



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1088066
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: _____

1088066

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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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 19, 2012

Wilbur C Bradley
White Pine Petroleum Corporation
110 S MAIN ST STE 500
WICHITA, KS 67202-3745

Re: ACO1
API 15-077-21836-00-00
BLANCHAT 1
NE/4 Sec.31-32S-05W
Harper 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,
Wilbur C Bradley

Customer: White Pine PET. Co/PP
 Lease: Blanchet
 Well #: 1
 Date: 3-28-12
 Field Order #: 5919
 Station: P-111
 Casing: 8 1/8
 Depth: 337
 County: Harper
 State: KS
 Type Job: CNW-8 1/8 Surface
 Formation: [Blank]
 Legal Description: 31-32-5

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Rate	RATE	PRESS	ISIP	
8 1/8	5 1/2	230	60/40 P02	1.21	Max		5 Min.	
Depth 337	Depth	From	To	Pre Pad	Min		10 Min.	
Volume	Volume	From	To	Pad	Avg		15 Min.	
Max Press 1000	Max Press	From	To	Frac	HHP Used		Annulus Pressure	
Well Connection	Annulus Vol.	From	To	Flush 20.3	Gas Volume		Total Load	
Plug Depth 330	Packer Depth	From	To					

Customer Representative: Coc. I
 Station Manager: Dave Scott
 Treater: Steve Orlando

Service Units	Driver Names	Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
27283	Oliver	0:00					On location Safety Meeting
27463	McBrain						Run 8 1/8 8 1/8 casing
19831	Hunter						Casing on Bottom
19862							Break Circ w/ris

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
11:10	250		49.5	5	Max 230 sur 60/40 P02 @ 14.8%
					Skid Down
11:26	0	0	0	5	Release Plug
11:28	300		10	5	Start H ₂ O Displacement
11:30	300		20.3	5	Plug Down
					Circulation thru job
					Circulated 10 bbl to pit
					Job Complete
					Thanks Steve



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 06104 A

31-325-5W

DATE _____ TICKET NO. _____

DATE OF JOB: 4-3-12	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: White Pine Petroleum Corporation	LEASE: Blanchat	WELL NO. 1					
ADDRESS:	COUNTY: Harper	STATE: Kansas					
CITY:	STATE:	SERVICE CREW: Messick: E. Wright: D. Phye					
AUTHORIZED BY:	JOB TYPE: C.N.W. - Longstring						

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
37,216	1						4-3-12			7:00
						ARRIVED AT JOB				10:30
19,903-19,905	1					START OPERATION				2:30
						FINISH OPERATION				3:30
19,960-19,918	1					RELEASED	4-3-12			4:00
						MILES FROM STATION TO WELL				75

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
EC 105	AA 2 Cement	sk	195		3255.00
EC 109	AA 2 Cement	sb	50		350.00
EC 102	Ced. Flare	Lb	62		22.00
EC 105	C-4IP	Lb	47		181.00
EC 111	Salt	Lb	222		611.00
EC 115	C-44	Lb	174		896.00
EC 129	FLA-322	Lb	116		870.00
EC 201	Gilsonite	Lb	1,225		820.75
CF 607	Latch Down Plug and 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	1	\$	290.00
EC 704	Claymax	Gal	5	\$	175.00
EC 151	Mud Flush	Gal	500	\$	430.00

SUB TOTAL
DLS

CHEMICAL / ACID DATA:			

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

TOTAL

SERVICE REPRESENTATIVE: *R. Messick*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *M. E. Bradley*

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



TREATMENT REPORT

Customer White Pine Petroleum Corporation			Lease No. Blanchat		Date 4-3-12
Lease Blanchat			Well # 1		
Field Order # 6104	Station Pratt, Kansas	Casing" 5 1/2	Depth 1416	County Harper	State Kansas
Type Job C.N.W.-Longstring			Formation	Legal Description 31-325-5W	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 5 1/2	Tubing Size 4 1/2	Shots/Ft 195	From 108	AA-2 with .5	Rate 3.22	Press 280	ISIP 758	Gas Bl Gas Bl
Depth 4530	Depth 4530	From 108	To 15	25 Lb./sk Cellfl	Max 5	Min 1.43	ISIP 5	ISIP 10
Volume 10.5	Volume 10.5	From 108	To 15	5.97 Gal./sk	Avg 1.43			
Max Press 1600	Max Press 1600	From 108	To 15					
Well Connection Plug Cont	Annulus Vol. 50	From 50	To 15	AA-2 top plug	HHP Used 15	Mouse (20)	Annulus Pressure noles	
Plug Depth 1516	Packer Depth 1516	From 108	To 15	Flush 110.2	Gas Volume 28	Clay Max	Total Load	

Customer Representative Mike Bradley	Station Manager David Scott	Treater Clarence R. Messick
Service Units 37, 216	19, 903	19, 905
Driver Names Messick	Mattal	Phye

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
10:50					Cement and fluid components entered
11:15					Maverick Drilling start down Auto Fill Guide Shoe. Shoe Joint with Latch Down. Baffle screw down collar and a total of 107 wires used tested and set 14 Lb./ft 5 1/2 casing. A Hastel was installed above Collar #5. A Turbulator was installed on collars #1, 3, 5, 13, 19, 21 and #25.
1:30					Casing in well. Circulate for 1 Hour.
2:30	300	3,000			Shut in well. Pressure Test. Open Well.
2:33	300			6	Start Fresh Water Pre-Flush.
			20	6	Start Mud Flush.
			32	6	Start Fresh Water spacer.
	300		52	5	Start mixing 195 sacks AA-2 cement.
	-0-		102		Stop pumping. Shut in well. Wash pump and line. Release Latch Down Plug. Open Well.
3:00	100			6.5	Start 28% clay max Displacement.
	700		82	5	Start to lift cement.
	700		110.2		Plug down.
3:18	1,600				Pressure up.
					Release pressure. Float Shoe held.
	-0-		7.5	3	Plug Rat and Mouse holes.
					Wash up pump truck.
4:15					Job Complete.

DRILL-STEM TEST TICKET
FILE: blanchat 1 DST 1

Company White Pine Petroleum Corp Lease & Well No. Blanchat #1
 Contractor Maverick #106 Charge to White Pine Petroleum Corp
 Elevation 1357 GL Formation Mississippi Effective Pay _____ Ft. Ticket No. SO122
 Date 4-2-12 Sec. 31 Twp. 32 S Range S W County Harper State KANSAS
 Test Approved By _____ Diamond Representative JACOB McCALLIE

Formation Test No. 1 Interval Tested from 4355 ft. to 4394 ft. Total Depth 4394 ft.
 Packer Depth 4350 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
 Packer Depth 4355 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
 Depth of Selective Zone Set _____

Top Recorder Depth (Inside) 4336 ft. Recorder Number 30055 Cap. 10,000 P.S.I.
 Bottom Recorder Depth (Outside) 4391 ft. Recorder Number 3851 Cap. 5,700 P.S.I.
 Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEM Viscosity 43 Drill Collar Length 0 ft. I.D. 2 1/4 in.
 Weight 9.4 Water Loss 8.8 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
 Chlorides 4,800 P.P.M. Drill Pipe Length 4322 ft. I.D. 3 1/2 in.
 Jars: Make STERLING Serial Number 3 Test Tool Length 33 ft. Tool Size 3 1/2-IF in.
 Did Well Flow? NO Reversed Out NO Anchor Length 39 ft. Size 4 1/2-FH in.
 Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: BB in 1 min NOBB
 2nd Open: BB ~~in 1 min~~ immediately NOBB

Recovered 28 ft. of Mud 100% mud
 Recovered 28 ft. of Total fluid
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____

Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: <u>Gas to surface in 17 min on first open.</u>	Insurance
<u>1001 Sample: 100% Mud</u>	Total

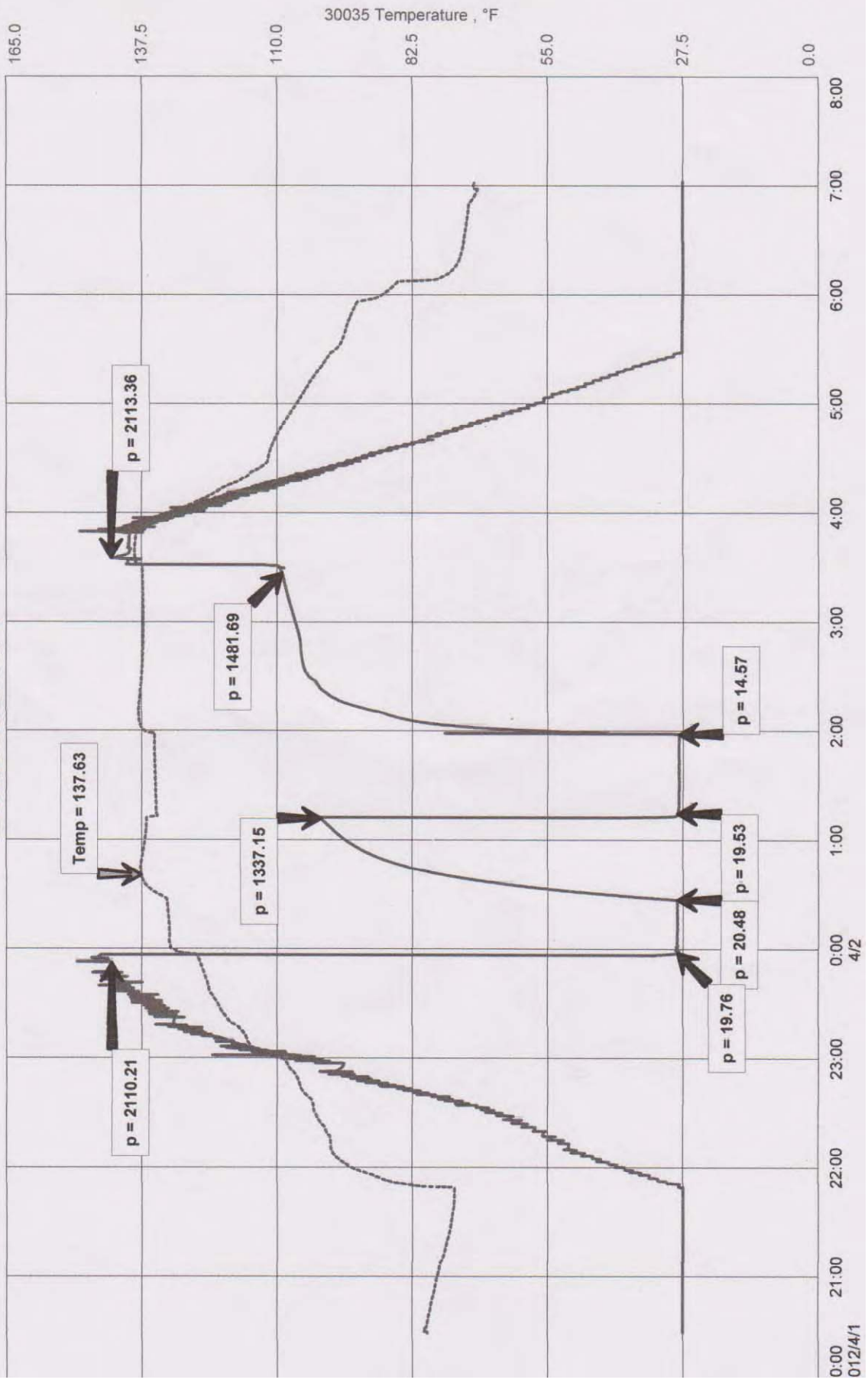
Time Set Packer(s) 4-1 11:57 A.M. Time Started Off Bottom 4-2 3:27 A.M. Maximum Temperature 138
 Initial Hydrostatic Pressure..... (A) 2110 P.S.I.
 Initial Flow Period..... Minutes 30 (B) 20 P.S.I. to (C) 20 P.S.I.
 Initial Closed In Period..... Minutes 45 (D) 1337 P.S.I.
 Final Flow Period..... Minutes 45 (E) 20 P.S.I. to (F) 15 P.S.I.
 Final Closed In Period..... Minutes 90 (G) 1482 P.S.I.
 Final Hydrostatic Pressure..... (H) 2113 P.S.I.

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

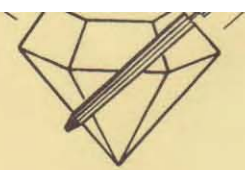
Mississippi 4355-4394'
t Date: 2012/04/01
t Date: 2012/04/02

Formation: DST #1 Mississippi 4355-4394'
Pool: Wildcat
Job Number: S0122

Blanchat #1



0:00 21:00 22:00 23:00 0:00 1:00 2:00 3:00 4:00 5:00 6:00 7:00 8:00
012/4/1 4/2



P.O. Box 157
 HOISINGTON, KANSAS 67544
 (620) 653-7550 • (800) 542-7313

GAS VOLUME REPORT

Company White Pine Petroleum Lease & Well No. Blanchot #1
 Date 4-2-12 Sec. 31 Twp. 32 S Rge. 5 W Location _____ County Harper State _____
 Drilling Contractor Maverick Rig #106 Formation Mississippi DST No. _____
 Remarks: Gas to surface in 17 min on initial flow

Not strong enough for sample

INITIAL FLOW

Time O'Clock	Orifice Size	Gauge	MCF/D
20	.25 in.	20 in.	7.9
25	.50 in.	17 in.	25.8
30	.50 in.	17 in.	25.9
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	
	in.	in.	

FINAL FLOW

Time O'Clock	Orifice Size	Gauge	MCF/D
5:00	.75 in.	12 in.	49.3
10:00	.50 in.	22 in.	29.4
15:00	.50 in.	22 in.	"
20:00	.50 in.	22 in.	"
25:00	.50 in.	22 in.	"
30:00	.50 in.	22 in.	"
35:00	.50 in.	22 in.	"
40:00	.50 in.	22 in.	"
45:00	.50 in.	22 in.	"
	in.	in.	
	in.	in.	