



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1122397  
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: \_\_\_\_\_



1122397

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
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<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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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# BASIC

energy services, L.P.

## TREATMENT REPORT

Customer AGV Corporation	Lease No.	Date 11-7-12
Lease Spicer	Well # B-3	
Field Order # 2245	Station Pratt, Kansas	Casing 8 7/8 24lb.
Type Job C.N.W. Surface	Depth 248 Feet	County Barber
	Formation	State Kansas
		Legal Description 23-335-11W

PIPE DATA		PERFORATING DATA		MATERIAL USED		TREATMENT RESUME		
Casing Size 8 7/8 24lb.	Tubing Size	Shots/Ft	195 sacks	60/40 Poz	with	RATE	PRESS	ISIP
Depth 248 Feet	Depth	From	To	38 Calcium	Max	25 lb/stk	5 Min	cell plate
Volume 15.8 Bbl	Volume	From	To	1.2 Gal, 5.18 Gal	Min	1.2 cu. FT / st	10 Min.	
Max Press 300 PSI	Max Press	From	To		Avg		15 Min.	
Well Connection Plug container	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth 233 Feet	Packer Depth	From	To	Flush 15 Bbl Fresh	Water		Total Load	

Customer Representative Dicky Collins	Station Manager David Scott	Treater Clarence R. Messich
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Service Units	37,216	19,903	19,905	70,959	19,918				
Driver Names	Messich	Mattal	Miller						

Time P.M.	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
11:30	11-6-12				Truck on location and hold safety meeting. Casing being run upon arrival.
12:30					Casing in well. Circulate for 5 minutes.
12:40	250			5	Start Fresh water Pro-Flush.
	250		10	5	Start Mixing 195 sacks 60/40 Poz cement
			52		stopping pumping. Shut in well. Release Wooden Plug. Open well.
12:45	150			5	Start Fresh water Displacement.
12:55	275		15		Plug down. Shut in well. Circulated 10 sacks cement to the pit.
					Washup pump truck.
1:30					Job Complete. Thank You. Clarence, Miller, Colt



**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 07295 A

23-335 11W

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

DATE OF JOB 11 7 12	DISTRICT Pratt, Kansas	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 AGV Corporation	LEASE Spreer	WELL NO. 6-3								
ADDRESS	COUNTY Barber	STATE Kansas								
CITY	STATE	SERVICE CREW Mason Miller								
AUTHORIZED BY	JOB TYPE: C N W Surface									
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
37216	.75						11 6 12			11 30
						ARRIVED AT JOB	11 6 12			11 30
14903 14905	.75					START OPERATION	11 7 12			12 00
						FINISH OPERATION				1 12
70459-11918	.75					RELEASED	11 7 12			1 30
						MILES FROM STATION TO WELL				49

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
CF 103	60/40 Poz Cement	sh	199		
CE 102	Cellulose	lb	49		
CE 109	Calcium Chloride	lb	504		
CF 153	Woolen Plug 8 7/8"	ea	1		
E 100	Pickup Mileage	mi	45		
E 101	Heavy Equipment Mileage	mi	90		
E 113	Bulk Delivery	tn	378		
CE 200	Cement Pump: 0 Feet To 500 Feet	hrs	4		
CE 210	Flotation and Mixing Service	sh	199		
CE 504	Plug Container	J.I	1		
5003	Service Supervisor	hrs	8		

SUB TOTAL \$ 4,750.91

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.

Customer AGV Corporation	Lease No.	Date 11-16-12
Lease Spicer "B"	Well # 3	
Field Order # 2428	Station Pratt, Kansas	Casing 5 1/2 15.5 LB/FT
Type Job C.N.W. Longstring	Depth 4,957 FT	County Barber
	Formation	State Kansas
		Legal Description 23-335-11W

PIPE DATA		PERFORATING DATA		CEMENT USED		TREATMENT RESUME		
Casing Size 5 1/2 15.5 LB/FT	Tubing Size 5 1/2 15.5 LB/FT	Shots/Ft		Rate 50 sacks 60/40 Poz	Rate	Press	ISIP	
Depth 4,960 Feet	Depth	From 175	To 200	AA 2 with .58 F.L.A.	Max 22,38	Fraction Reduc	5 Min.	Defamer
Volume 113 BBL	Volume	From 18 Gal	To 108 Gal	108 Salt, 5 LB/ST. G.	Min 1	sonite	10 Min.	
Max Press 1,500 PSI	Max Press	From	To 15.3 LB	5.46 Gal	Avg 1.36	C.U.F.T/ST.	15 Min.	
Well Connection Plug Connector	Annulus Vol.	From 30	To sacks 60/40	Poz to Plug Rat Hole	HHP Used		Annulus Pressure	
Plug Depth 4,913 Feet	Packer Depth	From	To	Flush 117 BBL 28 HCL	Gas Volume		Total Load	

Customer Representative Kent Roberts	Station Manager David Scott	Treater Clarence R. Messick
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Service Units	37,216	19,903	19,905	19,960	21,010
Driver Names	Messick	Mattal	Young		

Time AM	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
4:45					Trucks on location and held safety meeting.
6:00					Landmark Drilling start to run Auto Fill Float Shoe. Shoe Joint with Latch Down Baffle screwed into Collar and a total of 18 Joints new 15.5 LB/FT 5 1/2 casing. A Baster was installed above Collar #2. ATU Balizer was installed on Collars #1, 3, 5, 8, 10, 11, 12, 14.
8:30					Casing in well. Circulate and Redate for 1 Hour.
9:40		3,000			Shut in well. Pressure Test Open Well.
9:42	300			6	Start Fresh Water Pre-Flush.
			20	6	Start Super Flush II.
			32	5	Start Fresh water spacer.
			35	5	Start mixing 50 sacks 60/40 Poz cement.
	300		49	5	Start mixing 175 sacks AA-2 cement.
10:03	0		91		Stoppumping. Shut in well. Wash pump and lines.
10:10	100				Release Latch Down Plug. Open well.
				6.5	Start 22 HCL Displacement.
				5	Start to lift cement.
10:27	600		117		Plug down.
	1,500				Pressure up.
					Release pressure. Float Shoe held.
			7	3	Plug Rat Hole.
					Wash up pump truck.
11:15					Job Complete.

Thank You Clarence, Mike, Steve



**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET  
1718 07428 A

23-335-11W

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

DATE OF JOB 11-16-12		DISTRICT Pratt, Kansas		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 AGV Corporation		LEASE Spire B		WELL NO. 3					
ADDRESS		COUNTY Barber		STATE Kansas					
CITY		STATE		SERVICE CREW					
AUTHORIZED BY		JOB TYPE: C/W - LOUPTON							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
38216	1.5						11/15/12	PM	
						ARRIVED AT JOB	11/16/12	AM	1:45
19903 19905	1.5					START OPERATION		AM	9:30
						FINISH OPERATION		AM	11:00
19960-21010	1.5					RELEASED	11/16/12	AM	11:30
						MILES FROM STATION TO WELL			45

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: Karl Heide  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP105	AA 2 Cement	sh	175	\$	2,975.00
CP103	60/40 Poz Cement	sh	80	\$	960.00
CC105	Deframer	LL	33	\$	132.00
CC111	Salt	Lb	744	\$	349.80
CC112	Cement Friction Reducer	Lb	50	\$	300.00
CC115	Gr. P/B	Lb	165	\$	349.75
CC129	Fluic	Lb	55	\$	622.50
CC201	Gilgrade	Lb	875	\$	536.25
CF607	Luich Power Play and Bolt 1/2", 5/16"	ea	1	\$	400.00
CF1291	Auto Fill Flant Spacer, 5/16"	ea	1	\$	360.00
CF1791	Turboliner, 5/16"	ea	9	\$	890.00
CF1901	Bolt 1/2", 5/16"	ea	1	\$	290.00
CC704	Claymax	Gal	5	\$	175.00
CC155	Super Fluid II	Gal	500	\$	765.00

SUB TOTAL

CHEMICAL / ACID DATA:


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

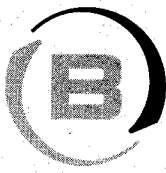
TOTAL

SERVICE REPRESENTATIVE Karl Heide

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

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 07429 A

23-335-11W

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

DATE OF JOB: 11-16-12		DISTRICT: Pratt, Kansas		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: AGV Corporation		LEASE: Spicer B		WELL NO. 3						
ADDRESS:		COUNTY: Barber		STATE: Kansas						
CITY:		STATE:		SERVICE CREW: M. Mattal & B. Way						
AUTHORIZED BY:		JOB TYPE: C/W & Logging								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
						ARRIVED AT JOB				
						START OPERATION				
						FINISH OPERATION				
						RELEASED				
						MILES FROM STATION TO WELL				

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

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SIGNED: K. J. Roberts  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
E 100	Pickup Mileage	mi	45		
E 101	Heavy Equipment Mileage	mi	90		
E 113	Full Delivery	hr	527		
CE 205	4000 Feet To 5,000 Feet Coagent Pump	hrs	4		
CE 240	Blending and Mixing Service	sh	255		
CE 501	Casing Seal	ft	1		
CE 504	Hydratone	ft	1		
S 003	Service Supervisor	hrs	3		

SUB TOTAL \$11,145.49

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: R. W. [Signature] THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]

FIELD SERVICE ORDER NO. \_\_\_\_\_ (WELL OWNER OPERATOR CONTRACTOR OR AGENT)

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

March 06, 2013

Kent Roberts  
AGV Corp.  
PO Box 377  
ATTICA, KS 67009-0377

Re: ACO1  
API 15-007-23958-00-00  
Spicer B-3  
NE/4 Sec.23-33S-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,  
Kent Roberts