

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

the same are true and correct, so help me God.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1120624

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:			AF	_ API No. 15							
Name:				Spot Description:							
Address 1:			_	Sec Twp S. R East							
Address 2:			_	Feet from North / South Line of Section							
City:	State:	Zip:+ +	_	Feet from East / West Line of Section							
Contact Person:			Fo	Footages Calculated from Nearest Outside Section Corner:							
Phone: ()					NE NW	SE SW					
Type of Well: (Check one)	Oil Well Gas Well	OG D&A Cathodi	c Co	County:							
Water Supply Well	Other:	SWD Permit #:		-		Well #:					
ENHR Permit #:	Gas Sto	rage Permit #:									
Is ACO-1 filed? Yes	No If not, is well	l log attached? Yes	1			ved on: (Date)					
Producing Formation(s): List A	All (If needed attach another	sheet)	by	:		(KCC District Agent's Name)					
Depth to	Top: Botto	m: T.D	_{Plu}	uaainc	a Commenced:						
Depth to	Top: Botto	m: T.D		00 0	-						
Depth to	Top: Botto	m:T.D	```	-993	y						
				—							
Show depth and thickness of a		ations.									
Oil, Gas or Water	Records			rd (Su	ırface, Conductor & Produc	tion)					
Formation	Content	Casing	Size		Setting Depth	Pulled Out					
Describe in detail the manner cement or other plugs were us	. 00		•			s used in introducing it into the hole. If					
Plugging Contractor License #	<i>‡</i> :		Name:								
Address 1:			Address 2: _								
City:			Sta	ate:		Zip:+					
Phone: ()											
Name of Party Responsible fo	or Plugging Fees:										
State of	County, _		, s	SS.							
	(Print Name)			E	imployee of Operator or	Operator on above-described well,					

Submitted Electronically

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and



PAGE	CPT NO	INVOICE DATE
1 of 1	1054409	02/06/2013

INVOICE NUMBER

1718 - 91112616

Pratt

(620) 672-1201

B VAL ENERGY

1 200 W DOUGLAS AVE STE 520

_ WICHITA

KS US

67202

o ATTN:

ACCOUNTS PAYABLE

LEASE NAME

Brent Diel 4-29

LOCATION В

COUNTY

Barber

STATE

KS

JOB DESCRIPTION

Cement-New Well Casing/Pi

JOB #	EQUIPMENT #	PURCHASE	ORDER 2003		TERMS	DUE DATE
40561956	20920	9208	-4		Net - 30 days	03/08/2013
			QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates	: 02/05/2013 to 02	2/05/2013	:		·	
0040561956						
1718077254 Come	nt-New Well Casing/Pi ()2/05/2013				
Cement 8 5/8" Surfa	_	72,0372013				
60/40 POZ			190.00		9.00	· ·
Common Cement			200.00		12.00	2,400.00 T
Celloflake			48.00		2.78	
Calcium Chloride			868.00		0.79	
"Wooden Cmt Plug,			1.00		120.00	
"Baffle Plate Alum.,			1.00		127.50	
"8 5/8"" Basket (Blu			1.00		236.25	
"Unit Mileage Chg (f			50.00		3.19	
Heavy Equipment M	_		150.00		5.25	
	el. Chgs., per ton mil		880.00		1.20	,
Depth Charge; 0-50			1.00		750.00	
Blending & Mixing S	_		390.00		1.05	
Plug Container Util.			1.00		187.50	
"Service Supervisor	, tirst 6 hrs on loc.		1.00	ŁA	131.25	131,25
, ·						
PLEASE REMIT	TO: SE	ND OTHER CORRES	PONDENCE TO)·		

PLEASE REMIT TO:

SEND OTHER CORRESPONDENCE TO:

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

801 CHERRY ST, STE 2100 FORT WORTH, TX 76102

SUB TOTAL TAX 8,891.63 359.65

INVOICE TOTAL

9,251.28

DALLAS, TX 75284-1903



FIELD SERVICE TICKET 1718 07725 A

DATE OF JOB 0.2	-0 E -1	2 DIS	TRICT PAINT			NEW OLD PROD INJ WDW CUSTOMER WELL ORDER NO.:									
CUSTOMER			UX47	<u> </u>		LEASE Brent DIEL 429 WELL NO.									
ADDRESS	VAF			**************************************											
						COUNTY CARRER STATE									
CITY			STATE			SERVICE CREW Juffing, wright Phys									
AUTHORIZED B	BY					JOB TYPE:	CNW	85/8 5	Confece						
EQUIPMENT			EQUIPMENT#	HRS	EQI	JIPMENT#	HRS	TRUCK CALL	ED OF THIS	TE AM TIME					
<u> </u>		\rightarrow						ARRIVED AT	JOB	AM PM					
D 959 - 19	918 2	-	·	_				START OPE	RATION 04-13	AM 1/29					
3/900	3/900						 	FINISH OPE	RATION /// =	AM 1/50					
							 	RELEASED	(2-15-1	3 AM /24-					
- F4 ,			= 11				1	MILES FROM	STATION TO WE	L 50					
EM/PRICE REF. NO.		MAT	ERIAL, EQUIPMENT	AND SERVI	CES US	ED	UNIT	(WELL OWNE							
REF. NO.				AND SERVI	CES US	ED		QUANTITY	UNIT PRICE	\$ AMOUNT					
r 103	60/40	<u>ج درگر</u> 	Cot t				SK	200		7 25 6 F					
(102	Collick						16	48		127					
107	raking	· d	describe				1/6	86,8		911					
	7	11	41 8/8					10,00,000							
F 153	Wood.	- P/	41 6/8				54			1600					
F 153 = 7:53	EHEFLE	Pla	4 8 18				5H.	1 2		1600					
= 753 = 1903	ENFELC ENFELC ENFELC	Pla	4			:				1600					
F 753 F 1903 100	EHFFLE	Pla	40	-		:	50	1 /		2/3 = 2/2 =					
F 753 F 1903 100	ENFELO ENSKET Dickop Heas	Ma	te tai			<u>:</u>	50 5H	150		2/3 2/2 1050 C					
= 753 = 1903 100	EHFFLE BASKS+ Dicksy	Ma	40			:	50 5H	,		2/3 = 2/2 =					
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F 753 F 1903 100	ENFELO ENSKET Dickop Heas	Pla Selve	te tai	,		:	30 5 H 20 3777 5 H 5 K	150		2/3 2/2 1050 C					
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2 753 100 101 200 240 240 2504 203	ENEELE BASKST Heas Bulk D. 11 Plage	Pla Selve il	to air	,	SE	RVICE & EQUI	FA OU SA SA SA SA SA	150	(N)	2/3 2/2 1050 0 1408 0 246 0 250 0 175 0					
= 7€3 100 101 = 113 300 340 3504 203	ENERICE ENERAL DICKA DIC	Pla Selve il	to air	,		RVICE & EQUI	FA OU SA SA SA SA SA	/50 290 /	SUB TOTAL K ON \$ K ON \$	2/3 2/2 1050 0 1408 0 246 0 250 0 175 0					

THE ABOVE MATERIAL AND SERVICE

ORDERED BY CUSTOMER AND RECEIVED BY:

FIELD SERVICE ORDER NO.

REPRESENTATIVE

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

SERVICE



TREATMENT REPORT

Customer V	tomer VAL 220017 Lease No.										Date					
Lease Z	CONT O.			W	ell#	1 2	9				02	- (25/	<u> </u>		
Field Order #	Station	2117	- K.				Casing	De	pth L	2	County	401	6/5		Stat	te ک
Type Job	w 8%							Formati	on				Legal D کارنے	escription	. //	/
	DATA	1	ORAT	ING	DATA		FLUID U	JSED			TF	EAT		RESUM		
Casing Size	Tubing Size	Shots/F	t			Ac	Acid				RATE F	PRES	SS	ISIP		
Depth 7	Depth	From		То		Pr	e Pad			Max				5 Min.		
/olume	Volume	From		То	Pad-				٨	Viin				10 Min.		
Max Press	Max Press	From		То		Fra	ac		_	۸vg				15 M in.		
Well Connection	n Annulus Vol.	From		То						HHP Use				Annulus		re
lug Depth	Packer Depth	From		То		<u> </u>	ush			Gas Volui				Total Lo	ad	
Customer Rep	resentative				Station	Mai	nager	4 2 5	11	_	Treate	2	1 7	<u>Aliji</u>	<u> </u>	
		7.8	£ 1000		72		1 700									
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							ratt, KS (



INVOICE DATE CP NO PAGE 1004409 02/14/2013 1 of 1

INVOICE NUMBER

1718 - 91119181

Pratt

(620) 672-1201

B VAL ENERGY

I 200 W DOUGLAS AVE STE 520

_ WICHITA

KS US

67202

т o ATTN:

LEASE NAME

Brent Diel

4-29

LOCATION

COUNTY

STATE

KS

Barber

т

JOB DESCRIPTION Cement-New Well Casing/Pi

JOB CONTACT

ATTN:	ACCOUNTS PA	AYABLE REC		 : نو		
JOB #	EQUIPMENT #	PURCHASE	ORDER NO.		TERMS	DUE DATE
40564452	19905	923	3-4		Net - 30 days	03/16/2013
or Sorvino Datos	: 02/12/2013 to 02/	12/2012	QTY	U of M	UNIT PRICE	INVOICE AMOUN
)40564452	. 02/12/2013 (0 02/	12/2013				
71807845A Ceme Cement P.T.A.	nt-New Well Casing/Pi 02	/12/2013				
50/40 POZ	•		170.00		9.00	•
Cement Gel Unit Mileage Chg (F	U, cars one way)"		294.00 50.00		0.19 3.19	
leavy Equipment Mi			100.00		5.25	
	el. Chgs., per ton mil		368.00		1.20	
Depth Charge; 501'- Blending & Mixing So			1.00 170.00		899.86 1.05	
Service Supervisor,	-		1.00		131.23	
TINGE SEMIT	TO. CEN	D OTHER CORRES	DOMESTICE MA			· - · · · · · · · · · · · · · · · · · ·

PLEASE REMIT TO:

SEND OTHER CORRESPONDENCE TO:

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

801 CHERRY ST, STE 2100 FORT WORTH, TX 76102

SUB TOTAL TAX

3,920.25 115.70

INVOICE TOTAL

4,035.95

DALLAS, TX 75284-1903

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

FIELD SERVICE TICKET 1718 07845 A

	PRESSURE P	UMPIN	G & WIRELINE	9-34	ts-	-11W	f	DATE	TICKET NO						
DATE OF JOB	2.13	DIS	TRICT Pratt, T					PROD [INJ	□ WDW	□ CI	JSTOMER RDER NO.:				
CUSTOMER V	al En		Incorpor			LEASE Brent Diel WELL NO.4;									
ADDRESS			· · ·			COUNTY Barber STATE Tansas									
CITY			STATE			SERVICE CREW Messich M. Mattal C Gibson									
AUTHORIZED B	Υ					JOB TYPE: CNW. Pluy To Abandon									
EQUIPMENT	T# HF	RS	EQUIPMENT#	HRS	EQU	IIPMENT#	HRS	TRUCK CALL		PATI	TIN	Æ			
3T 216	12	C.					-	ARRIVED AT		12 ; 2	FRP (n =				
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19960-21,0	10 12	5						RELEASED	2.12	13	AB	30			
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ITEM/PRICE REF. NO.	nis contract wi		ewritten consent of an o				UNIT	GUANTITY	R, OPERATOR,	—Т	RACTOR OR AG				
CP 103	60/40		z Cement				sh	170		T &	2.040	∞			
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E 101	Heavy	Eav	DMent Mile	Paue			/h:	100		 7	700	∞			
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SE 201	Ce Man	t Puz	np: 50 Feet T	al onote			hrs	4		4	1.200	_			
CE 240	Blendi	<u>Ma a</u>	rd MixingCel	nent	-		óπ	170		5	238				
5003	Service	<u>:e S</u>	upervisor				h15	8		\$	175	00			
			***************************************					L	SUB TO	TAL		 			
СНЕ	EMICAL / ACI	D DATA:		Ī .					Prz	<u> </u>	3920	25			
						RVICE & EQUIF	PMENT		ON \$		<u> </u>				
				}	MA	TERIALS		%1AX	CON \$	DTAL		 			
SERVICE 6						RIAL AND SER					· · · · · · · · · · · · · · · · · · ·				
REPRESENTATA	#. 100	$\kappa \parallel$	suzid .	ORDERED BY	CUS	TOMER AND F	RECEIVE	D BY:	165	-f					



TREATMENT REPORT

che,	5 7 5	-		U B, 1	L . / .													
Lease	16197.	Ι'n	cor pe	ojate	∞ II	ease No /ell # ப					Date)_ ′	1) -	1	Z		
Field Order #	トカナーブ (Statio	n 🗁		ļ			1 2	Casing)	Depth		County [2	<u></u>	\times_{-1}	State			
Type Job			ratt,	<u> </u>					Formation	-]			o <u>e r</u> pal Desc	ription		1545		
	<u> </u>	! V	y To 1				1				•	10				W		
	DATA				TING	DAFA	Men	7 (0)310	USED	TREATMENT RESUME								
Casing Size	Tubing Si	Dr ₁	\$hots/F	لرد	1	70		chs 60	0/40 Pa		RATE PE	PRESS ISIP						
Depth	Depth		From		То		172	13.7	316.1G	Max 6.9	12 Gal	15h.	1 4	45 CUFTISK				
Volume	Volume		From		То		/Read		·• .	Miń	_		1	10 Min.				
Max Press	Max Pres 3 0 0 D	is > I	From		То		Fig	30 C		Avg		·	1	5 Min.				
Well Connection	n Annulus \	∕ol.	From		То					HHP Used			Α	nnulus Pr	essure			
Plug Depth	Packer D	epth	From		То			ish To-	Water	Gas Volum	e		Т	Total Load				
Customer Rep	resentative	nd	y 5 m	11 h		Statio	n Mar	nager Dal	11d Sco	 	Treater	an	ene	RM	(ich		
Service Units	37216	19	954	19,9	05	199	60	21010					•					
Driver Names Me≤				#[2 r b	50n								·		
Time ⁴ γ	Casing Pressure		ubing essure	Bbls	s. Pum	ped		Rate		•	Se	rvice Lo	g					
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						[,600F								
12:5		2	75		5			5	Start Fresh water Pre Flush									
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10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • (620) 672-1201 • Fax (620) 672-5383