



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1096730
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: _____



1096730

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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Form	ACO1 - Well Completion
Operator	Roberts Resources, Inc.
Well Name	Beran - Trapp 1-7
Doc ID	1096730

Tops

Name	Top	Datum
Anhydrite	669	+955
Topeka	2548	-924
Heebner	2777	-1153
Toronto	2794	-1170
Lansing	2828	-1204
B/KC	3110	-1486
Simpson	3304	-1680
Arbuckle	3354	-1730



PAGE	CUST NO	INVOICE DATE
1 of 1	1003562	09/02/2012
INVOICE NUMBER		
1718 - 90993210		

Pratt (620) 672-1201
 B ROBERTS RESOURCES INC
 I 2020 N TYLER RD STE 106
 L WICHITA
 L KS US 67212
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Beran Trapp 1-7
 O LOCATION
 B COUNTY Russell **71730**
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

Cement Surface

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40506601	19843		Net - 30 days	10/02/2012

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 08/31/2012 to 08/31/2012</i>				
0040506601				
171806871A Cement-New Well Casing/Pi 08/31/2012				
Cement 8 5/8 Surface				
60/40 POZ	225.00	EA	7.80	1,754.99 T
Celloflake	57.00	EA	2.41	137.09 T
Calcium Chloride	582.00	EA	0.68	397.22 T
"Wooden Cmt Plug, 8 5/8""	1.00	EA	104.00	104.00
"Unit Mileage Chg (PU, cars one way)"	100.00	MI	2.76	276.25
Heavy Equipment Mileage	200.00	MI	4.55	910.00
"Proppant & Bulk Del. Chgs., per ton mil	970.00	EA	1.04	1,008.80
Depth Charge; 0-500'	1.00	EA	650.00	650.00
Blending & Mixing Service Charge	225.00	BAG	0.91	204.75
Plug Container Util. Chg.	1.00	EA	162.50	162.50
"Service Supervisor, first 8 hrs on loc.	1.00	EA	113.75	113.75

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	5,719.35
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	190.01
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	5,909.36
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



PAGE 1 of 1	CUST NO 1003562	INVOICE DATE 09/07/2012
INVOICE NUMBER 1718 - 90997734		

Pratt (620) 672-1201
 B ROBERTS RESOURCES INC
 I 2020 N TYLER RD STE 106
 L WICHITA
 L KS US 67212
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Beran Trapp 1-7
 O LOCATION
 B COUNTY Russell
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E
73550
Cement ~~5 1/2"~~ Longstring
Status 2

JOB # 40508713	EQUIPMENT # 19905	PURCHASE ORDER NO.	TERMS Net - 30 days	DUE DATE 10/07/2012
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	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 09/06/2012 to 09/06/2012</i>				
0040508713				
171806981A Cement-New Well Casing/Pi 09/06/2012				
Cement 5 1/2" Longstring				
50/50 POZ	125.00	EA	7.15	893.75 T
60/40 POZ	50.00	EA	7.80	390.00 T
Celloflake	32.00	EA	2.41	76.96 T
Gypsum	525.00	EA	0.49	255.94 T
FLA-322	53.00	EA	4.88	258.38 T
Gilsonite	625.00	EA	0.44	272.19 T
Mud Flush	500.00	EA	0.56	279.50 T
KCL Potassium Chloride	288.00	EA	0.98	280.80 T
"Top Rubber Cmt Plug, 5 1/2""	1.00	EA	68.25	68.25
"Guide Shoe - Regular. 5 1/2"" (Blue)"	1.00	EA	162.50	162.50
"Turbolizer, 5 1/2"" (Blue)"	8.00	EA	71.50	572.00
"Cement Scratchers Cable Type, 5 1/2"" "	9.00	EA	48.75	438.75
Flapper Type Insert Float Valve 5 1/2"(B	1.00	EA	139.75	139.75
"Unit Mileage Chg (PU, cars one way)"	100.00	MI	2.76	276.25
Heavy Equipment Mileage	200.00	MI	4.55	910.00
"Proppant & Bulk Del. Chgs., per ton mil	740.00	EA	1.04	769.60
Depth Charge; 3001-4000'	1.00	EA	1,403.99	1,403.99
Blending & Mixing Service Charge	175.00	BAG	0.91	159.25
Plug Container Util. Chg.	1.00	EA	162.50	162.50
"Service Supervisor, first 8 hrs on loc.	1.00	EA	113.75	113.75

PLEASE REMIT TO: BASIC ENERGY SERVICES, LP PO BOX 841903 DALLAS, TX 75284-1903	SEND OTHER CORRESPONDENCE TO: BASIC ENERGY SERVICES, LP PO BOX 10460 MIDLAND, TX 79702	SUB TOTAL TAX INVOICE TOTAL	7,884.11 224.72 8,108.83
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BASIC

energy services, L.P.

TREATMENT REPORT

Customer Roberts Resources, Inc.	Lease No.	Date 9-6-12
Lease Beran Trapp	Well # 1-7	
Field Order # 6,981	Station Pratt, Kansas	Casing" 5 1/2
Type Job C.N.W. - Longstring	Formation	Depth 15.9 Lb 3,443 Feet
		County Russell
		State Kansas
		Legal Description 7-125-13W

PIPE DATA		PERFORATING DATA		CEMENT USED		TREATMENT RESUME	
Casing Size 5 1/2	Tubing Size 5 LB. FT.	Shots/Ft	125	sacks	50/50 Poz w	with	28 Gal., 5 1/2 FLA
Depth 3,443 Feet	Depth	From	To	.25 Lb / SK cellflute, 5L	Max	6.75 SK. Gilsomite	ASIR 322,58 tCL,
Volume 81.9 Bbl.	Volume	From	To	14 Lb / Gal., 5.51 Gal. / SK.	Min	1.35 CU. FT. / SK.	10 Min.
Max Press 1,700 PSI	Max Press	From	To		Avg		15 Min.
Well Connection Plug Container	Annulus Vol.	From	To	50 sacks 60/40 Poz to plug	HP Used	Rat (30 sacks) and Mouse (20 sacks) holes	Annulus Pressure
Plug Depth 3,401 Feet	Packer Depth	From	To	Flush 81 Bbl. Fresh Water	Gas Volume		Total Load

Customer Representative Kent Roberts	Station Manager David Scott	Treater Clarence R. Messich
Service Units 37,216	19,903	19,905
Driver Names Messich	Mattal	Young
21,010		

Time A.M.	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
3:15					Trucks on location and hold safety meeting.
6:45					Val Drilling start to run Regular Guide Shoe, Shoe Joint with Auto-Fill Insert screwed into collar and a total of 82 Joints new 15.5 Lb / Ft 5 1/2" casing. A Turbolizer was installed on collars # 1, 5, 9, 11, 12, 13, 14 and # 16.
8:30					Casing in well. Circulate and Reciprocate for 1 Hour.
9:23		1,800			Shut in well. Pressure Test Open well.
9:25	300			6	Start Fresh Water Pre-Flush.
			20	6	Start mud Flush
			32	6	Start Freshwater Spacer
	300		52	5	Start Mixing 125 sacks 50/50 Poz cement.
	-0-		82		Stop pumping. Shut in well Wash pump and lines. Release Top Rubber Plug Open well.
9:43	100			6.5	Start Fresh water Displacement.
			61	5	start to lift cement.
9:56	1,700	700	81		Plug down.
					Pressure up.
					Release pressure. Insert held.
	-0-		7-5		Plug Rat and Mouse holes.
					Wash up pump truck.
10:45					Job Complete.
					Thank You.
					Clarence, Milte, Steve

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
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

October 24, 2012

Kent Roberts
Roberts Resources, Inc.
2020 N TYLER RD, STE 106
WICHITA, KS 67212

Re: ACO1
API 15-167-23819-00-00
Beran - Trapp 1-7
NE/4 Sec.07-12S-13W
Russell 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,
Kent Roberts