

Confidentiality Requested:

Yes No

### Kansas Corporation Commission Oil & Gas Conservation Division

1088979

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 #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from  North / South Line of Section
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxxx) (e.gxxx.xxxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:
□ Oil □ WSW □ SHOW   □ 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:	Producing Formation: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No  If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
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 #:	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:
☐ ENHR         Permit #:           ☐ GSW         Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	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:

Page Two



Operator Name:				_ Lease I	Name: _			Well #:	
Sec Twp	S. R	East	West	County	:				
INSTRUCTIONS: Show open and closed, flowing and flow rates if gas to	ng and shut-in pressu surface test, along w	ires, whe ith final c	ther shut-in pre chart(s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	atic pressures, ed.	bottom hole temp	erature, fluid recovery,
Final Radioactivity Log, files must be submitted						igs must be em	alled to kcc-wei	i-iogs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests Taken (Attach Additional Sh	neets)	Ye	es No		L		on (Top), Depth		Sample
Samples Sent to Geolo	gical Survey	Y	es No		Nam	e		Тор	Datum
Cores Taken Electric Log Run		□ Ye	es No						
List All E. Logs Run:									
		Repo	CASING ort all strings set-c		Ne		tion, etc.		
Purpose of String	Size Hole Drilled		ze Casing t (In O.D.)	Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTIN	NG / SQL	    EEZE RECORD	)		
Purpose:	Depth Top Bottom	Туре	Type of Cement # Sacks Used				Type ar	nd Percent Additives	
Perforate Protect Casing Plug Back TD Plug Off Zone									
Plug Oil Zone									
Did you perform a hydraulic Does the volume of the total Was the hydraulic fracturin	al base fluid of the hydra	aulic fractu	uring treatment ex		-	Yes Yes Yes	No (If No,	skip questions 2 ar skip question 3) fill out Page Three	,
Shots Per Foot			RD - Bridge Plug: Each Interval Perf				acture, Shot, Cem Amount and Kind of	ent Squeeze Recor f Material Used)	d Depth
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:	Yes	No	
Date of First, Resumed P	roduction, SWD or ENF	IR.	Producing Meth	od:	g 🗌	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours	Oil B	bls.	Gas	Mcf	Wate	er E	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION	N OF GAS:		N	IETHOD OF	COMPI F	ETION:		PRODUCTION	ON INTERVAL:
Vented Sold	Used on Lease		Open Hole	Perf.	Dually	Comp. Co	mmingled		
(If vented, Subn			Other (Specify)		(Submit A	9CO-5) (Sul	bmit ACO-4)		

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 15-007-23893-00-00 STEVE MICHEL 6-9 NE/4 Sec.09-34S-11W 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



PAGE	CUST NO	INVOICE DATE						
1 of 1	1004409	06/25/2012						
	TANZOT CE NIIMBED							

1718 - 90936744

Pratt

(620) 672-1201

B VAL ENERGY

1 200 W DOUGLAS AVE STE 520

\_ WICHITA

KS US

67202

o ATTN:

ACCOUNTS PAYABLE

LEASE NAME

Steve Michel

6-9

LOCATION В

COUNTY

S

I

Т

Barber

STATE

JOB DESCRIPTION

Cement-New Well Casing/Pi

JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE		-	TERMS	DUE DATE
40479371	27463	9208-6	SURFA	E Cer	Net 30 days	07/25/2012
			QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates	s: 06/22/2012 to 06	5/22/2012				
0040479371						
171806506A Ceme	ent-New Well Casing/Pi C	06/22/2012				
Cement 8 5/8" Surf	=	, 5,12,15				
60/40 POZ			100.00	ЕЛ .	9.00	1 710 00
Celloflake		ŀ	190.00 48.00		2.78	1,710.00 3 133.20
Calcium Chloride			492.00		0.79	1
"Wooden Cmt Plug,	8 5/8"""		1.00		120.00	
"8 5/8"" Basket (Blo			1.00		236.25	1
"Unit Mileage Chg (	PU, cars one way)"		45.00	MI	3.19	
Heavy Equipment M	lileage		90.00	MI	5.25	472.5
"Proppant & Bulk De	el. Chgs., per ton mil		369.00	EΑ	1.20	442.8
Depth Charge; 0-50			1.00		750.00	1
Blending & Mixing S	_		190.00		1.05	1
Plug Container Util.			1.00		187.50	1
"Service Supervisor	, first 8 hrs on loc.		1.00	EA	131.25	3 131.2
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i se					• •	

PLEASE REMIT TO:

SEND OTHER CORRESPONDENCE TO:

BASIC ENERGY SERVICES, LP BASIC ENERGY SERVICES, LP

PO BOX 841903 DALLAS, TX 75284-1903

PO BOX 10460 MIDLAND, TX 79702

SUB TOTAL

4,913.89

TAX

162.84

INVOICE TOTAL

5,076.73

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

#### FIELD SERVICE TICKET

1718 06506 A

DATE OF	_			NEW ☐ OLD ☐ PROD ☐ INJ ☐ WDW ☐ CUSTOMER ORDER NO.:							
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E 100 E 101 E 113 CE 200	Heary Eg Bull Do Denth C Clenting -	of mi				TM SK 1A	1 1 45 90 369 1			160 315 191 430 590 1,000 266	25 25 20 90 00 00
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FIELD SERVICE ORDER NO.

REPRESENTATIVE

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

(WELL OWNER-ÓPERATOR CONTRACTOR OR AGENT)

**SERVICE** 

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

### FIELD SERVICE TICKET

DATE OF	PRESSURE PUMF				VEW C		DATE	TICKET NO.		LISTOMED		
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CUSTOMER	1/4/				EASE		Mich	56-6-	9	WELL NO.		
ADDRESS					COUNTY STATE							
CITY		STATE			SERVICE CREW							
AUTHORIZED B	BY				OB TYPE:	الدام ا	ا المعمود ا					
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							RELEASED			AM PM	_	
							MILES FROM	STATION TO	WELI	- 🛠		
products, and/or su become a part of th	pplies includes all o	xecute this contract as an a of and only those terms and the written consent of an o	conditions appe	earing on the	front and bac	k of this do	cument. No addit	edges that this co ional or substitute ER, OPERATOR,	terms	and/or condition	s shal	
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REPRESENTATIVE // FIELD SERVICE ORDER NO. THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

**SERVICE** 



### TREATMENT REPORT

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PAGE	CUST NO	INVOICE DATE					
1 of 1	1004409	07/03/2012					
	INVOICE NUMBER						
	1718 - 9094482	23					

Pratt

(620) 672-1201

B VAL ENERGY

1 200 W DOUGLAS AVE STE 520

L WICHITA

KS US

o ATTN:

67202

ACCOUNTS PAYABLE

LEASE NAME Steve Michel

LOCATION COUNTY

J

S

т

RECEIVEI Barber

6-9

STATE

JOB DESCRIPTION

Cement-New Well Casin 9/5; 2012

JOB CONTACT

<b>ЈОВ</b> #	EQUIPMENT #	PURCHASE ORDER NO. TERMS DUE DA			DATE		
40482590	19843	930	$\mathcal{B}_{-}$		Net - 30 days	08/02/	/2012
			QTY	U of M	UNIT PRICE	INVOICE	LUDOWY
For Service Dates	:: 07/01/2012 to 07	//01/2012					
0040482590							
171806286A Ceme	ent-New Well Casing/Pi 0	7/01/2012					
Cement 5 1/2" Long							
and the second state of	7.6-1		4				
AA2 Cement	o apper in		150.00		12.75		1,912.50
60/40 POZ		•	50.00	. EA	9.00		450.00
C-41P			36.00	EA	3.00		108.00
Salt			682.00	EA	0.38		255.75
C-44			141.00		3.86		544.61
FLA-322			113.00		5.63		635.63
Gilsonite			750.00		0.50		376.88
Mud Flush II			500.00		1.15		573.75
"Top Rubber Cmt Pl	=		1.00		78.75		78.
"Guide Shoe - Regul			1.00		187.50		187.
"Turbolizer, 5 1/2""			5.00		82.50		412.
"5 1/2"" Basket (Blu			1.00		217.50		217.
• • • • • • •	Float Valve 5 1/2"(B		1.00		161.25		161.
"Unit Mileage Chg (F Heavy Equipment M			45.00		3.19		143.4
	el. Chgs., per ton mil		90.00		5.25		472,
Depth Charge; 5001	= :		414.00		1.20		496.
Blending & Mixing S		`	1.00 200.00		2,159.99		2,159.
Plug Container Util,	=		1.00		1.05		210.
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Service Supervisor,	, mst o ms on oc.		1,00	EA	131.25		131.2
A Company of the Comp					* *		• •

BASIC ENERGY SERVICES, LP BASIC ENERGY SERVICES, LP PO BOX 841903

PO BOX 10460 MIDLAND, TX 79702 SUB TOTAL

TAX

9,716.10 354.57

DALLAS, TX 75284-1903

INVOICE TOTAL

10,070.67

## B 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 06286 A

	PRESSURE PUMP			DATE TICKET NO							
DATE OF JOB 7-1	-2012 D	ISTRICT PRATT, K	<u></u>	NEW 🔀 (	OLD   P	ROD   INJ	□ WDW □	CUSTOMER ORDER NO.:			
CUSTOMER	VAL ENE			LEASE ST	LEASE STEVE MICHEL WELL NO. 6-9						
ADDRESS		<del>)</del>			COUNTY BARBER STATE KS.						
CITY		STATE		SERVICE CREW LESLEY, MARCIEZ LAWRENCE							
AUTHORIZED E	зү			JOB TYPE:	CNIL	-5/z	"t.S. '       _				
EQUIPMEN <sup>*</sup>		EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CAL	ED 7.1.13	TE AM TIME			
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9859 - 1986 99 <b>60 -</b> 9161					<del>                                     </del>	START OPE	RATION	AM 11:30			
44 <b>00</b> - 010	10 10,5				•	FINISH OPE	RATION	AM 3:45			
			<del>                                     </del>			RELEASED	,	PM 4,30			
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ITEM/PRICE REF. NO.	M	 ATERIAL, EQUIPMENT	AND SERVICES	SUSED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT			
REF. NO.	L	·	AND SERVICES	SUSED	UNIT		UNIT PRICE				
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?C 201 ?F 103 ?F 251 ?F 1451 ?F 1651 ?F 1901 ?C 155	GILSON TOP RUE REGILLAR FLATTER TOPBOL BASKE SUPERE	ITE BER CMT. PL CHUIDE SHO TYPE INSERT 1ZER, SYR" TSYR" LUSH TI	E 51/2"	4LVE,5/12"	ID EA EA EA EA GAL	5 5 5xx		2500 215 a 5500			
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?C 201 ?F 103 ?F 251 ?F 1451 ?F 1651 ?F 1901 ?C 155	GILSON TOP RUE REGILLAR FLATTER TOPBOL BASKE SUPERE	ITE BER CUIT. PL CHUIDE SHE TIME INSERT IZER, S. 1/2" I SH TI LUSH TI WILEAGE WIPMENT M	DE 51/2" FLUATUR MILEAGE	4WE,51/2"	EA EA EA EA GAL MI			2500 215 a 5500			
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20 201 2F 103 2F 1451 2F 1451 2F 1901 2C 155 E 101 E 113 2E 206 2E 240	GILSON TOP RUE REGILLAR FLATTER TOPBOL BASKE SUPERE	ITE BER CHT. PL CHUIDE SHE TIME INSERT IZER, S'/z'' T, 5'/z''' LUSHTI MILEAGE WUIPMENT MELIUERY CHA CHARGÉ; 500	MLEAGE	4WE,5/2"	EA EA EA EA GAL MI			2500 215 a 5500 290 a 765 a			
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FIELD SERVICE ORDER NO.

REPRESENTATIVE

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

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

**SERVICE** 

# 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 0023**3** A

DATE (						45.5	194 1 J. C.	43	DATE	TICKET NO	<del></del>	
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CITY			STATE				SERVICE CR	EW 🧦	A179	e eg e di je ez	<u> </u>	
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										TOTA	A1	1

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

FIELD SERVICE ORDER NO.

**SERVICE** 

REPRESENTATIVE



### TREATMENT REPORT

Customer	AL ENG	I R	1941	<u> </u>	TL	Lease No.						Date						
Lease	V	Well # Lo- 9						1-1-2012										
Field Order # Station RATILES.						Casing/				// Depth			County BARBER			St	ate / 5.	
	11/10 -	5	1/2"							nation	521			Legal De	scription	-11		
PIPE	ΓING	IG DATA FLUID U			USED	SED			TREATMENT RESUME									
Casing Size	sing Size _ Tubing Size		Shots/Ft		CATT -		Aeid-	05KS /	JA - c	2	F	RATE	PRES	ss	ISIP			
Depth 5/202	/ Depth		From		То		Pre Pad 1.34		6 CUF	.3 T	Max		-		5 Min.			
Volume Volume	Volume		From		То		Pad				Min S	<u>:</u>	20	10 Min.				
Max Press	Max Pres	Max Press		From		То					Avg				15 Min.			
	n Annulus Vol.		From		То		:				HHP Used			Annulus Pressure				
Plug Depth	Packer De	`   ⊢rom		To			Flush	Flush 1238BL			Gas Volume					al Load		
Customer Rep	ST7x	)		Station	Station Manager D.			OTT		Treater K. (F.			5664					
Service Units	37586	19.	889	198	43	1996	0 0	1010										
Driver Names	ESLEY	M	420VEZ	7		CHINRE	4											
Time	Casing-/ Pressure	Tubing Pressure Bt			Bbls. Pumped		R	ate			Service Log							
1:00 AM									01	11/	OCATI	ON SAFE TY ALCOTING . 51/2"/15.5# 1369.						
II:00Am)								•	Ru	M/			1/2"	115.5	\$1 /16	67.		
. (	· .	·						10	TURBO - 1, 3, 5, 7, 10									
									BA	SKE	7 - 17	)				-	,	
1:4/5 PM	<u> </u>								<u>CS</u>		ONIBY					<u> </u>		
1.50Pm									HX	<u>KU</u>	PTOC	<u> H,</u>	<u>//3/</u>	UHK.	CIRC	". te	<u>/KIG                                     </u>	
1. 10Pm	300 <u> </u>			5			<u>(0 H201</u>			<u>06</u>	THEAD							
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1:17PM	050	950		3			lo	,		MIX 1505KS. AA-201								
2:53Pm									Cu	AR	PUMP	<u> </u>	NE/	DROP	T.R	<u>. 12</u>	<i>UG</i>	
2:56PM	$\bigcirc$				$\mathcal{O}$		1	7 .	$ \circlearrowleft $	FIR	T D15	171	CEI	1/EK17			<del></del>	
3.07PM				`	7 <u>8</u>		4	2			PRES		RE				<u> </u>	
3:12Pm	9ccs				110		- 5				S RAT	- :	9 ° 5.	,				
3:15Pm	1500				<i>9</i> 3		4		1		Down		HE	<u>(1)</u>			_	
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10244	NE Hiw	ay	61 • F	2O. E	SOX	86T3 •	Pra	ı, KS (	o/124	-861	ょ・(620	) 672	<b>2-12</b> 0	л • Fax	(620	) 6 <i>72</i>	2-5383	