



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1120225  
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: \_\_\_\_\_



1120225

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](mailto: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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	FEDERAL FARM MORTGAGE C 1
Doc ID	1120225

All Electric Logs Run

ARRAY COMPENSATED TRUE RESISTIVITY
BOREHOLE COMPENSATED SONIC ARRAY
MICROLOG
SPECTRAL DENSITY DUAL SPACED NEUTRON
INSITE DIRECTIONAL TOOL LOG

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	FEDERAL FARM MORTGAGE C 1
Doc ID	1120225

Tops

Name	Top	Datum
HEEBNER	3924	
LANSING	3997	
MARMATON	4486	
CHEROKEE	4625	
ATOKA	4778	
MORROW	4826	
ST. GENEVIEVE	4883	
ST. LOUIS	4935	



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

FIELD SERVICE TICKET  
1717 03136 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB: <u>11/4/12</u>	DISTRICT: <u>1717</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>Oxy USA</u>	LEASE: <u>Federal Farm Mortgage C1</u>						WELL NO.:	
ADDRESS:		COUNTY: <u>Finney</u>	STATE: <u>KS</u>					
CITY:	STATE:	SERVICE CREW: <u>Royce, Ed B, Juan L.</u>						
AUTHORIZED BY: <u>Tyce</u>		JOB TYPE: <u>242 Surface</u>						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	TIME
<u>194888</u>	<u>8.5</u>							<u>11:00</u>
<u>372233</u>	<u>8.5</u>					ARRIVED AT JOB		<u>2:30</u>
<u>30464</u>	<u>8.5</u>					START OPERATION		<u>7:57</u>
<u>19827</u>	<u>8.5</u>					FINISH OPERATION		<u>10:00</u>
						RELEASED		<u>11:00</u>
						MILES FROM STATION TO WELL		<u>55</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
CL101	A-Con Blend	SK	375	13 02	4882 50
CL110	Premium Plus	SK	245	11 41	2795 45
CC109	Calcium Chloride	Lb	1521	74	1125 54
CC102	Colloflake	Lb	156	2 59	404 04
CC130	C-51	Lb	91	17 50	1242 50
CF253	Guide Shoe	EA	1		266 00
CF1453	Flapper Float Valve	EA	1		196 00
CF4405	Centralizer	EA	15	101 50	1522 50
CF105	TOP Plug	EA	1		157 50
CF4109	Stop Collar	EA	1		70 00
CF4556	Basket	EA	1		735 00
E101	Heavy Equip. Mileage	Mi	165	4 90	808 50
CF240	Blending & Mixing Charge	SK	620	98	607 60
E113	Bulk Delivery	Tm	1,604	1 12	1798 72
CE202	Depth Charge 1001' to 2000'	4hr	1		1050 00
QE504	Plug Container	Job	1		175 00
E100	Pickup Mileage	Mi	55	2 98	163 90
S003	Service Supervisor	EA	1		122 50
T105	Cement Data Acq.	EA	1		385 00

CHEMICAL / ACID DATA:			

AP LOCATION/DEPT. Libcap D02  NON D02  TOTAL

LEASE/WELL/FAC Federal Farm Mortgage C1 20118, 25

MATERIALS 0102 ELEMENT 3023

PROJECT # 115480 CAPEX/ OPEX - Circle one

SPO / BPA   UNSUPPORTED

PRINTED NAME Caruban Flegg

SERVICE REPRESENTATIVE: Chad Hinz

SIGNATURE: [Signature]

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]

FIELD SERVICE ORDER NO. \_\_\_\_\_

(WELL OWNER OPERATOR OF CONTRACTOR OR AGENT)





# Cement Report

Customer <u>Oxy USA</u>	Lease No.	Date <u>11/4/12</u>
Lease <u>Federal Farm Mortgage C</u>	Well # <u>1</u>	Service Receipt
Casing <u>45/8</u>	Depth <u>1941</u>	County <u>Finney</u> State <u>Ks</u>
Job Type <u>Surface</u>	Formation	Legal Description <u>20-25-32</u>

Pipe Data		Perforating Data		Cement Data
Casing size <u>45/8</u>	Tubing Size	Shots/Ft		Lead <u>3755x A-Com @12.1</u>
Depth <u>1960.98</u>	Depth	From	To	
Volume <u>121.68</u>	Volume	From	To	<u>2.40 14.80</u>
Max Press <u>1500</u>	Max Press	From	To	Tail in <u>2455x P.P. @14.8#</u>
Well Connection <u>P.C.</u>	Annulus Vol.	From	To	
Plug Depth	Packer Depth	From	To	<u>1.34 6.35</u>

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<u>19:30</u>					<u>on loc spot tracks, R.O., setting int</u>
<u>19:59</u>	<u>2500</u>				<u>Test Lines</u>
<u>20:02</u>	<u>240</u>		<u>0</u>	<u>5</u>	<u>start mixing @ 12.1#</u>
<u>20:28</u>	<u>210</u>		<u>160</u>	<u>4</u>	<u>on tail @ 14.8#</u>
<u>20:45</u>	<u>Ø</u>		<u>59</u>	<u>Ø</u>	<u>Finished Mixing, Drop Plug</u>
<u>20:49</u>	<u>Ø</u>		<u>0</u>	<u>5</u>	<u>start Disp, Washup</u>
<u>21:11</u>	<u>720</u>		<u>101</u>	<u>2</u>	<u>slow Rate</u>
<u>21:21</u>	<u>1350</u>		<u>122</u>	<u>Ø</u>	<u>Plug Down Check float @ 21:26</u>
<u>21:30</u>	<u>1500</u>				<u>Test Csg</u>
<u>22:00</u>	<u>Ø</u>				<u>Rel. Psi F</u>
					<u>Job Complete</u>

Service Units	<u>19858</u>	<u>3922339726</u>	<u>3046437724</u>	<u>1982919566</u>
Driver Names	<u>C Hinz</u>	<u>R. Dds</u>	<u>B. Lopez</u>	<u>Ech Barman</u>

Graham Flagg  
Customer Representative

Jerry Bennett  
Station Manager

Chad Hinz  
Cementer



**BASIC**<sup>SM</sup>  
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 03663 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB <b>11-11-12</b> DISTRICT <b>1717</b>		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 <b>Oxy USA</b>		LEASE <b>Federal Farm Mortgage 'C' #1</b> WELL NO.:							
ADDRESS		COUNTY <b>Finney</b> STATE <b>KS</b>							
CITY STATE		SERVICE CREW <b>I. Chavez, Eddie, Juan L.</b>							
AUTHORIZED BY <b>Ben Bennett JRB</b>		JOB TYPE: <b>242 Long Stay</b>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<b>19820</b>	<b>11</b>	<b>70897</b>	<b>11</b>	<b>30464</b>	<b>11</b>		<b>11-11-12</b>		<b>1200</b>
		<b>19570</b>	<b>1</b>	<b>37724</b>	<b>1</b>	ARRIVED AT JOB			<b>430</b>
						START OPERATION	<b>11-11-12</b>		<b>1000</b>
						FINISH OPERATION	<b>11-12-12</b>		<b>1230</b>
						RELEASED	<b>11-11-12</b>		<b>130</b>
						MILES FROM STATION TO WELL			<b>35</b>

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
CL104	50-50 PIZ	SK	275	7.70	2117.50
CC113	Gypsum	16	1155	53	612.15
CC111	Salt	16	7688	35	590.80
CC103	C-15	16	139	8.75	1216.25
CC105	C-41P	16	58	2.80	162.40
CC201	Gilsonite	16	1375	47	646.25
CF251	Guide Shoe	EA	1		175.00
CF1451	Insert Float Valve	EA	1		150.50
CF103	Rubber Plug	EA	1		73.50
CF4105	Stag Collar	EA	1		58.80
CF4452	Centralizer 5/2	EA	25	52.50	1312.50
CC155	Super Flush II	gal	500	1.07	535.00
E101	Heavy Equip. Maint. Mileage	mi	70	4.90	343.00
CE240	Blend & Mix Change	SK	275	98	269.50
E113	Bulk Delivery Charge	tm	404	1.12	452.76
CE206	Depth Change	4hrs	1		2016.00
CE504	Pipe Container Charge	job	1		175.00
E100	Pickup Mileage	mi	35	2.98	104.30
SC03	Service Supervisor	EA	1		122.50

SUB TOTAL **11518.71**

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE:

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

(WELL OWNER/OPERATOR/CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.







# Cement Report

Customer	Oxy USA	Lease No.		Date	11-11-12
Lease	Federal Farm Mortgage "C"	Well #	1	Service Receipt	03663
Casing	5 1/2	Depth	5110	County	Finney
Job Type	242 L.S.	Formation		Legal Description	20-25-32

Pipe Data		Perforating Data		Cement Data
Casing size	5 1/2 11.0#	Tubing Size		Lead
Depth	5110	Depth	44' 5.5"	
Volume	118615	Volume		
Max Press	2500	Max Press		Tail in 275SLK 50-50
Well Connection	5 1/2	Annulus Vol.		1.58 FPS-SLK POZ
Plug Depth	5063	Packer Depth		7.366d-SLK 13.5#

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
430					Arrive on location
500					Safety Meeting - Rig Up
800					Rig Run Casing
1000					Circulate w/ris
1010					Hook up to BES
1015	3000		11	1.1	Pressure Test
1020	250		5	5.0	Pump water spacer
1025	300		10	5.0	Pump Super Flock II
1030	300		5	5.0	Pump water spacer
1035	250		72	5.0	Pump cement @ 13.5#
1055					Drop Plug - Wash Up
1100	400		108	6.5	Displace
1125	1000		10	7.0	Slow Down Displace
1130	1500		11	11	Land Plug - Float Held - TEST Casing -
1230	2500				Plug - Measure Hole
1330					Job Complete
Thanks For Using Basic Energy Services					

Service Units	19820	70897-19570	32164-37724		
Driver Names	J. Chuan	Eddie	Juan L.		

EARLY

Customer Representative

*Serg Best*

Station Manager

*Samuel Chavez*

Cementer

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

February 27, 2013

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

Re: ACO1  
API 15-055-22182-00-00  
FEDERAL FARM MORTGAGE C 1  
NE/4 Sec.20-25S-32W  
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