



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1136405
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
-----------------------------------	-----------------	---

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: _____



1136405

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 <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
--	---

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
----------------	-------	---------	------------	---

Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
---	--

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--	---	---



PAGE	CUST NO	INVOICE DATE
1 of 1	1004409	04/02/2013
INVOICE NUMBER		
1718 - 91156297		

Pratt (620) 672-1201
 B VAL ENERGY
 I 200 W DOUGLAS AVE STE 520
 L WICHITA
 L KS US 67202
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Bedwell 1-34
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 E JOB CONTACT

RECEIVED

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40581281	27463	APR 04 2013	Net - 30 days	05/02/2013

DESCRIPTION	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>9208-</i>				
<i>For Service Dates: 04/01/2013 to 04/01/2013</i>				
0040581281				
171807336A Cement-New Well Casing/Pi 04/01/2013				
<u>Cement 8 5/8 Surface</u>				
60/40 POZ	190.00	EA	9.00	1,710.00 T
Celloflake	48.00	EA	2.78	133.20 T
Calcium Chloride	492.00	EA	0.79	387.45 T
"Wooden Cmt Plug, 8 5/8" "	1.00	EA	120.00	120.00
Sugar	50.00	EA	1.50	75.00 T
"Unit Mileage Chg (PU, cars one way)"	40.00	MI	3.19	127.50
Heavy Equipment Mileage	80.00	MI	5.25	420.00
Depth Charge; 0-500'	1.00	EA	750.00	750.00
Blending & Mixing Service Charge	190.00	BAG	1.05	199.50
Plug Container Util. Chg.	1.00	EA	187.50	187.50
"Service Supervisor, first 8 hrs on loc.	1.00	EA	131.25	131.25
"Proppant & Bulk Del. Chgs., per ton mil	328.00	EA	1.20	393.60

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	4,635.00
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	168.31
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	4,803.31
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		

BASIC

energy services, L.P.

TREATMENT REPORT

Customer <i>VIC ENERGY INC.</i>	Lease No. <i>INC.</i>	Date <i>4-7-13</i>
Lease <i>BEDWELL</i>	Well # <i>1-34</i>	
Field Order # <i>2336</i>	Station <i>Pratt, KS</i>	Casing <i>8 7/8</i>
Type Job <i>CONV. SURFACE</i>	Formation <i>TD-225</i>	Legal Description <i>34-30-13</i>

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size <i>8 7/8</i>	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
Depth <i>222</i>	Depth	From	To	Pre Pad	Max		5 Min.
Volume	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative <i>Randy</i>	Station Manager <i>SOCIETY</i>	Treater <i>(Signature)</i>
Service Units <i>19907</i>	<i>27463</i>	<i>77686 - 73768</i>
Driver Names <i>V.G.</i>	<i>J.C.</i>	<i>S. KLINE</i>

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>1430</i>					<i>CONV. LOCATED RUN 5 JTS 211' 8 7/8 CSC. WITH ANN. H. SET 8 7/8 AT PIVOTAL CORE.</i>
<i>1645</i>	<i>200</i>		<i>0</i>	<i>6</i>	<i>MIX CEMENT 190 SHALS 60/40 P02 2% GEL, 3% CC, 1/4" / 1" O.F.</i>
	<i>100</i>		<i>41</i>	<i>6</i>	<i>FINISH MIX CEMENT RELEASE 8 7/8 WOOD PUMP</i>
	<i>0</i>		<i>0</i>	<i>6</i>	<i>STARTY DISP</i>
<i>1715</i>	<i>200</i>		<i>12.7</i>	<i>6</i>	<i>PLUG DOWN CORE JOBB. CEMENT TO SET</i>
<i>1800</i>					<i>JOB COMPLETE - BEVON</i>



RECEIVED
APR 11 2013

PAGE 1 of 1	CUST NO 1004409	INVOICE DATE 04/09/2013
INVOICE NUMBER 1718 - 91161545		

Pratt (620) 672-1201
 B VAL ENERGY
 I 200 W DOUGLAS AVE STE 520
 L WICHITA
 L KS US 67202
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Bedwell 1-34
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40583477	19905		Net - 30 days	05/09/2013

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 04/08/2013 to 04/08/2013</i>				
0040583477 <i>9233-1</i>				
171808280A Cement-New Well Casing/Pi 04/08/2013				
<u>Cement PTA</u>				
60/40 POZ	170.00	EA	9.00	1,530.00 T
Cement Gel	294.00	EA	0.19	55.13 T
"Unit Mileage Chg (PU, cars one way)"	40.00	MI	3.19	127.50
Heavy Equipment Mileage	80.00	MI	5.25	420.00
"Proppant & Bulk Del. Chgs., per ton mil	294.00	EA	1.20	352.80
Depth Charge; 501'-1000'	1.00	EA	900.00	900.00
Blending & Mixing Service Charge	170.00	BAG	1.05	178.50
"Service Supervisor, first 8 hrs on loc.	1.00	EA	131.25	131.25

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	3,695.18
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	115.71
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	3,810.89
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 00200 A

34-305-13W

DATE _____ TICKET NO. _____

DATE OF JOB 4-8-13		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 Val Energy, Inc.				LEASE Bedwell				WELL NO. 1-34	
ADDRESS				COUNTY Barber		STATE Kansas			
CITY		STATE		SERVICE CREW C. Messick, M. Mattal, A. Gibson, D. Phye					
AUTHORIZED BY				JOB TYPE C.N.W. Plug To Abandon					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE 4-8-13	TIME 10:00	
37,216	1.75					ARRIVED AT JOB		5:00	
19,903-19,905	1.75					START OPERATION		7:00	
19,960-21,010	1.75					FINISH OPERATION		8:45	
						RELEASED	4-8-13	9:00	
						MILES FROM STATION TO WELL	40		

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: Rick Smith
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 103	60/40 Poz Cement	sk	170		\$ 2,040.00
CC 200	Cement Gel	Lb	294		\$ 73.50
E 100	Pickup Mileage	mi	40		\$ 170.00
E 101	Heavy Equipment Mileage	mi	80		\$ 560.00
E 113	Bulk Delivery	tm	294		\$ 470.40
CE 201	Cement Pump: 50 Feet To 1,000 Feet	hrs	4		\$ 1,200.00
CE 240	Blending and Mixing Service	sk	170		\$ 238.00
S 003	Service Supervisor	hrs	8		\$ 175.00

CHEMICAL / ACID DATA:

SUB TOTAL

DLS \$ 3,695.18

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

TOTAL

SERVICE REPRESENTATIVE Lawrence R. Messick

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Lawrence R. Messick
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer Val Energy, Incorporated	Lease No. Well # 1-34	Date 4-8-13
Lease Bedwell	Field Order # 8280	Station Pratt, Kansas
Type Job C.N.W. - Plug To Abandon	Casing 1 1/2 Drill Pipe	Depth Pipe
	County Barber	State Kansas
	Formation	Legal Description 34-305-13W

PIPE DATA		PERFORATING DATA		CEMENT USED		TREATMENT RESUME		
Casing Size	1 1/2 Drill Pipe	Shots/Ft	170	60/40 Poz with 48 Gal	RATE	PRESS	ISIP	
Depth	Depth	From	To	13.8Lb/Gal	Max 0.92Gal/sk	1.43	5 Min	20 FT/sk
Volume	Volume	From	To		Min		10 Min.	
Max Press	Max Press 300PSI	From	To		Avg		15 Min.	
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush Freshwater	Gas Volume		Total Load	

Customer Representative Rick Smith	Station Manager David Scott	Treater Clarence R. Messick
---------------------------------------	--------------------------------	--------------------------------

Service Units	37,216	19,903	19,905	19,960	21,010				
Driver Names	Messick	Gibson	Phye	Mattal					

Time	PM	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
5:00						Trucks on location and hold safety meeting.
						1 st / Plug 810 Feet 50 sacks cement
7:15			300		5	Start Pre Flush.
				10	5	start mixing cement
			100	22	5	Start Fresh water Displacement
7:23			-0	27		Stop pumping
						2 nd / Plug 250 Feet 50 sacks cement.
7:55			125		5	Start mixing cement.
			125	12	5	Start Fresh water Displacement
8:00			-0	13		Stop pumping
						3 rd / Plug 60 Feet 20 sacks cement
					3	Start mixing cement
				6		Cement Circulated to surface.
8:20			-0			Stop pumping
			-0	7-5	3	Plug Rat and mouse holes
8:35						Wash up pump truck.
9:00						Job Complete
						Thank You
						Clarence, Milt, Aaron, Dale

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

April 23, 2013

DUSTIN WYER
Val Energy, Inc.
200 W DOUGLAS AVE STE 520
WICHITA, KS 67202-3005

Re: ACO1
API 15-007-24001-00-00
BEDWELL 1-34
SW/4 Sec.34-30S-13W
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,
DUSTIN WYER