



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1082396
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: _____

1082396

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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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PAGE 1 of 1	CUST NO 1004409	INVOICE DATE 05/07/2012
INVOICE NUMBER 1718 - 90897875		

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 **Nittler 1-9**
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

RECEIVED

SURFACE

PURCHASE ORDER NO.
 MAY 10 2012
 9208

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40460754	19905	9208	Net - 30 days	06/06/2012

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 05/06/2012 to 05/06/2012</i>				
0040460754				
171806124A Cement-New Well Casing/Pi 05/06/2012				
Cement 8 5/8" Surface				
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
Sugar	100.00	EA	1.60	160.00 T
"Unit Mileage Chg (PU, cars one way)"	35.00	MI	3.40	119.00
Heavy Equipment Mileage	70.00	MI	5.60	392.00
"Proppant & Bulk Del. Chgs., per ton mil	287.00	EA	1.28	367.36
Depth Charge; 0-500'	1.00	EA	800.00	800.00
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
Blending & Mixing Service Charge	190.00	BAG	1.12	212.80

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	4,898.52
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	185.37
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	5,083.89
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 00124 A

9-315-13W

DATE _____ TICKET NO. _____

DATE OF JOB 5-6-12 DISTRICT Pratt, Kansas		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, Incorporated		LEASE Nittler WELL NO. 1-9							
ADDRESS		COUNTY Barber STATE Kansas							
CITY STATE		SERVICE CREW C. Messick: M. Mattal: J. Pierson							
AUTHORIZED BY		JOB TYPE: C.N.W. - Surface							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
37,216	.5						5-5-12	AM	9:00
						ARRIVED AT JOB	5-6-12	AM	12:00
19,903-19,905	.5					START OPERATION		AM	5:00
						FINISH OPERATION		AM	5:30
19,831-19,862	.5					RELEASED	5-6-12	AM	5:45
						MILES FROM STATION TO WELL			35

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
P CP 103	60/40 Poz Cement	skt	190		\$ 2,280 00
P CC 102	Cellflite	Lb	48		\$ 177 60
P CC 109	Calcium Chloride	Lb	492		\$ 516 60
P CF 153	Wooden Plug, 8 7/8"	ea	1		\$ 160 00
P CC 131	Sugar	Lb	100		\$ 200 00
P E 100	Pickup Mileage	mi	35		\$ 148 75
P E 101	Heavy Equipment Mileage	mi	70		\$ 490 00
P E 113	Built Delivery	tm	287		\$ 459 20
P CE 200	Pump Charge: 0 Feet To 500 Feet	hrs	4		\$ 1,000 00
P CE 240	Blending and Mixing Service	skt	190		\$ 266 00
P CE 504	Plug Container	Job	1		\$ 250 00
P S 003	Service Supervisor	hrs	8		\$ 175 00

SUB TOTAL
DLS \$ 4,898 52

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: *Arlene R. Messick* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Randy Smith*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 0000 A

9-31-13 W

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. 1-1							
ADDRESS	COUNTY	STATE								
CITY	STATE	SERVICE CREW:								
AUTHORIZED BY	JOB TYPE: C.W. - Water									
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
	10/40 L = Cement	EA	110		\$ 2,280.00
	10/40 L = Cement	LB	4		\$ 177.60
	10/40 L = Cement	LB	4		\$ 516.60
	10/40 L = Cement	EA	1		\$ 160.00
	10/40 L = Cement	EA	100		\$ 200.00
	10/40 L = Cement	EA	136		\$ 148.85
	10/40 L = Cement	EA	70		\$ 490.00
	10/40 L = Cement	EA	237		\$ 459.20
	10/40 L = Cement	EA	4		\$ 1,000.00
	10/40 L = Cement	EA	170		\$ 266.00
	10/40 L = Cement	EA	1		\$ 250.00
	10/40 L = Cement	EA	1		\$ 175.00

CHEMICAL / ACID DATA:			

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

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

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer Val Energy, Incorporated	Lease No.	Date 5-6-12
Lease Nittler	Well # 1-9	
Field Order # 6124	Station Pratt, Kansas	Casing 8 5/8" Depth 230 Feet
Type Job C.N.W. - Surface	County Barber	State Kansas
	Formation	Legal Description 9-315-13W

PIPE DATA		PERFORATING DATA		CEMENT USED		TREATMENT RESUME	
Casing Size 8 5/8"	Tubing Size 2 1/2"	Shots/Ft 190	From 560	To 40	Poz with 25 Gal.	DATE	PRESS
Depth 230 Feet	Depth	From	To 38	Calcium Chloride	Max 25 Lb./St.	cell	ISIP 15 Min.
Volume 4.6 Bbl.	Volume	From	To 14.8	Gal., 5.18	Gal./St., 1.2	CU. Ft./St.	10 Min.
Max Press 400 P.S.I.	Max Press	From	To		Avg		15 Min.
Well Connection Plug on Annulus	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth 210 Feet	Packer Depth	From	To	Flush 13.5 Bbl.	Fresh Water	Gas Volume	Total Load

Customer Representative Randy Smith Station Manager David Scott Treater Clarence R. Messick

Service Units	37,216	19,903	19,905	19,831	19,862				
Driver Names	Messick	Mattal	Pierson						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
12:00					Truck on location and hold safety meeting.
3:45					Val Drilling start to run 5 Joints new 24 Lb./Ft. 8 5/8" casing.
4:45					Casing in well. Circulate for 5 minutes.
4:52	250			5	Start Fresh water Pre-Flush.
	275		10	5	Start mixing 190 sacts 60/40 Poz cement.
	-0-		51		Stop pumping. Shut in well. Release Wooden Plug. Open Well.
5:02	100			5	Start Fresh water Displacement.
5:07	400		13.5		Plug down. Shut in well. Circulated 10 sacts cement to the pit.
					Wash up pump truck.
5:30					Job Complete. Thank You. Clarence, Mite, Jesse



RECEIVED

MAY 14 2012

PAGE 1 of 1	CUST NO 1004409	INVOICE DATE 05/11/2012
INVOICE NUMBER 1718 - 90902819		

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 Nittler 1-9
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 E JOB CONTACT

9308

JOB #	EQUIPMENT #	PURCHASE ORDER NO.		TERMS	DUE DATE
40462673	20920			Net - 30 days	06/10/2012
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 05/10/2012 to 05/10/2012</i>					
0040462673					
171806065A Cement-New Well Casing/Pi 05/10/2012 Cement 5 1/2 Longstring					
AA2 Cement		100.00	EA	13.60	1,359.95 T
60/40 POZ		50.00	EA	9.60	479.98 T
C-41P		24.00	EA	3.20	76.80 T
Salt		455.00	EA	0.40	181.99 T
C-44		94.00	EA	4.12	387.27 T
FLA-322		76.00	EA	6.00	455.98 T
Gilsonite		500.00	EA	0.54	267.99 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	199.99	199.99
Flapper Type Insert Float Valves, 5 1/2"		1.00	EA	171.99	171.99
"Turbolizer, 5 1/2" (Blue)"		5.00	EA	88.00	439.98
"5 1/2" Basket (Blue)"		1.00	EA	231.99	231.99
Super Flush II		500.00	EA	1.22	611.98 T
"Unit Mileage Chg (PU, cars one way)"		35.00	MI	3.40	119.00
Heavy Equipment Mileage		70.00	MI	5.60	391.98
"Proppant & Bulk Del. Chgs., per ton mil		240.00	EA	1.28	307.19
Depth Charge; 4001'-5000'		1.00	EA	2,015.93	2,015.93
Blending & Mixing Service Charge		150.00	BAG	1.12	167.99
Plug Container Util. Chg.		1.00	EA	199.99	199.99
"Service Supervisor, first 8 hrs on loc.		1.00	EA	139.99	139.99

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	8,291.96
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	279.00
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	8,570.96
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 00065 A

DATE _____ TICKET NO. _____

DATE OF JOB: 05-10-12 DISTRICT: PRATT KS		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: VFL 20294		LEASE: NI TILER 1-9 WELL NO.:							
ADDRESS:		COUNTY: BARBER STATE: KS							
CITY: STATE:		SERVICE CREW: Sullivan, Wright, Myrdal							
AUTHORIZED BY:		JOB TYPE: CW 4 5/2 hours							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
33208-20920	1						5-10-12	PM	1:00
19826-19860	1					ARRIVED AT JOB		AM	6:00
37900						START OPERATION		AM	9:30
						FINISH OPERATION		AM	10:30
						RELEASED		AM	11:30
						MILES FROM STATION TO WELL			35

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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
CP 105	AA-2 cut	SK	100		1,700.00
CP 103	60/40 POC cut	SK	50		600.00
CC 105	C-41 P	lb	24		96.00
CC 111	SALT	lb	45		227.50
CC 115	C-44	lb	94		484.10
CC 129	FLA 372	lb	26		570.00
CC 301	g-lonite	lb	500		335.00
CF 103	TOP Ribbon Plug 5/12	SA	1		105.00
CF 251	Guide Shoe	SA	1		250.00
CF 451	INSON 7 Flant	SA	1		215.00
CF 1051	Cost.	SA	5		550.00
CF 1701	BAKed	SA	1		290.00
CC 155	Super Fluid	gal	500		705.00
E 100	pickup mixing	m	35		149.75
E 101	Went out m	m	70		490.00
E 113	Beath Defog	FM	240		383.60
CE 205	Drill pipe 4000-5000'	SA	1		2,520.00
CE 240	Blowby - mixing	SK	150		210.00
CE 304	Play Container Packed	SA	1		250.00
S 003	Square S. Pipe	SA	1		175.00
SUB TOTAL					8,291.90
ALS					
CHEMICAL / ACID DATA:					
SERVICE & EQUIPMENT					%TAX ON \$
MATERIALS					%TAX ON \$
TOTAL					

Thank you

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

FIELD SERVICE ORDER NO. _____



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 00005 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: 9301						
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
					1700.00
					600.00
					200.00
					121.00
					450.00
					300.00
					300.00
					200.00
					300.00
					300.00
					200.00
					700.00
					140.00
					400.00
					300.00
					2,500.00
					200.00
					200.00
					100.00
SUB TOTAL					1170.00
865					
SERVICE & EQUIPMENT				%TAX ON \$	
MATERIALS				%TAX ON \$	
TOTAL					

CHEMICAL / ACID DATA:			

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

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

Customer VAL-ENERGY	Lease No.	Date 05-10-11	
Lease NITLER	Well # 1-9		
Field Order # 6065	Station Pratt KS	Casing 5 1/2	Depth 4430'
Type Job CNW 5 1/2 long string	Formation	County BARBER	State KS
		Legal Description 9-31-13	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 5 1/2	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth 4430	Depth	From	To	Pre Pad		Max		5 Min.
Volume 105	Volume	From	To	Pad		Min		10 Min.
Max Press 1500	Max Press	From	To	Frac		Avg		15 Min.
Well Connection P.C.	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth 4410'	Packer Depth	From	To	Flush		Gas Volume		Total Load

Customer Representative	Station Manager DAVE SCOTT	Treater Robert [Signature]
-------------------------	--------------------------------------	--------------------------------------

Service Units	37900	33708	20920	19862	19860				
Driver Names	Sullivan	Wright		Morgan					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
6:00 PM					ON LOC Softy medly
					Run 100 STS 15-5 CSP.
					cont 1, 3, 5, 7, 10. RATE #4
8:40					CNSIDE ON BOTTOM
8:50					Hook Rig to air
9:30	100		12	2.5	St. Super Thick
			5		Return
			24	4.5	mix 100st AA-2 cont 10 15.3 P.P.G.
					cont mix 100 shot down. Wash hole, pump
					Release Plug
				5.5	St. Disp
	200		85		LFH PS
	500			3.5	Slow Rate
10:30	1400		105		plug downed float held.
			7		plug R.H. of 30ft
			5		plug O.H. of 20ft
					SOB complete
					Thank you

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
Thomas E. Wright, Commissioner

Sam Brownback, Governor

July 30, 2012

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

Re: ACO1
API 15-007-23878-00-00
NITTLER 1-9
SE/4 Sec.09-31S-13W
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