dually	Comp. Con	nmingled	PRODUCTIO	λιν ιίΝ Ι ΕΚ\	/AL:
(If vented, Sub			Other (Specify)		(Submit A	ACO-5) (Subi	mit ACO-4)			

Form	CO1 - Well Completion						
Operator	Lasso Energy LLC						
Well Name	MCCLAREN 2						
Doc ID	1077299						

### All Electric Logs Run

MICROLOG- MLT
BORE HOLE VOLUME CALIPER LOG - BHV
PHASE INDUCTION SHALLOW FOCUS LOG - DIL
COMPENSATED NEUTRON PEL DENSITY LOG - POR-HIRES
CEMENT BOND LOG
DRILLER LOG
COMPOSITIE LOG - COMP

Form	ACO1 - Well Completion
Operator	Lasso Energy LLC
Well Name	MCCLAREN 2
Doc ID	1077299

### Tops

Name	Тор	Datum			
HEEBNER	4211	-1942			
TORONTO	4224	-1955			
DOUGLAS	4243	-1974			
BROWN LIME	4391	-2122			
LANSING	4408	-2139			
MUNCIE CREEK	4577	-2308			
LKC "H"	4583	-2314			
STARK	4677	-2408			
LKC" K"	4683	-2414			
HUSHPUCKNEY	4734	-2465			
BASE KANSAS CITY	4781	-2512			
MARMATON	4838	-2569			
PAWNEE	4898	-2629			
MYRICK STATION	4919	-2650			
FORT SCOTT	4948	-2679			
CHEROKEE	4958	-2689			
MISSISSIPPIAN(CHERT)	5040	-2771			
MISSISSIPPIAN(LIME)	5072	-2803			
KINDERHOOK	5310	-3041			
VIOLA	5333	-3064			
SIMPSON	5487	-3218			
SIMPSON SAND(LOWER)	5595	-3326			
ARBUCKLE	5609	-3340			



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

# FIELD SERVICE TICKET 1718 05822 A

PRESSURE PUMPING & WIRELINE DATE TICKET NO.

DATE OF JOB 03-24-12 DISTRICT PAUT K						NEW WELL	OLD   F	PROD INJ	□ WDW	CI	JSTOMER RDER NO.:	
CUSTOMER LASSO - ENCROY						LEASE MICLARIA 2 WELL NO.						
						COUNTY KINGS STATE &						
CITY			STATE	The street	Tarl.	SERVICE CREW O						
AUTHORIZED B	v		OWNE	And the second	A SE	JOB TYPE:	Carbon March	16000, 17	INGUET,	1200	well	
EQUIPMENT	10.00	HRS	EQUIPMENT#	HRS	EQI	JIPMENT#	HRS	TRUCK CAL	UFD -	DATI	E AM PM	TIME
19889/198	13	25/						ARRIVED AT	3 64	12	AM .	100
19831/198	67	55.			7 (20)			START OPE	/			06
37900	40 0							FINISH OPE		)	AM PM	401
								RELEASED	/	/	AM PM	45
							7# 1	MILES FROM	M STATION TO	WELL		7)
41		CON	TRACT CONDITIONS: (This	contract mus	at be signed	d before the job is	commence	ed or merchandis	se is delivered).		70	
		orized to	execute this contract as an ag of and only those terms and of	gent of the ci	ustomer. A	s such, the under	signed agre	es and acknowl	ledges that this cor			
become a part of th	is contra	act withou	t the written consent of an off	icer of Basic	Energy Se	rvices LP.			1	20	1	
								(WELL OWN	ER, OPERATOR, O	CONTI	RACTOR OR	AGENT)
ITEM/PRICE REF. NO.		N	MATERIAL, EQUIPMENT	AND SERV	ICES US	ED	UNIT	QUANTITY	UNIT PRICE		\$ AMOU	TNL
CP 105	AN	200	1				295	285		3 5 9		
CP 105	1000000	2,00	THE RESERVE TO SERVE THE PROPERTY OF THE PARTY OF THE PAR				50	50				
CC 105		4,2					16	63				
CC 111	SAL	7			2 3900		16	1691				
cc 112	Ch	7 7	Whi Retar	100055701			16	95				
CC 129	74	4-5	327				16	158				
CC 201	611	S CVAL 2		1 10	517		16	1675				
CF 607	6-123	TON	Down Plig 1	Alle .	277		91	/				
CF 1651		1 1	Chi Store				51	1		5- A-1-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* *
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						TERIALS			X ON \$			
							1	k gu	) то	TAL		
				1				1				
										7		

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

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



### TREATMENT REPORT

Customer	ASSO.	TUF	29 9	Lease No.						Date								
Looco	CCLAKE		•		W	/ell # Z	-						0.2	- 24	1 -	12		
Field Order #	Station	Pier	17	KS				Casing,	12	Depth	680'	County	K	in House A			State	LC.
Type Joh							-			rmation		•		Legal De	escrip	otion	18	·
PIPE DATA PERFORATING					NG	DATA		FLUID	USED			Т	REA	TMENT				
Casing Size	Tubing Size	e Sh	nots/Ft				Acid	Acid				RATE	PRE	SS	IS	IP		
Depth 6X0	Depth	Fr	om		То		Pre l	Pad			Max			··	51	Min.		
Volume 1/2	Volume	Fr	om		То		Pad				Min				10	Min.		
Max Press	Max Press	Fr	om		То		Frac	,			Avg				15	Min.		-
Well Gonnectio	n Annulus Vo	ol. Fr	om		То						HHP Use	d			An	inulus Pre	essure	e .
Plug Depth	Packer De	oth Fr	om		То		Flusi				Gas Volu					tal Load		
Customer Rep	resentative	_				Station	Mana	ger /	DAUE	50	04	Treat	ter /	Cort	کہے ک	4///	<u> </u>	
Service Units	37900	198	89	1984	3	1983	//	1862							$\downarrow$			
Driver Names	Cullina	ni A	6911	02	,	Bo	)ue	21.										
Time	Casing Pressure	Press	_	Bbls.		ped	F	Rate	_					ce Log				
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PAGE	CUST NO	INVOICE DATE					
1 of 1	1006916	03/16/2012					
INVOICE NUMBER							
1718 - 90856378							

Pratt

(620) 672-1201

B LASSO ENERGY LLC

PO BOX 465

L CHASE

KS US 67524

o ATTN:

ALISHA GRAHAM

McClaren LEASE NAME

LOCATION

COUNTY Kiowa

KS STATE

Ţ Cement-New Well Casing/Pi JOB DESCRIPTION

JOB CONTACT

ЈОВ #	EQUIPMENT #	PURCHASE	ORDER NO.		TE	erms	DUE DATE
40441444	19905				Net -	30 days	04/15/2012
			ÖTY	U of M	UNIT	PRICE	INVOICE AMOUNT
For Service Dates	: 03/14/2012 to 03/	14/2012					
0040441444							
171804316A Ceme Cement 8 5/8" Surfa	nt-New Well Casing/Pl 03, see	/14/2012					
A Serv Lite			140.00			10.27	
Common Cament			150.00			12.64	
Celloflake			73,00			2.92	
Calcium Chloride			648.00			0.83	1
"Top Rubber Cmt Pic			1.00		THE PARTY OF	177.76	
"Unit Mileage Chg (P			40.00	MI		3.36	
Heavy Equipment Mi	<del>-</del> -		80.00			5.63	
"Proppant & Bulk Do			526.00			1,26	
Depth Charge; 0-600			1.00	EA		790.00	
Blending & Mixing Se			290.00			1.11	
Plug Container Util. (			1.00	EA		197,50	
"Service Supervisor,	first 8 hrs on loc.		1,00	EA		138.26	138.25
						}	

PLEASE REMIT TO:

SEND OTHER CORRESPONDENCE TO:

BASIC ENERGY SERVICES, LP PO BOX 841903

BASIC ENERGY SERVICES, LP PO BOX 10460 MIDLAND, TX 79702

SUB TOTAL

TAX

**~**℃≤ 6,950.50 298.18

DALLAS, TX 75284-1903

INVOICE TOTAL

7,248,68



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

# FIELD SERVICE TICKET 1718 04316 A

PRESSURE PUMPING & WIREUNE 5-305-	18W DATE TICKET NO.
DAJEBOE 3-14-12 DISTRICT Pratt, Transas W	EL C WELLIPROD LINJ LIMBY LISHENER
CUSTOMER LASSO Energy, LLC LE	EASE McClaren WELL NO. 2
ADDRESS	OUNTY Tiowa STATE Tansas
	ERVICE CREWC. MESSich: M. Mattal: J. Bowers
AUTHORIZED BY JO	OBTYPE.C. N. W Surface
EQUIPMENT# HAS EQUIPMENT# HAS EQUIPM	
37,216 1	ARRIVED AT JOB
10 002 10 00C 1	START OPERATION START 6:00
19,903-19,905-1	FINISH OPERATION / SMP T:00
19.831-19.862 1	RELEASED 3-14-12 98 7:15
	MILES FROM STATION TO WELL 40

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 **S AMOUNT** MATERIAL, EQUIPMENT AND SERVICES USED UNIT QUANTITY UNIT PRICE CP 106 ite ⊂omeni A Serv 400 Common Cement Cellflate <u>70</u> Calcium Chloride CC (09 22500 Top Rubber Plug, 85/8" <u>CF105</u> Pickup Mileage 40 560bo Heavy Equipment Mileage ΔŊ.i Sement Pump: OFeet To 500Feet Blending and Mixing Service Plug Container 000 406 5h 250 500 Servico Supervisor 5*00*3 hrs SUB TOTAL 6.950 50 CHEMICAL / ACID DATA: %TAX ON \$ SERVICE & EQUIPMENT MATERIALS %TAX ON \$ TOTAL

SERVICE REPRESENTATION R. M. SQUE

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

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



### TREATMENT REPORT

Customer A 5 5	_ر	Lease No.						Oate		: 1	Ц	- 1						
Lease Mc		Well # 2								) <del>-</del>			بلحب					
Field Grder#	Station	at	<u> </u>	a I	1 <del>5</del> 95		95 P	_	3 Lb.		Coun	ty	Tien			an <u>5</u> 95		
Type Job	N.W	fac			1			15gal D	88	<u>°°  8 </u>	N							
PIPE	E DATA	PERF	ORAT	LI <b>M</b>	gement -				D			TREATMENT RESUME						
85/812 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Shots/Ft					ASer,				895				LENMChleride,		
<sup>0</sup> 57 7 F			From .25L		<u>b</u> e/	skc	el II	alte /	<u> 13.</u>	416/	Max	8.24	Gal	./s/c,	[5 M		FT. Ish.	
<u> </u>			From		Τα		7400	<b>1000</b>		Min					10 Min.			
<sup>M</sup> 4*\$ <i>6</i> **P.s			From 150		<u>sachsC</u>		o M Mo			mwith 220		alciunc		hloridd		35Lb/sh.cellfla		
Mall Connection	nnection Annulus Vol.		From		То		15.6			Sal, 5.2 3 6 at			<u>ہاد</u> ک	0 CU.	U. f Annulus Pressure			
5527 <u>F</u> =			From		То			Flush 32 Bl										
Customer Rep	oresentative	Val	<u> </u>			<del> </del>	n Manag	<u>°r Da</u>	<u> vie</u>	<u>  Scc</u>	<u> </u>	_  <u>C</u>	lare	nce f	ζ.Μ	<u>e55 </u>	<u>= hr</u>	
Service Units Driver		73'8		19'8	<u>05</u>			1.862	ļ						-			
Names (I) e	ms Melssich I I alta			<u> </u>			er5	-										
	Pressure Pressure Bbls. F				oumpod Rato			nd hold safety meeting. Casing in well and										
5:00				<u> </u>	رحر	<u>15-90</u>	locat	ions				1		/	_		Nell and	
(										rig circulating upon arrival.								
6:00	300		<del></del>		7			5		Start Fresh Water Pre-Flus						_		
			<del></del>		<u> </u>	<u> </u>				Start Mixing 140 Sacks A Seru Lite cem								
				51		5		start Mixing 150 sacts Common Ce										
	-0-		8		3					Stopmixing Shutin well Release Top								
/												g. Open well.						
6:15	<u> 200 </u>							5		Start Frosh water Displacement							<u> </u>	
6:25	450	<u>io   3</u>			3.	ــــــــــــــــــــــــــــــــــــــ			뱐	lug c	nwork	_5h-	Shut in well.					
								Circulated 10 sacts coment to pit										
								Wash up pumptruch. Tob Complete. Thank You. Clarence, Mikre, Justin										
<u>C:00</u>	<u> </u>								) op Complete.									
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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/

Sam Brownback, Governor

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

March 26, 2012

BRUCE KELSO Lasso Energy LLC PO Box 465 Chase, KS 67524

Re: ACO1 API 15-097-21719-00-00 MCCLAREN 2 SE/4 Sec.05-30S-18W Kiowa 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, BRUCE KELSO

