

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1094901

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 🗌 East 🗌 West
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.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
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:	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 If Alternate II completion, cement circulated from: sx cmt.
□ Deepening □ Re-perf. □ Conv. to ENHR □ Conv. to SWD □ Plug Back □ Conv. to GSW □ Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used:
Dual Completion Permit #:	
SWD Permit #: ENHR Permit #:	Location of fluid disposal if hauled offsite:
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date	QuarterSec. TwpS. 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 Name: _			Well #:		
Sec Twp	S. R	East West	County:					
open and closed, flow and flow rates if gas t	ving and shut-in presson surface test, along w	formations penetrated. I ures, whether shut-in pro vith final chart(s). Attach	essure reached stati n extra sheet if more	c level, hydrosta space is neede	itic pressures, bott d.	tom hole tempe	erature, fluid r	recovery,
		otain Geophysical Data a or newer AND an image		egs must be ema	ailed to kcc-well-lo	gs@kcc.ks.gov	n. Digital elec	tronic log
Drill Stem Tests Taken (Attach Additional	•	Yes No		_	on (Top), Depth ar		Samp	
Samples Sent to Geo	ological Survey	☐ Yes ☐ No	Nam	e		Тор	Datur	m
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No						
List All E. Logs Run:								
		CASING	RECORD Ne	ew Used				
		Report all strings set-	conductor, surface, inte	ermediate, product	ion, 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 P Additiv	
		ADDITIONAL	OFMENTING / OOL					
Purpose:	Depth		CEMENTING / SQL	JEEZE RECORD		araant Additiraa		
Perforate	Top Bottom	Type of Cement	# Sacks Used	S Used Type and Percent Additives				
Protect Casing Plug Back TD								
Plug Off Zone								
Did vou perform a hydra	ulic fracturing treatment o	on this well?		Yes	No (If No, ski	p questions 2 ar	nd 3)	
	=	raulic fracturing treatment ex	xceed 350,000 gallons		= ' '	p question 3)	,	
Was the hydraulic fractu	ring treatment information	n submitted to the chemical	disclosure registry?	Yes	No (If No, fill	out Page Three	of the ACO-1)	
Shots Per Foot		ON RECORD - Bridge Plug Footage of Each Interval Per			cture, Shot, Cement			Depth
	Сроспу Г	octago of Laon morvari of	ioratou	(>1	mount and rand or ma	teriar Good)		Борит
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or EN							
Fotimeted Device C	0" -	Flowing			Other (Explain)) O" D "		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf Wate	er B	bls. G	Gas-Oil Ratio	Gr 	ravity
DISPOSITI	ON OF GAS:	1	METHOD OF COMPLE	ETION:		PRODUCTIO	ON INTERVAL:	
Vented Sold		Open Hole	Perf. Dually	Comp. Con	mmingled			
	bmit ACO-18.)	Other (Specify)	(Submit)	ACO-5) (Sub	omit ACO-4)			

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	CUNDIFF A 2B
Doc ID	1094901

All Electric Logs Run

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

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	CUNDIFF A 2B
Doc ID	1094901

Tops

Name	Тор	Datum
HEEBNER	3750	
LANSING	3867	
KANSAS CITY	4177	
MARMATON	4278	
CHEROKEE	4415	
MORROW	4620	
ST. GENEVIEVE	4692	
ST. LOUIS	4783	



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

FIELD SERVICE TICKET 1717 03576 A

DATE OF 7	9-12 D	ISTRICT /7/7	P. 10	NEW &	WELL	PROD []INJ	☐ WDW	_8	USTOMER RDER NO.:	177.
CUSTOMER (Dry 1154	1	5.00	LEASE (
ADDRESS	-107 0 50.	- F		COUNTY Finney STATE 15						
CITY		STATE		SERVICE CF	nney	21				
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AUTHORIZED I		EQUIPMENT#	ND	JOB TYPE:				DAT	E AM TIN	AC.
19820	1111	EGOIPMENT#	HRS	2746Z	INS IO	TRUCK CALL		81		2
	LOCATIONOEP	r lib/cap	_ D02(C)HON ()02C)		ARRIVED AT		412		-
30463-10 LEA	SEMELLIFAC	Cunditt	4-2-13	38750	10	START OPER				,
	XIMO / WSM # _			37775	1	FINISH OPER				5
	K 0102	A STATE OF THE PARTY OF THE PAR	The production were the	ELCIV. New years		RELEASED	4.4		AM - 700	,
PRO	DUECT #_///	25.27 CAPEY	OPEX - Circle	Control of the Contro		MILES FROM	STATION TO	WELL	90	
ITEMPRICE REF. NO.	M/	ATERIAL, EQUIPMEN	T AND SERVICE	S USED	UNIT	(WELL OWNE	R, OPERATOR, UNIT PRIC		RACTOR OR AC	
12/01	A-Con Ble	·	H # 3548		' 5/L	340	12	120	1774.95 57	1
CLIIO	Prom Plus	Const			5/L	245	13	13	2996	00
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CC 102	Cello Flake		 		16	147	2.	78	408	38
	C-51	l e s			15	64	18	15	1200	ون
CC/30						1.		7-		0
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ORDERED BY CUSTOMER AND RECEIVED BY:--

FIELD SERVICE ORDER NO.

REPRESENTATIVE

(WELLOWNER OPERATOR CONTRACTOR OR AGENT)

15:25:07



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

TICKET NO. /7/703576

TEM/PRICE	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT	
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BA	SIC
ENERGY	SERVICES

ustomer /	<u> </u>	, Kansas	174	Lease No.		e II	Date	1.9-12	
850	NY NE	'A'	·- ·-	Well # 2/3	>	Service Receipt 3574			
asing 0/2	<u>ww</u>	Depth 18	20	County	n Bu	s	late 165		
b Type >	<u>u</u> 2	,,,,,	Formation			egal Description	10-23-3	4	
3	<u> </u>	Pipe [Data		F	Perforating	in the second	Cement Data	
sing size	sing size 8 3/8 24# Tubing Size			Shot			S/Ft Lead 340sk 7.4/41sk		
epth 18	29	3	Depth 5.3. 45	-1	From	0 6 %	D	7.4F425R	
lume , ,	3.56/5		Volume	9	From	x T	0	14.6d-5412.1#	
x Press	1500		Max Press	 , 	From	1	0	Tail in 243sk/mm 1.72425k	
II Connec	clion 8 5/8		Annulus Vol.	· · · · · · · · · · · · · · · · · · ·	From	From To	0	7.0	
	1780		Packer Depth		From	Ţ	0	6-3 36d-512 14.8	
Time	Casing Pressure	Tubing Pressure	Bbls. Pumbed	Rate			Service	e Log	
200						A	me O	reactor	
200						Sax	ets Ma	to Milo	
210						Ris	Auran	Cash	
520						Circ	dot w	New	
550		20				HOOK	INTO	BE5	
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George	En Butt	250 Marce			
Customer Representative	Station Manager	Cementer	Taylor Printing, Inc.		
		15:25:0	7		

ENERGY SERVICES

1700 S. Country Estates Rd. P.O. Box 129

FIELD SERVICE TICKET 1717 03728

Liberal, Kansas 67905 Phone 620-624-2277 PRESSURE PUMPING & WIRELINE TICKET NO. DATE CUSTOMER ORDER NO.: OLD PROD INJ □ WDW DATE OF JOB DISTRICT WELL NO. LEASE #28 CUSTOMER STATE KS COUNTY **ADDRESS** STATE SERVICE CREW CITY 1.5 AUTHORIZED BY TE JOB TYPE: 242 DATE TIME **EQUIPMENT#** HAS **EQUIPMENT#** HRS TRUCK CALLED **EQUIPMENT#** HAS 200 ARRIVED AT JOB PM-300 61312 274620 7 304634 19820 7 START OPERATION 11-12 1 FINISH OPERATION 6.1312 RELEASED AM-SOO ひはつ 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:

ITEM/PRICE	MATERIAL FOLUDATAT	AND SERVICES LISED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUN	ı _T
REF. NO.	MATERIAL, EQUIPMENT	AND SERVICES USED			- "Andre - 45905"	14.61.51.5	70
CL104	50-50 POZ		5/5	290	8 25		50
CC113	Gypsom		16	1220 -	56		20
CLIII	Salt		16	1785	38	677	54
CL103	6-15		16	147	9 38	1378	36
CCIOS	C-41.P		16	61	3 00	183	00
CL ZOI	Gilsonite	•	16	1453 2	50	726	50
CF 251	Guide Shoe		EA	1		187	50
CF 1451	Insat Floor		CA	1	į.	1610	25
CF 103	Nulber Plus		Ct	1 +		78	75
CF4105	Stop Callor		EA	1 +		63	00
CF445Z	Centralizer 5/2		E4	25	56 25	1406	25
(0155	Super Flush 11		306	500 -	1 15	575	
E101	Heavy Equipment Mileace		mi	150	5 25	787	
CE 240	Blending & May Chage		5K	790	1 05	304	50
£113	Bulk Deligen Change		to	915	120	1098	_
CE205	Page Ohere		4/3/5	/	7 3	1890	00
CE 504	Plus Contan Charl		306	1		187	50
£100	PICKUS Miles		mi	75	3 19	239	25
5003	Service Supervises	0	CA	1	3.2	131	25
	:05/1 e3	AP LOCATION/DEP	T. L.b.C.	AP DOOR	SUBFOTAL	13563	85
Cl	IEMICAL / ACID DATA:	LEASE/WELL/FAC_			NON DOZE	رهادوا	100
		MAXIMO等較以后集& E	EQUIPMENT	%TAX	ON \$		
		TASK MATERIADS		%TAX			
		PROJECT # 1/12'	529 0	DEV DIV	T-30.ZFOTAL		-
	E.	Circle Doc Turn	141 Rec	(IA/CI/DI	· Circie one PORTED □		1
SERVICE REPRESENTATI	Small Chark	THE ABOVE THE EBIAL AND ORDERED BY CUSTOMER	SERVICES	dis	e baen received.		



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

TICKET NO. 17/7037284

15:40:51

TEM/PRICE	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT QUANTITY		UNIT PRICE	\$ AMOU	\$ AMOUNT	
1105	Cement Dorta Agustion Monitar	er	1		412	6	
1105	CAMBROL DOCK MEGLEBILION PROBLET	1			1.0-		
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1	ENERGY	SERVICES		*			·	Cement R	eport
tomer De 160			Lease No.			Date 6-13-12			
Lease A. T. A'			Weil # 25			Service Receipt			
asing 5	*/o	Depth 50	503	County Finney			State		
b Type	<u> </u>		Formation	7		Legal Description	n	;	
		Pipe [Data	·		Perforating	g Data	Cement D	ata
asing size	5/2 /	7#	Tubing Size			Shots	Ft	Lead	
epth 5	(100)	. 7/	Depth 5-3 44		From	m To			
lume,	16/4		Volume		From	om To			
ax Press	0.5 M		Max Press	F		То		7.366/st 13.54	
eli Conne	1/2		Annulus Vol.		From	From To			
ug Depth	4956		Packer Depth		From		То	7.366bst /	13.5#
Time	Casing Pressure	Tubing Pressure	Bbls. Pumbed	Rate			Servic	e Log	:
160						A	mre Or	hacation	
430						Safor	5 Mech	- Ky Up	
400						Nis	flore, C	asing	
700						Circus	whe w	lig	
740						HOOK	111 00	TSE 5	***
820	2900		1.6	1.0	<u> </u>	P11550	r Jes	T	
1825	300		5	50		Pump 11	late Spe	war	
1830	275		/2	5.0		Ping S	rper Flu	sk	
1835	750		5	50		Pung III	vt spa		
1840	200		68	50	<u> </u>	Pomt	cont la	13.5#	
1700			<u> </u>	<u> </u>	<u> </u>	Drog 1	Pag- W	sh 10	
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Service Un	nits 198	20	27462	38750-3	7725				<u> </u>
Oriver Nam	· · ·	ma	addie	Romo	·-				

Dariel	Jan Jedt	Asver			
Customer Representative	Station Manager	Cementer Taylor Printing, Inc			
		15:40:51			

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/

Sam Brownback, Governor

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner

September 26, 2012

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

Re: ACO1 API 15-055-22159-00-00 CUNDIFF A 2B NW/4 Sec.10-23S-34W Finney 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