



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1087651  
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<br>Recompletion Date | Date Reached TD | Completion Date or<br>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

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: \_\_\_\_\_

1087651

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<br><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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><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><br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | <b>METHOD OF COMPLETION:</b><br><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____<br><input type="checkbox"/> Other <i>(Specify)</i> _____ | <b>PRODUCTION INTERVAL:</b><br>_____<br>_____ |
|--|---|---|

|           |                        |
|-----------|------------------------|
| Form      | ACO1 - Well Completion |
| Operator  | OXY USA Inc.           |
| Well Name | KU B-1                 |
| Doc ID    | 1087651                |

All Electric Logs Run

|                                      |
|--------------------------------------|
|                                      |
| DUAL SPACED NEUTRON SPECTRAL DENSITY |
| ARRAY COMPENSATED TRUE RESISTIVITY   |
| BOREHOLE COMPENSATED SONIC ARRAY     |
| MICROLOG                             |



**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 02772 A

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

|   |          |  |          |                 |     |  |
|---|----------|--|----------|-----------------|-----|--|
| DATE OF JOB <b>3-26-12</b> DISTRICT <b>1717</b> |          | 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>Oxy USA</b>                         |          | LEASE <b>KU B #1</b>   |          | WELL NO.        |     |  |
| ADDRESS   |          | COUNTY <b>Stanton</b>  |          | STATE <b>KS</b> |     |  |
| CITY STATE                                      |          | SERVICE CREW <b>E. Mendoza, R. Ybarra, D. Canada</b>   |          |                 |     |  |
| AUTHORIZED BY <b>J. Bennett JRB</b>             |          | JOB TYPE: <b>242-8 1/2 Surface</b>   |          |                 |     |  |
| EQUIPMENT#                                      | HRS      | EQUIPMENT#   | HRS      | EQUIPMENT#      | HRS | TRUCK CALLED <b>3-26-12</b> DATE <b>AM 7:00</b> TIME |
| <b>34726</b>                                    | <b>9</b> | <b>30464</b>   | <b>3</b> |                 |     | ARRIVED AT JOB <b>PM 11:00</b>                       |
| <b>38119</b>                                    | <b>3</b> | <b>37724</b>   | <b>6</b> |                 |     | START OPERATION <b>AM 5:00</b>                       |
| <b>14842</b>                                    | <b>6</b> |  |          |                 |     | FINISH OPERATION <b>AM 6:00</b>                      |
| <b>33021</b>                                    | <b>3</b> |  |          |                 |     | RELEASED <b>AM 8:00</b>                              |
| <b>19808</b>                                    | <b>6</b> |  |          |                 |     | MILES FROM STATION TO WELL <b>30 mi</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: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

| ITEM/PRICE REF. NO. | MATERIAL, EQUIPMENT AND SERVICES USED | UNIT  | QUANTITY | UNIT PRICE | AMOUNT |
|---------------------|---------------------------------------|-------|----------|------------|--------|
| CL101               | A-Con                                 | sk    | 335      |            |        |
| CL110               | Premium Plus                          | sk    | 245      |            |        |
| CL109               | Calcium Chloride                      | lb    | 1407     |            |        |
| CL102               | Gellflake                             | lb    | 145      |            |        |
| CL130               | C-SI                                  | lb    | 63       |            |        |
| CF253               | 8 1/2 Regular Guide Shoe              | ea    | 1        |            |        |
| CF1403              | Flapper Type Insert                   | ea    | 1        |            |        |
| CF4405              | Centralizer                           | ea    | 15       |            |        |
| CF4556              | Basket                                | ea    | 1        |            |        |
| CF3000              | Thread Lock                           | ea    | 12       |            |        |
| CF105               | Top Rubber Plug                       | ea    | 1        |            |        |
| CF4109              | Stop Collar                           | ea    | 1        |            |        |
| E101                | Heavy Equipment Mileage               | mi    | 90       |            |        |
| CE240               | Blending + Mixing Service             | sk    | 580      |            |        |
| E113                | Proppant + Bulk Delivery              | bu/mi | 819      |            |        |
| CE202               | Pump Depth = 1001-2000'               | 4hr   | 1        |            |        |
| CE504               | Plug Container                        | ea    | 1        |            |        |
| E100                | Unit Mileage                          | mi    | 30       |            |        |
| 3003                | Service Supervisor                    | ea    | 1        |            |        |

ARJ LOCATION/DEPT. **Liberal** D02 DNON 092  
 LEASEWELL/FAC **K-U-R-1**  
 MAXWD / WSM # **010** ELEMENT **3023**  
 TASK **010**  
 PROJECT # **1136981** CAPEX / OPEX - Circle 0/1  
 SSPO / BPA **UNSUPPORTED**  
 PRINTED NAME **Kern Threlkeld**  
 SIGNATURE: \_\_\_\_\_  
Certify that these Services/Materials have been received

SUB TOTAL **17818 98**

| CHEMICAL / ACID DATA: |  |  |  |
|-----------------------|--|--|--|
|                       |  |  |  |
|                       |  |  |  |
|                       |  |  |  |

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

SERVICE REPRESENTATIVE **Neil Owen**

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

FIELD SERVICE ORDER NO. \_\_\_\_\_



|                                       |                                    |                                      |
|---------------------------------------|------------------------------------|--------------------------------------|
| Customer<br><b>Oxy USA</b>            | Lease No.                          | Date<br><b>3-26-12</b>               |
| Lease<br><b>KU B</b>                  | Well # <b>1</b>                    |                                      |
| Field Order #<br><b>02772</b>         | Station<br><b>Liberal, KS-1717</b> | Casing #<br><b>8 5/8" 24"</b>        |
| Type Job<br><b>242-8 5/8" Surface</b> | Depth<br><b>1825'</b>              | County<br><b>Stanton</b>             |
|                                       | Formation                          | State<br><b>KS</b>                   |
|                                       |                                    | Legal Description<br><b>17-29-41</b> |

| PIPE DATA                         |              | PERFORATING DATA |    | FLUID USED |  | TREATMENT RESUME |       |                  |
|-----------------------------------|--------------|------------------|----|------------|--|------------------|-------|------------------|
| Casing Size<br><b>8 5/8" 24"</b>  | Tubing Size  | Shots/Ft         |    | Acid       |  | RATE             | PRESS | ISIP             |
| Depth<br><b>1825'</b>             | Depth        | From             | To | Pre Pad    |  | Max              |       | 5 Min.           |
| Volume<br><b>113 bbl</b>          | Volume       | From             | To | Pad        |  | Min              |       | 10 Min.          |
| Max Press<br><b>2500#</b>         | Max Press    | From             | To | Frac       |  | Avg              |       | 15 Min.          |
| Well Connection<br><b>TD 1817</b> | Annulus Vol. | From             | To |            |  | HHP Used         |       | Annulus Pressure |
| Plug Depth<br><b>53.44 (178)</b>  | Packer Depth | From             | To | Flush      |  | Gas Volume       |       | Total Load       |

|   |                                      |                            |
|---|--------------------------------------|----------------------------|
| Customer Representative<br><b>Kevin</b>                           | Station Manager<br><b>J. Bennett</b> | Treater<br><b>A Rivera</b> |
| Service Units<br><b>34726 38119 19842 33071 19808 30464 37724</b> |                                      |                            |
| Driver Names<br><b>A Rivera E Mendon R Ybarra D Canaday</b>       |                                      |                            |

| Time  | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log   |
|-------|-----------------|-----------------|--------------|------|---|
| 11:00 |                 |                 |              |      | on loc-site assessment (layh down dp)   |
| 11:05 |                 |                 |              |      | spo + trucks- rig up  |
| 12:30 |                 |                 |              |      | start csg + float equipment   |
| 3:00  |                 |                 |              |      | csg on atm, break circ  |
| 4:00  |                 |                 |              |      | safety meeting / ISA  |
| 5:15  |                 |                 |              |      | pressure test 2500# pumping lines   |
| 5:17  |                 |                 | 10           | 5    | pump 10 bbl H <sub>2</sub> O spacer   |
| 5:20  | 200             |                 | 143.2        | 5    | mix + pump 335 sk A-Con @ 12.1 ppg-<br>2.40 ft <sup>3</sup> /sk, 14.00 gal/sk = 143.2 bbl                       |
| 5:45  | 150             |                 | 58.5         | 5    | switch to tail cmt 245 sk Class C<br>@ 14.8 ppg - 1.34 ft <sup>3</sup> /sk - 6.33 gal/sk                        |
| 6:00  | 500             |                 | 0            | 5    | drop plug, disp csg   |
| 6:25  | 500             |                 | 103          | 2    | slow rate last 10 bbl of disp   |
| 6:30  | 1500            |                 | 113          | 0    | land plug, float held @ 1500# Sur<br>circ cmt to surface<br>psi test csg @ 1500# for 30 min -ok<br>job complete |



**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 02775 A

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

|                                    |                         |  |                                   |  |                              |                              |                        |                    |      |
|------------------------------------|-------------------------|--|-----------------------------------|--|------------------------------|------------------------------|------------------------|--------------------|------|
| DATE OF JOB<br><b>3-31-12</b>      | DISTRICT<br><b>1717</b> | 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<br><b>Oxy USA</b>         |                         | LEASE<br><b>KU B #1</b>                      |                                   |  |                              | WELL NO.                     |                        |                    |      |
| ADDRESS                            |                         | COUNTY<br><b>Stanton</b>                     |                                   | STATE<br><b>KS</b>                             |                              |                              |                        |                    |      |
| CITY                               |                         | STATE  |                                   | SERVICE CREW<br><b>E. Mendoza &amp; Chavez</b> |                              |                              |                        |                    |      |
| AUTHORIZED BY<br><b>J. Bennett</b> |                         | JOB TYPE:<br><b>242 - 5/8" Production</b>    |                                   |  |                              |                              |                        |                    |      |
| EQUIPMENT#                         | HRS                     | EQUIPMENT#                                   | HRS                               | EQUIPMENT#                                     | HRS                          | TRUCK CALLED                 | DATE<br><b>3-31-12</b> | AM<br><b>10:00</b> | TIME |
| <b>34726</b>                       | <b>8</b>                |  |                                   |  |                              | ARRIVED AT JOB               |                        | <b>1:30</b>        |      |
| <b>27808</b>                       | <b>4</b>                |  |                                   |  |                              | START OPERATION              |                        | <b>4:00</b>        |      |
| <b>19553</b>                       | <b>4</b>                |  |                                   |  |                              | FINISH OPERATION             |                        | <b>5:00</b>        |      |
| <b>30463</b>                       | <b>4</b>                |  |                                   |  |                              | RELEASED                     |                        | <b>6:00</b>        |      |
| <b>37724</b>                       | <b>4</b>                |  |                                   |  |                              | MILES FROM STATION TO WELL   |                        | <b>90 mi</b>       |      |

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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 |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| CL04                | 50/50 Poz                             | SK   | 390      | 8 25       | 3217 50   |
| CL13                | Gypsum                                | LB   | 1640     | 56         | 918 40    |
| CL11                | Salt                                  | LB   | 2396     | 38         | 910 48    |
| CL03                | C-15                                  | ↓    | 197      | 9 38       | 1847 86   |
| CL05                | C-41P                                 | ↓    | 82       | 3 00       | 246 00    |
| CL201               | Gilsonite                             | ↓    | 1952     | 50         | 976 00    |
| CF251               | 5/2" Regular Guide Shoe               | ea   | 1        |            | 187 50    |
| CF1451              | Flopper Type Insert                   | ↓    | 1        |            | 161 25    |
| CF4452              | Turbolizer                            | ↓    | 25       | 56 25      | 1406 25   |
| CF3000              | Thread Lock                           | ↓    | 1        |            | 25 50     |
| CF103               | Top Rubber Plug                       | ↓    | 1        |            | 78 75     |
| CF4105              | Stop Collar                           | ↓    | 1        |            | 63 00     |

AP LOCATION/DEPT. Libecap D02  NON D02

LEASE/WELL/FAC KU B-1

MAXIMO / WSM # \_\_\_\_\_

TASK 0102 ELEMENT 3023

PROJECT # 1136288 CAPEX  OPEX - Circle one

SPO / BPA Circle Doc Type UNSUPPORTED

PRINTED NAME Kevin Proccadi

SIGNATURE: [Signature]

I certify that these Services/Materials have been received  
SERVICE & EQUIPMENT %TAX ON \$  
MATERIALS %TAX ON \$

SUB TOTAL \$ **17,142.54**

|                       |  |  |  |
|-----------------------|--|--|--|
| CHEMICAL / ACID DATA: |  |  |  |
|                       |  |  |  |
|                       |  |  |  |
|                       |  |  |  |

TOTAL

|  |   |
|--|---|
| SERVICE REPRESENTATIVE<br><u>Paul Owen</u> | THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:<br>_____<br>(WELL OWNER OPERATOR CONTRACTOR OR AGENT) |
|--|---|

FIELD SERVICE ORDER NO.



# BASIC<sup>SM</sup>

ENERGY SERVICES

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

FIELD SERVICE TICKET CONT.

PRESSURE PUMPING & WIRELINE

TICKET NO. 02775

| ITEM/PRICE<br>REF. NO. | MATERIAL, EQUIPMENT AND SERVICES USED          | UNIT  | QUANTITY | UNIT PRICE | \$ AMOUNT |
|------------------------|--|-------|----------|------------|-----------|
| CC155                  | <del>Super flush</del> Heavy Equipment Mileage | mi    | 180      | 5 25       | 945 00    |
| E101                   | Blending & Mixing Service                      | SK    | 390      | 2 05       | 409 50    |
| CE240                  | Inoppanant r. Bulk Delivery                    | cu/yd | 1474     | 1 20       | 1771 20   |
| E113                   | Pump Depth 500-6000"                           | ea    | 1        |            | 2160 00   |
| CE206                  | Plus Container                                 | ea    | 1        |            | 187 50    |
| CE504                  | Unit Mileage                                   | mi    | 90       | 3 19       | 287 10    |
| E100                   | Service Supervisor                             | ea    | 1        |            | 131 25    |
| 5003                   | Cement Data Acquisition                        | ea    | 1        |            | 412 50    |
| T105                   |  |       |          |            |           |
| CE503                  | 10" High Head                                  | ea    | 1        |            | 225 00    |
| CC155                  | Super Flush II                                 | ea    | 500      | 1 15       | 575 00    |
|                        |  |       |          |            |           |
|                        |  |       |          |            |           |
|                        |  |       |          |            |           |
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# Cement Report

|  |                 |                       |                         |                                   |  |
|--|-----------------|-----------------------|-------------------------|-----------------------------------|--|
| Customer <b>Oxy USA</b>                    |                 | Lease No.             |                         | Date <b>3-31-10</b>               |  |
| Lease <b>K00 B</b>                         |                 | Well # <b>1</b>       |                         | Service Receipt <b>02775</b>      |  |
| Casing <b>5 1/2" 17#</b> Depth <b>5654</b> |                 | County <b>Stanton</b> |                         | State <b>KS</b>                   |  |
| Job Type <b>242 5 1/2" Production</b>      |                 | Formation             |                         | Legal Description <b>17-29-41</b> |  |
| <b>Pipe Data</b>                           |                 |                       | <b>Perforating Data</b> |                                   | <b>Cement Data</b>   |
| Casing size <b>5 1/2" 17#</b>              | Tubing Size     |                       | <b>Shots/Ft</b>         |                                   | <b>Lead</b>  |
| Depth <b>5654'</b>                         | Depth           |                       | From                    | To                                | <b>Tail in 390 sk<br/>50/50 Poz</b>  |
| Volume <b>130 bbl</b>                      | Volume          |                       | From                    | To                                |  |
| Max Press <b>2500#</b>                     | Max Press       |                       | From                    | To                                |  |
| Well Connection <b>D-5659'</b>             | Annulus Vol.    |                       | From                    | To                                |  |
| Plug Depth <b>55-42'</b>                   | Packer Depth    |                       | From                    | To                                |  |
| Time                                       | Casing Pressure | Tubing Pressure       | Bbls. Pumped            | Rate                              | Service Log  |
| 1:30                                       |                 |                       |                         |                                   | on loc-site assessment (on istm)   |
| 1:45                                       |                 |                       |                         |                                   | spot trucks - ris up   |
| 2:30                                       |                 |                       |                         |                                   | safety meeting / SSA   |
| 3:25                                       |                 |                       |                         |                                   | pressure test @ 3000#  |
| 3:30                                       | 200             |                       | 5                       | 4                                 | 5 bbl H <sub>2</sub> O spacer  |
| 3:35                                       | 200             |                       | 12                      | 4                                 | pump 12 bbl Superflush   |
| 3:40                                       | 200             |                       | 5                       | 4                                 | 5 bbl H <sub>2</sub> O spacer  |
| 3:45                                       | 50              |                       | 8                       | 3                                 | plug merge hole w/ 30 sk   |
| 4:10                                       | 200             |                       | 102.7                   | 5                                 | mix + pump 360 sk 50/50 Poz<br>w/ 5% W/O, 10% Salt, 6% C15,<br>K# Deformer, 5# Gylsonite, @<br>13.5 ppg - 158 #/sk - 7.36 gal/sk |
| 4:30                                       |                 |                       |                         |                                   | wash pump lines  |
| 4:35                                       | 0               |                       | 0                       | 6                                 | drop plug, disp csg  |
| 4:55                                       | 1300            |                       | 120                     | 2                                 | slow rate last 10 bbl of disp  |
| 5:00                                       | 1800            |                       | 130                     | 0                                 | land plug, float held  |
| 5:00                                       | 2500            |                       | .25                     | 5                                 | psi test csg @ 2500# 30 min  |
| 5:30                                       |                 |                       |                         |                                   | job complete   |
| Service Units <b>34726</b>                 |                 | <b>27808-19853</b>    |                         | <b>340463-3704</b>                |  |
| Driver Names <b>A Ouer</b>                 |                 | <b>E Mueller</b>      |                         | <b>S Chavez</b>                   |  |

Kevin  
Customer Representative

J. Bennett  
Station Manager

A Ouer  
Cementer  
Taylor Printing, Inc.

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

LAURA BETH HICKERT  
OXY USA Inc.  
5 E GREENWAY PLZ  
PO BOX 27570  
HOUSTON, TX 77227-7570

Re: ACO1  
API 15-187-21198-00-00  
KU B-1  
SE/4 Sec.17-29S-41W  
Stanton 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,  
LAURA BETH HICKERT