



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
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

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

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total 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

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1087420

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base 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. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

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
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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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Commingled <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Boyd 3
Doc ID	1087420

All Electric Logs Run

Geological Log
Sector Bond / Gamma Ray CCL Log
Dual Induction Log
Dual Compensated Porosity Log

Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Boyd 3
Doc ID	1087420

Tops

Name	Top	Datum
Heebner	3607	-2225
Stark	4282	-2900
Base Kansas City	4344	-2962
Cherokee	4502	-3120
Mississippian	4557	-3175
Kinderhook	4737	-3355
Viola	4854	-3472
Simpson	4957	-3574
Simpson Sand	4975	-3593
Total Depth	5135	-3753



PAGE	CTCT NO	INVOICE DATE
1 of 1	1000719	04/12/2012
INVOICE NUMBER		
1718 - 90877630		

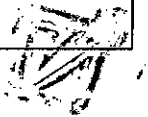
Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

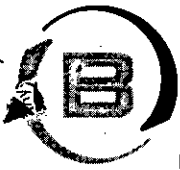
J LEASE NAME Boyd 3
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
40451214	19843		Net - 30 days	05/12/2012	
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 04/11/2012 to 04/11/2012</i>					
0040451214					
171805997A Cement-New Well Casing/Pi 04/11/2012					
Cement 5 1/2" Longstring					
AA2 Cement		250.00	EA	13.43	3,357.41 T
C-41P		47.00	EA	3.16	148.52 T
Salt		1,238.00	EA	0.39	489.00 T
C-44		235.00	EA	4.07	956.08 T
FLA-322		188.00	EA	5.92	1,113.87 T
Gilsonite		1,250.00	EA	0.53	661.61 T
Mud Flush		500.00	EA	0.68	339.69 T
Super Flush II		500.00	EA	1.21	604.34 T
Claymax KCL Substitute		5.00	EA	27.65	138.25 T
"Latch Down Plug & Baffle, 5 1/2" (Blue)		1.00	EA	315.99	315.99
"Auto Fill Float Shoe 5 1/2" (Blue)"		1.00	EA	284.39	284.39
"Turbolizer, 5 1/2" (Blue)"		7.00	EA	86.90	608.29
"5 1/2" Basket (Blue)"		2.00	EA	229.10	458.19
"Unit Mileage Chg (PU, cars one way)"		45.00	MI	3.36	151.08
Heavy Equipment Mileage		90.00	MI	5.53	497.69
"Proppant & Bulk Del. Chgs., per ton mil		529.00	EA	1.26	668.64
Depth Charge; 5001-6000'		1.00	EA	2,275.15	2,275.15
Blending & Mixing Service Charge		250.00	BAG	1.11	276.49
Plug Container Util. Chg.		1.00	EA	197.50	197.50
"Service Supervisor, first 8 hrs on loc.		1.00	EA	138.25	138.25

ENTERED
 APR 17 2012
 9/2/BC

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	13,680.43
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	570.04
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	14,250.47
DALLAS, TX 75284-1903	MIDLAND, TX 79702		





BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 05997 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>4-11-2012</u> 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 <u>CHIEFTAIN OIL CO., INC.</u>		LEASE <u>BOYD</u> WELL NO. <u>3</u>							
ADDRESS _____		COUNTY <u>BARBER</u> STATE <u>Ks.</u>							
CITY _____ STATE _____		SERVICE CREW <u>LESLEY, MARQUEZ, BOWER</u>							
AUTHORIZED BY _____		JOB TYPE: <u>CNW - 5 1/2" L.S.</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>37586</u>	<u>5</u>						<u>4-11-12</u>		<u>12:00</u>
<u>19889-19843</u>	<u>5</u>					ARRIVED AT JOB		AM	<u>1:00</u>
<u>19831-21010</u>	<u>5</u>					START OPERATION		AM	<u>3:30</u>
						FINISH OPERATION		AM	<u>7:30</u>
						RELEASED		AM	<u>8:30</u>
						MILES FROM STATION TO WELL			<u>45</u>

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: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA-2 CEMENT	SK	200		3,400.00
CP 105	AA-2 CEMENT	SK	50		850.00
CC 105	C-41P	lb	47		188.00
CC 111	SALT	lb	1238		619.00
CC 115	C-44	lb	235		1,210.25
CC 129	FLA-322	lb	188		1,410.00
CC 201	GILSONITE	lb	1250		837.50
CF 607	LATCH DOWN PLUG & BAFFLE, 5 1/2"	EA	1		400.00
CF 1251	AUTO FILL FLOAT SHOE, 5 1/2"	EA	1		360.00
CF 1651	TURBOLIZER, 5 1/2"	EA	7		770.00
CF 1901	BASKET, 5 1/2"	EA	2		580.00
C 704	CLAYMAX, KCL SUB.	GAL	5		175.00
CC 151	MUD FLUSH	GAL	500		430.00
CC 155	SUPER FLUSH TL	GAL	500		765.00
E 100	PICKUP MILEAGE	MI	45		191.25
E 101	HEAVY EQUIPMENT MILEAGE	MI	90		1030.00
E 11.3	BULK DELIVERY CHARGE	TM	529		846.00
CE 200	DEPTH CHARGE, 5001'-6000'	HR	1-4		2,880.00
CE 240	BLENDING SERVICE CHARGE	SK	250		350.43
CE 504	PLUG CONTAINER CHRG	JOB	1	250.00	
S003	CHEMICAL/ACID DATA: <u>CEKVICE SUPERVISOR</u>	EA	1	175.00	
				SUB TOTAL	13,680.00
SERVICE & EQUIPMENT				%TAX ON \$	
MATERIALS				%TAX ON \$	
TOTAL					

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

BASIC

Energy services, L.P.

TREATMENT REPORT

Customer CHIEFTAIN OIL CO. INC.	Lease No.	Date 4-11-2012
Lease BOVD	Well # 3	
Field Order # 05997	Station PRATT, Ks.	Casing 5 1/2"
Type Job CNW-5 1/2" L.S.	Depth 5133'	County BARBER
	Formation TD-5133'	State Ks.
		Legal Description 4-34-11

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 5 1/2 x 15.5	Tubing Size 5 1/8	Shots/Ft CMT-	Acid 200SK AA-2	Pre Pad @ 1.43 CUFT³	Rate	Press	ISIP	
Depth 5133'	Depth	From	To	Pad	Max		5 Min.	
Volume 122 BBL	Volume	From	To	Frac	Min 51 = 42.22'		10 Min.	
Max Press 1500	Max Press	From	To	Flush 121 BBL / 2 @ 1000	Avg		15 Min.	
Well Connection P.C.	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth 5075.78	Packer Depth	From	To				Total Load	

Customer Representative RYAN MOLZ	Station Manager D. SCOTT	Treater K. LESLEY
Service Units 37586 19889 19843 19831 21010		
Driver Names LESLEY MARQUEZ BOWER		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1:00 AM					ON LOCATION - SAFETY MEETING
2:30 AM					RUN 122 JTS. 5 1/2" x 15.5" CSG.
					TURBO. - 3, 5, 11, 13, 14, 15, 16
					BASK. - 2, 9
					CIRC. 1/2 WAY IN HOLE
5:30 AM					CSG. ON BOTTOM
5:45 AM					HOOK UP TO CSG. / BREAK CIRC. W/ RIG
6:45 AM	450		3	6	H2O AHEAD
6:50 AM	450		12	6	MUD FLUSH
6:54 AM	450		3	6	H2O SPACER
6:55 AM	400		12	6	SUPERFLUSH
6:57 AM	400		3	6	H2O SPACER
6:58 AM	300		51	6	MIX 200 SKS AA-2 @ 15.0 PPG
7:05 AM					CLEAR PUMP & LINE / DROP L.D. PLUG
7:10 AM	0		0	7	START DISPLACEMENT
7:20 AM	500		80	6	LIFT PRESSURE
7:27 AM	1000		110	5	SLOW RATE
7:30 AM	1700		121	4	PLUG DOWN - HELD
					CIRC. THRU VIB
			6, 4		PLUG R.H. & M.H.
					JOB COMPLETE, THANKS
					KEVEN LESLEY



PAGE	CONTRACT NO	INVOICE DATE
1 of 1	1000719	04/09/2012
INVOICE NUMBER		
1718 - 90874325		

Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Boyd 3
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
40449721	19843		Net - 30 days	05/09/2012	
For Service Dates: 04/03/2012 to 04/03/2012 0040449721 171805993A Cement-New Well Casing/Pi 04/03/2012 Cement 13 3/8" Conductor 60/40 POZ Celloftake Calcium Chloride "Unit Mileage Chg (PU, cars one way)" Heavy Equipment Mileage "Proppant & Bulk Del. Chgs., per ton mil Depth Charge; 0-500' Blending & Mixing Service Charge "Service Supervisor, first 8 hrs on loc.		QTY U of M	UNIT PRICE	INVOICE AMOUNT	
		350.00	EA	9.48	3,318.14 T
		88.00	EA	2.92	257.24 T
		903.00	EA	0.83	749.07 T
		45.00	MI	3.36	151.09
		90.00	MI	5.53	497.72
		677.00	EA	1.26	855.77
		1.00	EA	790.03	790.03
		350.00	BAG	1.11	387.12
		1.00	EA	138.26	138.26

MAY 03 2012
 9121BC

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	7,144.44
BASIC ENERGY SERVICES,LP	BASIC ENERGY SERVICES,LP	TAX	315.68
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	7,460.12
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



Customer CHIEFTAIN OIL CO., INC.		Lease No.		Date 4-3-2012	
Lease BOYD		Well # 3			
Field Order # 05993	Station PRATT, KS.	Casing 13 3/8"	Depth	County BARBER	State KS
Type Job CNW-13 3/8" C.P.			Formation TD-335'	Legal Description 4-34-11	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 13 3/8" x 48'	Tubing Size	Shots/Ft		Acid 350SK. W/40POZ	RATE	PRESS	ISIP	
Depth 333.46'	Depth	From	To	Pre Pad @ 1.21 CU FT³	Max		5 Min.	
Volume 52.35 BBL	Volume	From	To	Pad	Min		10 Min.	
Max Press 500	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection S.V.	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth 313	Packer Depth	From	To	Flush 49 BBL	Gas Volume		Total Load	

Customer Representative RON MOLZ	Station Manager D. SCOTT	Treater K. LESLEY
Service Units 37586 19889 19843 19826 19860		
Driver Names LESLEY MARQUEZ — McGRAW —		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
5:30AM					ON LOCATION - SAFETY MEETING
6:00AM					SPOT TRUCKS ON LOCATION
8:30AM					RUN 8 JTS. 13 3/8" x 48' CSG.
12:05 PM					CSG. ON BOTTOM
12:15 PM					HOOK UP TO CSG. / BREAK CIRC. W/ RIG
1:05 PM	150		5	6	H2O AHEAD
1:06 PM	50		75	6	MIX 350 SKS. W/40POZ @ 14.8 PRG
1:19 PM	0		0	5	START DISPLACEMENT
1:28 PM	175		45	3	SLOW RATE
1:30 PM	200		49	3	CMT. @ DESIRED DEPTH
					CIRC. THRU JOB
					CIRC. 10 BBL TO PIT
					JOB COMPLETE,
					THANKS -
					KEVEN LESLEY