Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1122397

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:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
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:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
GG GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
	If Alternate II completion, cement circulated from:
Operator:	
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
Recompletion Date Recompletion Date	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 TwpS. 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 (Attach Additional Sheets)		Yes No		0	on (Top), Depth an		Sample				
Samples Sent to Geolog	gical Survey	Yes No	Nam	e		Тор	Datum				
Cores Taken Electric Log Run		Yes No Yes No									
List All E. Logs Run:											
	CASING RECORD Vised 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 / SQL	EEZE RECORD							

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

 No
 (If No, skip questions 2 and 3)

 No
 (If No, skip question 3)

No

(If No, fill out Page Three of the ACO-1)

Shots Per Foot		PERFORATION Specify For		RD - Bridge P Each Interval		e	ļ		ement Squeeze Record d of Material Used)	Depth
TUBING RECORD: Size: Set At:				Packer	At:	Liner R	un:	No		
Date of First, Resumed Production, SWD or ENHR.			Producing N	lethod:	oing	Gas Lift	Other (Explain)			
Estimated Production Per 24 Hours		Oil Bb	S.	Gas	Mcf	Wat	ər	Bbls.	Gas-Oil Ratio	Gravity
									1	
DISPOSITI	DISPOSITION OF GAS:				METHOD		TION:		PRODUCTION IN	TERVAL:
Vented Sold	1 🗌 I	Jsed on Lease		Open Hole	Perf.		Comp.	Commingled		
(If vented, Su	bmit ACC	D-18.)		(Submit A			, (,			



TREATMENT REPORT

Category V Corporation Lease No. Date //	energy ser	VICES,	L.P.					
Lease Spice i Station Picutt, high Station Berging and the provide and the pro	Gastomer V Coll	poration	Lease No.			Date	11_	717
Epic Grav Station P (att; transus Body 24 LL Description Barbert Barbert Barbert Barbert Type Job M.WSurface Formation Loop Description Formation Loop Description Body Stee Shotoff 195 See (South) 195 See (South) 195 See (South) TREATMENT RESUME Body Stee Description Form To The South P (South) 195 See (South) Body Stee Description Form To The South P (South) 195 See (South) Body Stee Description Form To The South P (South) 195 See (South) Body Stee Form To The South P (South) Station P (South) 195 See (South) Body Stee Form To Form To Her (South) 195 See (South) Body Stee Form To Formation To 195 See (South) 195 See (South) Body Stee Form To Formation To 195 See (South) 195 See (South) Body Stee Form To Formation To 195 See (South) 195 See (South) Body Toring Form To Formation To 196 See (South) 196 See (South) Body Stee	Lease /		Well # B					I-1 d
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Customer Representative Dick + y Cellins Station Manager David Scott Treater larence R. Messicht service units 37,216 19,903 19,905 70,959 19,918 Driver Messue Manager David Scott Treater larence R. Messicht Manager Messue Messue Manager David Scott Treater larence R. Messicht Messue Messue			То					
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10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • (620) 672-1201 • Fax (620) 672-5383								
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Taylor Printing, Inc. 620-672-3656	10244 NE Hiwa	ay 61 • P.O.	Box 8613	• Pratt, KS	67124-86	613 • (620) 6	572-1201 • Fa	ax (620) 672-5383

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Taylor Printing, Inc. 620-672-3656

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	BASIC	P. (
		Pr
	ENERGY SERVICES	Ph
Contraction of the local division of the loc	PRESSURE PUMPING & WIRELINE	2

244 NE Hwy. 61 O. Box 8613 att, Kansas 67124 none 620-672-1201

FIELD SERVICE TICKET 1718 07205 A

PRESSL	JRE PUMP	a S.	- 37	W.		DATE TICKET NO			
DATE OF JOB) D		- a.45	NEW OLD PROD INJ WDW CUSTOMER WELL WELL ORDER NO.:					
CUSTOMER AG1	(Duration		LEASE WELL NO 6-3						
ADDRESS			COUNTY BUILDER STATE TRADUCS						
CITY		STATE			SERVICE CREW MASSACK MAR HALLS MILLEY				
AUTHORIZED BY				-	JOB TYPE: (N	N. Surface It's I have		
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CALLED		
37,216	.75						ARRIVED AT JOB		
1993 19965	.7.5			-			FINISH OPERATION		
							RELEASED		
70,959-19,918	.75								
				1.			MILES FROM STATION TO WELL		

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 OWNE	ER, OPERATOR, CO	NTR	ACTOR OR AGE	ENT)
ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES	USED	UNIT	QUANTITY	UNIT PRICE	-	\$ AMOUNT	•
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	0/1	204	ATERIAL AND SERVIC	<i>(</i> :	and a start of the second	

FIELD SERVICE ORDER NO.

TOTAL



TREATMENT REPORT

	V U C C S, L.								
Austomer Corpora	ation	Lease No.	1.	4 ² 1		Date	1	10	$1 \frown$
Lease Spirer B	ţ.	Well # 3	>					LO	Ld
Eield Order'# Station P	ratt, tra	nsas	Sasing	5.5 Depth		County +1	Barb	er Sta	ate GNSas
Type Job C. N. W. L c	onastring	<u>j</u>		Formation			Legal De		W
PIPE DATA	PERFORAT	ING DATA	nt REDUKO L	JSED		TREA	TMENT	RESUME	
Sasing Size Tubing Size	Shots/Ft		100 50 Sa	acts 601	40Poz	ATE PRE	SS	ISIP	
Pepth 160Feet	From 759		Purth.5	8FLA 3	Max. 38	Fiction	Reduc	5 Min 22 De	former
Volume SBUL	From 86a	JoBlok, I		Lb.1st.G	Minsonit	e		10 Min.	
Max Press L Soors I		TO 15,311		46 Gal.1	Avg. 1.3	6 CU.F	T.Ish.	15 Min.	
Well Connection Annulus Vol.	From 305 a	Totas 60/1		vy Rutt	HHP Used			Annulus Press	ure
Plug Depth Packer Depth	From	То	Flush 117B	11.284	Gas Volume			Total Load	
Customer Representative Te	nt Robert	S Station	n Manager Davi	id Scot	+	Treater	alence	R.Messi	ch
	9.903 19.90	05 19,96	0 21,010						
Driver Names/Messich	Mattal.	Y	loung						
Time / / Pressure Pi	iubing l	. Pumped	Rate			Serv	ice Log		
445			Truckson	locatio	nand	hold sa	Pety/	neeting.	
6:00 Landman	h Drilling	start	to vun Auto	FILFI	out She	e. Sho	Jein	t with Le	atch Down
	,		runda.tot		8 Join	Ispeul	5516	1Ft 5120	Casing.
	vas installed	labovet	ollar#2.AT.	rbolizer	Wasin	stallado	n Colla	15#13581	011,12,14.
8:30				Casing	inwell	Circule.	ite and	Rolateful	1 Hour.
9:40 3	3,000							Open W.	
9.42 300			6		Freshi		le-Fl	ush.	
		20	6	Start	Super	Flush	T.		
		32		Start	Fresh	water	Spare	r	
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300		49	_ 5					A-2ceme	
003 -0	9							ish pumper	
10:10 100				Releas	- Latch	DownP	Ug. Op	en well	-
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			5	Start	tolift	CEMEN	† .		
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				Releas	e pressi	vie. Flo	at She	eheld	
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1:15					onplete				
				Thunt	-You	Claren	e.Mi	ITe. Steve	د
10244 NE Hiway	y 61 • P.O. E	3ox 8613	• Pratt, KS	67124-86	13 • (620) 672-12	01 • Fa	x (620) 672	2-5383

	10244 NE Hwy. 61
	P.O. Box 8613
ENERGY SERVICES	Pratt, Kansas 67124
98.	Phone 620-672-1201
PRESSURE PUMPING & WIRELINE	72-220

FIELD SERVICE TICKET

1718 07423 A

		di	5 - 1	5:55:	- 11 W		DATE TICKET NO			
DATE OF JOB DISTRICT Pratt. TUDSas							PROD INJ WDW CUSTOMER ORDER NO.:			
CUSTOMER AG	1Co	peration	1			Care.	WELL NO. 3			
ADDRESS					COUNTY	sark	STATE TUNSUS			
СІТҮ		STATE			SERVICE CF	NEW 7	1- Such M. Marry S. Youns			
AUTHORIZED BY			÷.,		JOB TYPE:	AUM	- Long-Inna			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CALLED DATE AM TIME			
37,216	1.5						ARRIVED AT JOB			
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19960-21,010	1.5		≜. Na				RELEASED 16 12 AM 1 36			
	1						MILES FROM STATION TO WELL			

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. 1 221 × -

A. Car SIGNED: 1. 6

(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT) ITEM/PRICE REF. NO. MATERIAL, EQUIPMENT AND SERVICES USED UNIT QUANTITY UNIT PRICE \$ AMOUNT INC 6 in, hi 10 Centent \mathcal{A} 7.54 15 -m-nt sh 60 ा Ċ NOF المر المجر 2.64.9 ÷ 744 Reducer $C_{n_j}^{\rm out}$ R <u>60</u> 11 ŧ. 30 11 0 ~ 1.... h 349 TG. to Ð æ, 536 GT7C 20 1.11 1.5 0,4. 16 و جنگ 400 51-310 €., 4.14 ά. RRE dine 1 : 290 en. 1 Q 12 M C. ż, 175 -201 TORY 'a; 0 500 765 Gal 末 11 SUB TOTAL CHEMICAL / ACID DATA: SERVICE & EQUIPMENT %TAX ON \$ MATERIALS %TAX ON \$

_	
	TOTAL
	IUIAL

SERVICE THE ABOVE MATERIAL AND SERVICE Ame Kouth fly hand REPRESENTATIVE ORDERED BY CUSTOMER AND RECEIVED BY: Jamil Ch

FIELD SERVICE ORDER NO.

-1000-

E) BASIC P.C. Pra ENERGY SERVICES Pho			
E) BASIC P.C. ENERGY SERVICES Pho	and the second s		102
ENERGY SERVICES Pho	a second		P.O
	Constant .		Pra
	5		Pho
PRESSURE PUMPING & WIRELINE	No. Contraction	PRESSURE PUMPING & WIRELINE	

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

FIELD SERVICE TICKET

			Z	335	NW		DATE TICKET NO
DATE OF JOB		DISTRICT PYAIT. TO	ansé	13			
CUSTOMER AGI	VCa	iperation.				Dicer	Well NO.
ADDRESS					COUNTY	Bari	STATE TOASas
CITY	Negerie L	STATE			SERVICE C	REW	Hereb M Mattal & Towny
AUTHORIZED BY					JOB TYPE: <	SAV 1	11-1 Sprintly po
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CALLED DATE AM TIME
							ARRIVED AT JOB
							START OPERATION
							FINISH OPERATION
							RELEASED AM
							MILES FROM STATION TO WELL

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.

210	INED:		<u> </u>					
	-							
	(WELL O	WNEH,	OPEHA	10H, C	ONIRA	CTOR	OR.	AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT		
ELCO	Pichure Mileage	Thi	4.5				
ENCHER	Heavy Equipment Maleage	mi	190				
E 113	BUTH Dellawry	t m	527				
CE 205	HoolFest To 5000Fest Coment Promp	ha	4				
CERTE	Blonding and Miring Service 11 11	- Sh	255				
CE SOL	Campo Sug Vol		1.1				
CESCH	Aurcenteiner.	5.6	1				
15,002.11	Service Supervisor	nes.	3				
				SUB TOTAL			
СН	EMICAL / ACID DATA:		* . 		1114549		
	SERVICE 8	SERVICE & EQUIPMENT %TAX ON \$					
	MATERIAL	MATERIALS %TAX ON \$					
				TOTAL			

SERVICE REPRESENTATIVE Q M Joseph

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

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

the all the

15 Cart

FIELD SERVICE ORDER NO.

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