



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1088577
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
-----------------------------------	-----------------	---

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: _____

1088577

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Commingled <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
--	---	---

Max R. Lowrey

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

COMPANY: Ritchie Exploration
LEASE #11409 - Hessland
FIELD: WINGED NW NW SW
LOCATION: NW NW SW
COUNTY: FORD TWP. 26 REG. 22W
STATE: KS
CONTRACTOR: Martin #22
WELL NO: 4-2-2012
DATE: 4-2-2012
TYPE AND CHAM: TYPE AND CHAM

Table with columns: FORMATION, SHALE, LITHOLOGY, STRATIGRAPHIC POSITION, etc. Includes data for Anhydrite, Salt, Sandstone, Shale, etc.

REMARKS: 4 1/2" PRODUCTION CASING IS TO BE SET TO ACCESS PRODUCTION FROM POSITIVE DST'S IN THE ALTAMONT, CHEROKEE AND HUCK FORMATIONS.

RESPECTFULLY SUBMITTED

W.R. Lowrey

LEGEND

Legend table with symbols for Anhydrite, Salt, Sandstone, Shale, etc.

Main log table with columns: DRILLING TIME IN MINUTES PER FOOT, DEPTH, LITHOLOGY, SAMPLE DESCRIPTIONS, OIL SHOWS, REMARKS. Includes depth markers from 1480 to 4800 and various geological descriptions.

Final remarks and notes at the bottom of the log, including 'SHORT TRIP 10 STANDS CONDUIT HOLE 1 1/2 HRS FOR LOGS'.



#1 Lampe-Heskamp
2780' FSL & 335' FWL
Irregular Section 3-26S-22W
Ford County, Kansas
API# 15-057-20794-0000
Elevation: 2406' GL, 2417' KB

Sample Tops			Ref. Well
Anhydrite	1480'	+937	+19
B/Anhydrite	1513'	+904	+6
Stotler	3494'	-1077	-2
Heebner	4112'	-1695	+1
Lansing	4225'	-1808	-4
Muncie Shale	4396'	-1979	flat
Stark Shale	4499'	-2082	+6
BKC	4602'	-2185	+1
Marmaton	4606'	-2189	flat
Altamont	4652'	-2235	+3
Pawnee	4722'	-2305	+5
Fort Scott	4754'	-2337	+5
Cherokee Shale	4775'	-2358	+4
Huck	4841'	-2424	+2
Atoka Shale	4853'	-2436	+3
Mississippian	4874'	-2457	+5
RTD	4956'	-2539	

ALLIED CEMENTING CO., LLC. 042467

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Great Bend KS
4-15-12

DATE <u>4-14-12</u>	SEC. <u>3</u>	TWP. <u>26S</u>	RANGE <u>22W</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00</u>	JOB FINISH <u>12:30</u>
LEASE <u>Lampke</u>		WELL# <u>6</u>		LOCATION <u>Hwy 56 r 127 Rd 5.2 miles</u>		COUNTY <u>Ford</u>	STATE <u>Kansas</u>
OLD OR NEW (Circle one)				<u>Elmer 5 1/2 mile E. into</u>			

CONTRACTOR Murkin Drilling Rig 22
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D.
 CASING SIZE 4 1/4 DEPTH 313
 TUBING SIZE DEPTH
 DRILL PIPE 4 1/2 DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. 15 ft
 PERFS.
 DISPLACEMENT 14,999 bbls Freshwater

OWNER _____
 CEMENT AMOUNT ORDERED 230 sks class A 3% cc
2% gel

COMMON	<u>230</u>	@	<u>16.25</u>	<u>3,737.50</u>
POZMIX		@		
GEL	<u>5</u>	@	<u>21.25</u>	<u>106.25</u>
CHLORIDE	<u>8</u>	@	<u>58.20</u>	<u>465.60</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>249.67</u>	@	<u>2.10</u>	<u>524.30</u>
MILEAGE	<u>11.38 Ton x 50 x 2.35</u>			<u>1337.15</u>

TOTAL 6,170.80

EQUIPMENT
 PUMP TRUCK CEMENTER Dustin G
 # 513 HELPER Jason B / shane K
 BULK TRUCK
 # 482 DRIVER Joel M
 BULK TRUCK
 # DRIVER

REMARKS:

Pipe on bottom broke circulation with 4 1/2 rig mud
Mix 230 sks class A 3% cc 2% gel
Displace with bbls freshwater and
shut in
Cement did circulate
Plug Down 12:30 AM 4-15-12

SERVICE

DEPTH OF JOB	<u>313</u>			
PUMP TRUCK CHARGE			<u>1125.00</u>	
EXTRA FOOTAGE		@		
MILEAGE	<u>HVM 50</u>	@	<u>7.00</u>	<u>350.00</u>
MANIFOLD		@		
	<u>HVM 50</u>	@	<u>4.00</u>	<u>200.00</u>

TOTAL 1675.00

CHARGE TO: Ritchie Exploration
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (if Any) _____
 TOTAL CHARGES 7,845.80
 DISCOUNT 20% 1,569.16 IF PAID IN 30 DAYS
6,276.64

PRINTED NAME X KELLY WILSON
 SIGNATURE X Kelly Wilson

Thank You!!



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 06062 A

DATE OF JOB: <u>4-24-17</u> DISTRICT: <u>PRATT KC</u>		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>MITCHELL - EXPLORATION</u>		LEASE: <u>LAMPE - HESKAMP</u> WELL NO. <u>1</u>							
ADDRESS:		COUNTY: <u>FORD</u> STATE: <u>KC</u>							
CITY: STATE:		SERVICE CREW: <u>Sullivan, Wright, Rodriguez</u>							
AUTHORIZED BY:		JOB TYPE: <u>CROW 4 1/2 long stems</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <u>4-24-17</u>	DATE	AM	TIME
<u>33708-20976</u>	<u>45</u>					ARRIVED AT JOB			<u>9:45</u>
<u>14354-19538</u>	<u>45</u>					START OPERATION			<u>4:30</u>
<u>37900</u>						FINISH OPERATION			<u>5:15</u>
						RELEASED			<u>6:15</u>
						MILES FROM STATION TO WELL			<u>85</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)

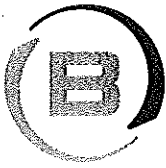
ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL 103	60/40 pot coat	SK	500		600.00
CL 105	AA 2 coat	SK	200		3,040.00
CC 113	gyp sum	lb	940		1,705.00
CC 111	SALT	lb	407		553.50
CC 103	C-15	lb	113		1,412.50
CC 107	C-42P	lb	47		376.00
CC 201	gilt quiet	lb	1000		670.00
CF 250	gumbo shoe 4 1/2	SA	1		225.00
CF 1450	flapper insert	SA	1		200.00
CF 1650	Turbolon	SA	7		595.00
CF 450	port collar	SA	1		3,500.00
CF 1900	CRACK	SA	3		810.00
CF 102	FOR Rubber Plug	SA	1		80.00
CC 151	MOD - 470/4	GR	500		430.00
E 101	HEAVY SPOT	mi	120		1,190.00
CE 240	blending - mizy	SK	250		350.00
SUB TOTAL					<u>166</u>

CHEMICAL / ACID DATA:			

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
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1717 02328 A

DATE _____ TICKET NO. _____

DATE OF JOB: 5-4-12	DISTRICT: 1717	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: Ritchie Exploration		LEASE: Lampe - Heskamp #1			WELL NO.:				
ADDRESS:		COUNTY: Ford			STATE: KS				
CITY:		STATE:			SERVICE CREW: I. Chavez, Eddie, Victor				
AUTHORIZED BY: Gary Row		JOB TYPE: 241 Part Color			INITIALS: JRB				
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
							5/4/12		7:00
19820	2	14354	2	14355	2	ARRIVED AT JOB	5/4/12	AM	12:00
		19578	1	14384	1	START OPERATION	5/4/12	AM	12:05
27462	2					FINISH OPERATION	5/4/12	AM	2:15
						RELEASED	5/4/12	AM	3:15
						MILES FROM STATION TO WELL	95		

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: Gary Row
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT	
61103	6041102	SK	300		3600.00	
66200	Cement Grt	lb	1518		387.00	
67440	Cotton Seed Hulls	lb	300		105.00	
8101	Heavy Equipment Milage	mi	170		1190.00	
88240	Bleaching & Mung Charge	SK	4150		6225.00	
8113	Bulk Mung Charge	ton	1045		2621.00	
66703	Depth Charge	11hrs	1		1800.00	
6100	Pump Milage	mi	85		361.75	
5103	Service Supervisor	hr	1		175.00	
7105	Cement Data Acquisition Alon/MS	hr	1		550.00	
					SUB TOTAL	4000.90

CHEMICAL / ACID DATA:			

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

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

FIELD SERVICE ORDER NO.

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 24, 2012

John Niernberger
Ritchie Exploration, Inc.
8100 E 22ND ST N # 700
BOX 783188
WICHITA, KS 67278-3188

Re: ACO1
API 15-057-20794-00-00
Lampe-Heskamp 1
NW/4 Sec.03-26S-22W
Ford 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,
John Niernberger