



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1146536  
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: \_\_\_\_\_



1146536

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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Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	HYLBOM B 3
Doc ID	1146536

All Electric Logs Run

ARRAY COMPENSATED TRUE RESISTIVITY
MICROLOG
SPECTRAL DENSITY DUAL SPACED NEUTRON
BOREHOLE COMPENSATED SONIC ARRAY

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	HYLBOM B 3
Doc ID	1146536

Tops

Name	Top	Datum
HEEBNER	3799	
TORONTO	3813	
LANSING	3849	
KANSAS CITY	4201	
MARMATON	4370	
CHEROKEE	4492	
ATOKA	4624	
MORROW	4716	
ST. GENEVIEVE	4832	
ST. LOUIS	4876	



**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 03255 A

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

DATE OF JOB <b>2-12-13</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>Hylborm "B" #3</b> WELL NO.							
ADDRESS		COUNTY <b>Kearny</b> STATE <b>KS</b>							
CITY STATE		SERVICE CREW <b>J. Chavez, Ruben, Eddie, Hector E, Ever</b>							
AUTHORIZED BY <b>Jay Renth</b>		JOB TYPE: <b>Z42 Surface</b>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
							<b>2-12-13</b>	<b>PM</b>	<b>4:00</b>
<b>78938</b>	<b>8</b>	<b>30463</b>	<b>8</b>	<b>14355</b>	<b>8</b>	ARRIVED AT JOB	<b>2-12-13</b>	<b>AM</b>	<b>7:00</b>
		<b>37547</b>	<b>1</b>	<b>37725</b>	<b>1</b>	START OPERATION	<b>2-12-13</b>	<b>AM</b>	<b>1:00</b>
<b>70897</b>	<b>8</b>					FINISH OPERATION	<b>2-12-13</b>	<b>AM</b>	<b>3:00</b>
<b>19570</b>	<b>1</b>					RELEASED	<b>2-12-13</b>	<b>AM</b>	<b>3:45</b>
						MILES FROM STATION TO WELL	<b>45</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: Mark Bonner  
(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	350		
CL110	Class - C -	SK	245		
CC109	Calcium Chloride	Lb	1449		
CC102	Celloflake	Lb	149		
CC130	C-S1	Lb	66		
CF253	Guide Shoe	ea	1		
CF1453	Flapper Type Insert Float Valves 8 5/8"	ea	1		
CF4405	Economizer Hinged, Welded Standard	ea	15		
CF4556	Cement Baskets, Canvas 8 5/8"	ea	1		
CF105	Top Rubber Cement Plug 8 5/8"	ea	1		
CF4109	Stop Collar 8 5/8"	ea	1		
CE8101	Heavy Equipment Mileage	Mi	225		
CE240	Blending & mixing Service Charge	SK	595		
E113	Proppant and Bulk Delivery Charges	TM	2100		
CE202	Depth Charge; 1001-2000'	4hrs	1		
CE504	Plug Container Utilization Charge	Job	1		
E100	Unit Mileage Charge - Pickups	Mi	75		
S003	Service Supervisor	ea	1		
T105	Cement Data Acquisition Monitor	ea	1		

SUB TOTAL **22733.38**

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: Jay Renth THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Mark Bonner  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

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





# Cement Report

Customer Oxy USA		Lease No.		Date 2-12-13	
Lease Hylbom 'B'		Well # 3		Service Receipt 03255	
Casing 8 5/8	Depth 1795ft	County Kearny		State KS	
Job Type 2-42 Surface		Formation		Legal Description 25-23-35	
<b>Pipe Data</b>			<b>Perforating Data</b>		<b>Cement Data</b>
Casing size 8 5/8	Tubing Size	Shots/Ft		Lead 350SK	
Depth 1805'	Depth 55 42'	From	To	A-con 12.1#	
Volume 112.1268 bbl	Volume	From	To	2.40 # <sup>3</sup> /SK	
Max Press 1,800 PSI	Max Press	From	To	14.00 # <sup>6</sup> /SK	
Well Connection 8 5/8	Annulus Vol.	From	To	Tail in 245SK	
Plug Depth 1763'	Packer Depth	From	To	Class-C- 14.8#	
				1.34 # <sup>3</sup> /SK	
				6.33 # <sup>6</sup> /SK	
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
0700					Arrive on location
0715					Safety meeting Rig up
0700					Rig Running Casing
1215					Circulate with Rig
1300					Hook up with B.E.S
1310	2,000 PSI			1 bbl	Pressure Test
1315	100 PSI		10 bbl	5 bbl	Pump Stop Loss Polymer
1320	100 PSI		149 bbl	5 bbl	Pump lead Cement
1350	150 PSI		59. bbl	5 bbl	Pump Tail Cement
1405					Drop Plug, Washup
1410	200 PSI		102 bbl	5 bbl	Displace
1430	600 PSI		10 bbl	2 bbl	slow down Displace
1435	1100 PSI				Land Plug
	1,500 PSI				Test Casing 'OK'
					Job Complete
					Thanks for using Basic Energy Services
Service Units	78938	7897-19570	30463-37547	14355-37725	
Driver Names	J Chavez	Eddie	Ever	Hector . E	

Mark  
Customer Representative

Jerry Bennet  
Station Manager

Ismael Chavez / Ruben Fortner  
Cementer  
Taylor Printing, Inc.







**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 03307 A

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

DATE OF JOB <b>2-16-13</b> DISTRICT <b>Liberal 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>Hylbom B</b> WELL NO. <b>3</b>				
ADDRESS		COUNTY <b>Kearney</b> STATE <b>KS</b>				
CITY STATE		SERVICE CREW <b>Kirby, Ed M, Santiago</b>				
AUTHORIZED BY <b>Tyce Davis</b>		JOB TYPE: <b>5 1/2 Production 2-4Z</b>				
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <b>2-16-13</b> DATE AM PM TIME <b>1600</b>
				<b>21755</b>	<b>1</b>	ARRIVED AT JOB AM PM <b>1900</b>
				<b>38119-19919</b>	<b>8</b>	START OPERATION AM PM <b>2000</b>
						FINISH OPERATION AM PM <b>2130</b>
						RELEASED AM PM <b>2200</b>
						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 OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL104	50/50 Poz	SK	275	8 25	2268 75
CC113	Gypsum	LB	1155	56	646 80
CC111	Salt	LB	1688	37	624 56
CC103	C-15	LB	139	9 37	1302 43
CC105	C-41P	LB	58	3 00	174 00
CC201	Gilsonite	LB	1373	50	686 50
CF251	Reg - Guide Shoe	EA	1		187 50
CF451	Insert Float Valve	EA	1		161 25
CF103	Top Rubber Cornst Plug	EA	1		78 75
CF4105	Stop Collar	EA	1		63 00
CF4452	Centralizers	EA	25	56 25	1406 25
E101	Heavy Equipment Mileage	MI	150	5 25	787 50
CE240	Blending + Mixing Service Charge	SK	275	1 05	288 75
E113	Bulk Delivery Charge	Tm	866.25	1 20	1039 50
CE206	Depth Charge 5001-6000	4hrs	1		2160 00
CE504	Plug Container Utilization Charge	EA	1		187 50
E100	Unit Mileage Charge - Pickup	MI	75	3 19	239 25
S003	Service Supervisor	EA	1		131 25

SUB TOTAL **12,433.54**

CHEMICAL / ACID DATA:			

AP LOCATION/DEPT. **Libecap D02**  NON D02

LEASE WELL FAC **Hylbom B-3** % TAX ON \$

MATERIALS % TAX ON \$

MAXIMO / WSM # \_\_\_\_\_

TASK **01-02** ELEMENT **3023** TOTAL

PROJECT # **1165452** CAPEX / OPEX - Circle one

SPO / BPA \_\_\_\_\_ UNSUPPORTED

SERVICE REPRESENTATIVE **Bulky Kirby** THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: **JARED LEWTON**

SIGNATURE: **Jared Lewton** (WELL OWNER OPERATOR CONTRACTOR OR AGENT)

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



### Cement Report

Customer <i>Oxy USA</i>		Lease No.		Date <i>2-16-13</i>	
Lease <i>Hyblom "B"</i>		Well # <i>3</i>		Service Receipt	
Casing		Depth		County <i>Hearney</i>	
State <i>KS</i>		Job Type <i>5 1/2 Production</i>		Formation	
Legal Description <i>25-33-35</i>		Packer Depth		From	
To		Annulus Vol.		From	
To		Tubing Pressure		Rate	
Casing Pressure		Bbls. Pumped		Service Log	
Time		Casing Pressure		Tubing Pressure	
Bbls. Pumped		Rate		Service Log	
1900				On location - Spot & Rig up	
1900				Casing on bottom - Break Circ	
2000				Safety Meeting	
2018		3000		Pressure Test	
2021		200		74 5 Mix 275sk 50/50 Pz @ 13.5 PPg	
2043				Shut Down - Clean Lines - Drop Plug	
2049		100		0 5 Start Displacing	
2104		200		70 5 Displacement Reaches Cement	
2112		950		107 2 Slow Rate	
2115		1000-1500		112 Bump Plug	
2120		1500-0		Release Pressure - Float Held	
Service Units		21755		38119/19919	
Driver Names		Kirby		Ed M	
				Santiago	

Customer Representative

*Jerry Bennett*  
Station Manager

*Kirby Harper*  
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

June 10, 2013

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

Re: ACO1  
API 15-093-21882-00-00  
HYLBOM B 3  
NE/4 Sec.25-23S-35W  
Kearny 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