



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1082392  
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: \_\_\_\_\_

1082392

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](mailto: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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
--	---

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> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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PAGE 1 of 1	CUST NO 1004409	INVOICE DATE 05/14/2012
INVOICE NUMBER <b>1718 - 90904060</b>		

Pratt (620) 672-1201

B VAL ENERGY  
I 200 W DOUGLAS AVE STE 520  
L WICHITA  
L KS US 67202  
T  
O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Talbott 7-9  
O LOCATION  
B COUNTY Barber  
S STATE KS  
I JOB DESCRIPTION Cement-New Well Casing/Pi  
T JOB CONTINUED  
E

**RECEIVED**

MAY 16 2012

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
40463278	20920		Net - 30 days	06/13/2012	
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 05/13/2012 to 05/13/2012</i>					
0040463278 <span style="float: right;">9208-7</span>					
171806407A Cement-New Well Casing/Pi 05/13/2012					
<u>Cement 8 5/8" Surface</u>					
60/40 POZ		190.00	EA	9.60	1,824.00 T
Celloflake		48.00	EA	2.96	142.08 T
Calcium Chloride		492.00	EA	0.84	413.28 T
"Wooden Cmt Plug, 8 5/8" ""		1.00	EA	128.00	128.00
"8 5/8" "" Basket (Blue)"		1.00	EA	252.00	252.00
"Unit Mileage Chg (PU, cars one way)"		45.00	MI	3.40	153.00
Heavy Equipment Mileage		90.00	MI	5.60	504.00
"Proppant & Bulk Del. Chgs., per ton mil		369.00	EA	1.28	472.32
Depth Charge; 0-500'		1.00	EA	800.00	800.00
Blending & Mixing Service Charge		190.00	BAG	1.12	212.80
Plug Container Util. Chg.		1.00	EA	200.00	200.00
"Service Supervisor, first 8 hrs on loc.		1.00	EA	140.00	140.00

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	5,241.48
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	173.69
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	<b>5,415.17</b>
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



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

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

FIELD SERVICE TICKET

1718 06407 A

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

DATE OF JOB 5-13-12		DISTRICT 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 Val Energy, FNL				LEASE TalBOTT		7-9		WELL NO.	
ADDRESS				COUNTY Barber		STATE KS			
CITY				STATE		SERVICE CREW Wright Phye Sullivan Mclsaon			
AUTHORIZED BY				JOB TYPE: CNW 8 5/8 Surface					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
33708-20920	25						5-12		5:00
14960 14918	25					ARRIVED AT JOB	5-12	AM/PM	7:00
37400						START OPERATION	5-12	AM/PM	7:20
37586						FINISH OPERATION	5-12	AM/PM	9:45
						RELEASED	5-12	AM/PM	10:30
						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: Randy Smith  
(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	SK	190		2,280.00
CC 102	cell of lake	lb	48		177.60
CC 442	calcium chloride	lb	492		516.00
CF 153	Wooden Plyg	eq	1		1600.00
CF 1903	8 5/8 BASKET	eq	1		315.00
E 100	Pickup Mileage	mi	45		191.25
E 101	Heavy Mileage	mi	90		630.00
E 113	Bulk Delivery	TM	369		590.40
CE 200	Depth Charge	4hr	1		1,000.00
CE 240	Mixing Charge	5/5	190		266.00
CE 504	Plyg Container	JOB	1		250.00
S 003	Supervisor	eq	1		175.00

CHEMICAL / ACID DATA:			

SUB TOTAL		DLS	5,241.40
SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL			

*Mark Lee*

SERVICE REPRESENTATIVE <u>[Signature]</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Randy Smith</u> (WELL OWNER OPERATOR, CONTRACTOR OR AGENT)
FIELD SERVICE ORDER NO. <u>[Signature]</u>	



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

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

**FIELD SERVICE TICKET**

1718 00407 A

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

DATE OF JOB		DISTRICT		NEW WELL <input type="checkbox"/> OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:		
CUSTOMER				LEASE				WELL NO.		
ADDRESS				COUNTY				STATE		
CITY				STATE		SERVICE CREW				
AUTHORIZED BY				JOB TYPE:						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
						ARRIVED AT JOB				
						START OPERATION				
						FINISH OPERATION				
						RELEASED				
						MILES FROM STATION TO WELL				

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)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
10	1/2" GALV. PIPE	EA	100		2,200.00
11	3/4" GALV. PIPE	EA	7		1,100.00
12	1" GALV. PIPE	EA	10		700.00
13	2" GALV. PIPE	EA	1		1,000.00
14	3" GALV. PIPE	EA	1		300.00
15	4" GALV. PIPE	EA	1		1,100.00
16	5" GALV. PIPE	EA	1		600.00
17	6" GALV. PIPE	EA	1		700.00
18	7" GALV. PIPE	EA	1		1,000.00
19	8" GALV. PIPE	EA	1		200.00
20	9" GALV. PIPE	EA	1		300.00
21	10" GALV. PIPE	EA	1		1,750.00

CHEMICAL / ACID DATA:			

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

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

FIELD SERVICE ORDER NO. \_\_\_\_\_ (WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer <i>Val Energy, INC</i>	Lease No.	Date <i>5-12-2012</i>
Lease <i>Tal Bott</i>	Well # <i>7-9</i>	
Field Order # <i>6407</i>	Station <i>Pratt</i>	Casing <i>8 5/8</i>
		Depth <i>225</i>
Type Job <i>CNW 8 5/8 SF</i>	Formation <i>TD</i>	County <i>Barber</i>
		State <i>KS</i>
		Legal Description <i>9-34-11</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>8 5/8</i>	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth <i>225</i>	Depth	From	To	Pre Pad	Max			5 Min.
Volume <i>13</i>	Volume	From	To	Pad	Min			10 Min.
Max Press <i>500</i>	Max Press	From	To	Frac	Avg			15 Min.
Well Connection <i>P.C.</i>	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth <i>210</i>	Packer Depth	From	To	Flush	Gas Volume			Total Load

Customer Representative	Station Manager <i>D. SCOTT</i>	Treater <i>Joe Nelson - [Signature]</i>
-------------------------	------------------------------------	--

Service Units	<i>33765</i>	<i>19950</i>	<i>37900</i>	<i>37580</i>					
Driver Names	<i>Wright</i>	<i>Phye</i>	<i>Sullivan</i>	<i>Nelson</i>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>7:</i>					<i>on location - safety meeting</i>
					<i>Run 5 JT. 24/16 case</i>
					<i>Basket on Bottom of 1st JT</i>
<i>9:10</i>					<i>Casing on Bottom</i>
<i>9:15</i>					<i>Break Circulation with Big</i>
<i>9:20</i>	<i>150</i>		<i>40</i>	<i>4.5</i>	<i>Mix 190 S/K 60/40 P02 with add.</i>
					<i>Shut Down - Release Plug</i>
			<i>13</i>	<i>4</i>	<i>Start H2O Displacement</i>
					<i>Cement TOS 4" Seal</i>
<i>9:45</i>	<i>200</i>		<i>13</i>		<i>Plug Down <del>HDD</del></i>
					<i>circled 10 1/2" cut to Pit</i>
					<i>50B Complete</i>
					<i>Thank you</i>



PAGE 1 of 1	CUST NO 1004409	INVOICE DATE 05/17/2012
INVOICE NUMBER <b>1718 - 90907318</b>		

Pratt (620) 672-1201  
 B VAL ENERGY  
 I 200 W DOUGLAS AVE STE 520  
 L WICHITA  
 L KS US 67202  
 T  
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Talbott 7-9  
 O LOCATION  
 B COUNTY Barber  
 S STATE KS  
 I JOB DESCRIPTION Cement-New Well Casing/Pi  
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40464624	27463	9308	Net - 30 days	06/16/2012

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 05/16/2012 to 05/16/2012</i>				
0040464624				
171806144A Cement-New Well Casing/Pi 05/16/2012 Cement 5 1/2" Longstring				
AA2 Cement	100.00	EA	13.60	1,360.05 T
60/40 POZ	50.00	EA	9.60	480.02 T
C-41P	24.00	EA	3.20	76.80 T
Salt	455.00	EA	0.40	182.01 T
C-44	94.00	EA	4.12	387.29 T
FLA-322	76.00	EA	6.00	456.02 T
Gilsonite	500.00	EA	0.54	268.01 T
"Top Rubber Cmt Plug, 5 1/2" ""	1.00	EA	84.00	84.00
"Guide Shoe - Regular. 5 1/2" (Blue)"	1.00	EA	200.01	200.01
Flapper Type Insert Float Valves, 51/2"	1.00	EA	172.01	172.01
"Turbolizer, 5 1/2" (Blue)"	5.00	EA	88.00	440.02
"5 1/2" Basket (Blue)"	1.00	EA	232.01	232.01
"Unit Mileage Chg (PU, cars one way)"	45.00	MI	3.40	153.01
Heavy Equipment Mileage	90.00	MI	5.60	504.02
"Proppant & Bulk Del. Chgs., per ton mil	308.00	EA	1.28	394.25
Depth Charge; 4001'-5000'	1.00	EA	2,016.06	2,016.06
Blending & Mixing Service Charge	150.00	BAG	1.12	168.01
Plug Container Util. Chg.	1.00	EA	200.01	200.01
"Service Supervisor, first 8 hrs on loc.	1.00	EA	140.01	140.01
Super Flush II	500.00	EA	1.22	612.02 T

**RECEIVED**  
MAY 19 2012

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	8,525.64
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	279.02
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	8,804.66
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



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

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

FIELD SERVICE TICKET  
1718 06144 A

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

DATE OF JOB 5-16-17 DISTRICT 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 Val Energy		LEASE Talbott WELL NO. 79							
ADDRESS		COUNTY Barber STATE KS							
CITY STATE		SERVICE CREW Orlando, Mitchell, PHUE							
AUTHORIZED BY		JOB TYPE: CNW-5 1/2 L.S.							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE 5-16-17	AM	TIME 5:00
27283	1					ARRIVED AT JOB		AM	7:30
27463	1					START OPERATION		AM	11:00
<del>19831-19832</del>	*					FINISH OPERATION		AM	12:00
19831-19862	1					RELEASED		AM	12:30
						MILES FROM STATION TO WELL			45

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SIGNED: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP105	MAA Cement	SK	100		1700.00
CP103	60/40 P02	SK	50		600.00
CC105	C-411P	Lb	24		96.00
CC111	Salt	Lb	455		227.50
CC115	C-44	Lb	94		484.00
CC129	FLN-302	Lb	76		570.00
CC201	Gilsonite	Lb	500		335.00
CS-103	Top Rubber plug 5 1/2"	ea	1		105.00
CS-251	Guide Shoe Regular 5 1/2"	ea	1		250.00
CS-1451	Clapper Type Insert 5 1/2"	ea	1		215.00
CS-1651	Turbolizer 5 1/2"	ea	5		550.00
CS-1701	Basket 5 1/2"	ea	1		290.00
CC155	Superfish II	gal	500		765.00
E100	Pickup Mileage	mi	45		191.25
E101	Heavy Equipment Mileage	mi	90		630.00
E113	Bulk Delivery	Tr	308		493.20
CE205	Depth Change 4001-5000	ea	1		2520.00
CE240	Bleed out mixing	SK	150		210.00
CE504	Plug Cost	ea	1		250.00
5003	Service Supervisor	ea	1		175.00
SUB TOTAL					175.00
DLS					8525.64
SERVICE & EQUIPMENT				%TAX ON \$	
MATERIALS				%TAX ON \$	
TOTAL					

CHEMICAL / ACID DATA:			

SERVICE REPRESENTATIVE Steve [Signature]	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: _____ (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
--	--

FIELD SERVICE ORDER NO.





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

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

FIELD SERVICE TICKET  
1718 00111 A

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

DATE OF JOB		DISTRICT		NEW WELL <input type="checkbox"/>		OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/>		INJ <input type="checkbox"/>		WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER				LEASE				WELL NO. 7							
ADDRESS				COUNTY				STATE							
CITY				STATE				SERVICE CREW							
AUTHORIZED BY				JOB TYPE:											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
						ARRIVED AT JOB									
						START OPERATION									
						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 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
					1700.00
					600.00
					96.00
					227.50
					424.10
					570.00
					335.00
					105.00
					250.00
					315.00
					550.00
					290.00
					76.00
					171.00
					130.00
					47.20
					320.00
					210.00
					20.00
					175.00

SUB TOTAL  
DLS

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer Val Energy	Lease No.	Date 3-16-11
Lease Tulbelle	Well # 7-9	
Field Order #	Station Pratt	Casing 2 7/8
	Depth 11233	County Butler
Type Job Cement Stucco	Formation	Legal Description 3-31-11

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 2 7/8	Tubing Size 2 1/2	Shots/Ft 100	From 500	To 500	Acid AA2 cement	Rate 1.36	Press	ISIP 5 Min.
Depth 11233	Depth	From	To	To	Pre Pad 60/40/60 R119/11	Max		10 Min.
Volume	Volume	From	To	To	Pad	Min		15 Min.
Max Press	Max Press	From	To	To	Frac	Avg		Annulus Pressure
Well Connection	Annulus Vol.	From	To	To		HHP Used		Total Load
Plug Depth	Packer Depth	From	To	To	Flush	Gas Volume		

Customer Representative Dustin	Station Manager Drew Scott	Treater Steve (Orlando)
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Service Units 2222, 2246, 1101, 1100	Driver Names C. ...
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
7:50 AM					On location, safety meeting
					Run 1100 ft 5/8 13.5" / 10
					Conductivity 1-3 5-7-10
					Barrel #8 510 min. 2087
					Conductivity Buffer
					Back on well
11:17	300		1.7	5/6	Super Start II
11:17	300		5	5/6	1120 spacer
11:18	250		24.0	5/6	Mix 100% AA2 cement 13.3" / 61
					Shut down (low pump rate)
					Return pump
11:27	0		4	6	Start 1120 displacement
11:41	350		75	5	1120 spacer
11:45	450		100	4	Slow Rate
11:45	7500		1116	4	Plug down - 11 1/2
					Plug 10 1/2" 11 1/2" / 3000 60 min
					Conductivity 11 1/2"
					Job complete
					Steve

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

July 17, 2012

TODD ALLAM  
Val Energy, Inc.  
200 W DOUGLAS AVE STE 520  
WICHITA, KS 67202-3005

Re: ACO1  
API 15-007-23869-00-00  
TALBOTT 7-9  
SE/4 Sec.09-34S-11W  
Barber 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,  
TODD ALLAM