



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1178782  
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: \_\_\_\_\_

1178782

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
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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> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<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> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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PAGE	CONTRACT NO	INVOICE DATE
1 of 1	1004409	12/15/2013
INVOICE NUMBER		
1718 - 91359796		

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 Gates V 1-31  
 O LOCATION  
 B COUNTY Cowley **9308**  
 S STATE KS  
 I JOB DESCRIPTION Cement-New Well Casing/Pi  
 E JOB CONTACT

JOB #	EQUIPMENT #	RECEIVED PURCHASE ORDER NO.	TERMS	DUE DATE	
40671332	19843	DEC 17 2013	Net - 30 days	01/14/2014	
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 12/11/2013 to 12/11/2013</i>					
0040671332					
171809563A Cement-New Well Casing/Pi 12/11/2013					
Cement 5 1/2" Longstring					
AA2 Cement		230.00	EA	10.20	2,346.00 T
Celloflake		58.00	EA	2.22	128.76 T
C-41P		55.00	EA	2.40	132.00 T
Salt		1,141.00	EA	0.30	342.30 T
C-44		217.00	EA	3.09	670.53 T
FLA-322		174.00	EA	4.50	783.00 T
Super Flush II		500.00	EA	0.92	459.00 T
Gilsonite		1,150.00	EA	0.40	462.30 T
"Latch Down Plug & Baffle, 5 1/2" (Blue)		1.00	EA	240.00	240.00
"Auto Fill Float Shoe 5 1/2" (Blue)"		1.00	EA	216.00	216.00
"Turbolizer, 5 1/2" (Blue)"		8.00	EA	66.00	528.00
"5 1/2" Basket (Blue)"		2.00	EA	174.00	348.00
"Unit Mileage Chg (PU, cars one way)"		120.00	MI	2.55	306.00
Heavy Equipment Mileage		240.00	MI	4.20	1,008.00
"Proppant & Bulk Del. Chgs., per ton mil		1,302.00	EA	0.96	1,249.92
Depth Charge; 3001-4000'		1.00	EA	1,296.00	1,296.00
Blending & Mixing Service Charge		230.00	BAG	0.84	193.20
Plug Container Util. Chg.		1.00	EA	150.00	150.00
"Service Supervisor, first 8 hrs on loc.		1.00	EA	105.00	105.00

ENTERED  
 DEC 17 2013

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	10,964.01
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	340.73
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	11,304.74
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



**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 03593 A

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

DATE OF JOB <u>12-11-13</u> DISTRICT <u>Pratt</u>		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 <u>VAI Energy inc</u>		LEASE <u>GAT 05</u> ✓ WELL NO. <u>1-11</u>						
ADDRESS		COUNTY <u>Cowley</u> STATE <u>KS</u>						
CITY STATE		SERVICE CREW <u>MARTIN, MARQUEZ, PLYR</u>						
AUTHORIZED BY		JOB TYPE: <u>CAW L.S.</u>						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <u>12-10-13</u> DATE	AM PM	TIME
<u>37580</u>	<u>1</u>					ARRIVED AT JOB <u>12-11-13</u>	AM PM	<u>3:20</u>
<u>19903/19843</u>	<u>1</u>					START OPERATION	AM PM	<u>10:06</u>
<u>70959/19918</u>	<u>1</u>					FINISH OPERATION	AM PM	<u>10:50</u>
						RELEASED	AM PM	<u>11:45</u>
						MILES FROM STATION TO WELL <u>120</u>		

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: [Signature]  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA-2	SK	200		3400 00
CP 105	AA-2	SK	30		510 00
CC 102	Celloflav	LB	58		214 00
CC 105	C-41 DicoAM	LB	55		220 00
CC 111	SAT	LB	1141		570 50
CC 115	C-44	LB	217		1,117 55
CC 129	FIA - 322 low film loss	LB	174		1,305 00
CC 201	Gilsoatic	LB	1150		770 50
CF 607	LATCH DOWN Plug + BASKET 5/2	EA	1		400 00
CF 1251	Auto fill FLOAT SH-5 5/2	EA	1		360 00
CF 1651	TURBO LITE 5/2	EA	8		880 00
CF 1901	BASKET 5/2	EA	2		580 00
CC 155	Super Flush II	GA	500		765 00

SUB TOTAL 26

CHEMICAL / ACID DATA:


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

TOTAL

SERVICE REPRESENTATIVE MIL MARTIN

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



**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 ~~09563~~ A

CONTINUATION of 1718 09563

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

DATE OF JOB 12-11-13		DISTRICT Pratt		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 VAI Energy Inc				LEASE GAPS V				WELL NO. 1718								
ADDRESS				COUNTY Cowley				STATE KS								
CITY				STATE				SERVICE CREW MATTI, MAQUER, PHYC								
AUTHORIZED BY				JOB TYPE: (NEW) L.S.												
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME						
						ARRIVED AT JOB					AM	PM				
						START OPERATION					AM	PM				
						FINISH OPERATION					AM	PM				
						RELEASED					AM	PM				
						MILES FROM STATION TO WELL										

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SIGNED: [Signature]  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT	
E 10'	P.u. Miles	MI	12.0		510 00	
E 10'	Heavy eq. miles	MI	24.0		1,680 00	
E 113	Profit Bulk Oil	TM	13.02		2,083 20	
CE 204	Dirt Charge 300' - 400'	4M	1		2,160 00	
CE 243	Blend + mix charge	SK	23.0		322 00	
CE 504	Plug Containing Utilization	503	1		250 00	
5003	Service Supervisor	PH	1		175 00	
					SUB TOTAL	10,964 01

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE <u>MIC MATTI</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>[Signature]</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO. \_\_\_\_\_

Customer <b>VAI</b>	Lease No.	Date <b>12-11-13</b>
Lease <b>GAS V</b>	Well # <b>1-31</b>	
Field Order # <b>9567</b>	Station <b>Pratt</b>	Casing <b>5 1/2</b>
		Depth <b>3588</b>
Type Job <b>CAW</b>	<b>L.S.</b>	County <b>Cowley</b>
		State <b>Ks</b>
	Formation <b>TD 3590</b>	Legal Description <b>31-32-6</b>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <b>5 1/2</b>	Tubing Size	Shots/Ft		Acid <b>230 HAc</b>	RATE <b>1/4 3/4 CF</b>	PRESS <b>2500</b>	ISIP <b>1090</b>	
Depth <b>3588</b>	Depth	From	To	Pre Pad <b>12 3/4 5104</b>	Max <b>8% FWH</b>			5 Min.
Volume <b>85.4</b>	Volume	From	To	Pad	Min			10 Min.
Max Press <b>2500</b>	Max Press	From	To	Frac	Avg			15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth <b>3587</b>	Packer Depth	From	To	Flush <b>84.9</b>	Gas Volume			Total Load

Customer Representative **Dustin** Station Manager **Kevin Gaudley** Treater **Mike MATTA**

Service Units	<b>37586</b>	<b>19905</b>	<b>19843</b>	<b>70559</b>	<b>19918</b>				
Driver Names	<b>MARCO</b>	<b>MARCO</b>	<b>2</b>	<b>P H X E</b>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
3:20 AM					ON Location / starting treatment
7:40					Ran 84 JTS 5 1/2 15.0 #
					Time 1, 2, 7, 10, 28, 49, 30, 32
9:10					Casing on
9:20					Used 12 3/4 casing / Break Casing Key
					Casing 45
10:06	250		5	5	Pump 5 at H2O
10:07	250		12	5	Pump 12 PSI Start 45 II
10:10	250		5	5	Pump 5 at H2O
10:10	250		5	5	Pump 5 at H2O
10:20					Work Pump - 12 / 12 PSI
10:27	100			6	Stop 12 PSI
10:39	600		75	5	Slow Casing
10:41	900/400		80		Plug down, 12 PSI at 70-140
			7.5		Plug pullout / casing 75 PSI
					Job complete
					Thank You!
					Mike MATTA



PAGE	CONT NO	INVOICE DATE
1 of 1	1004409	12/10/2013
INVOICE NUMBER		
1718 - 91356378		

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 Gates V 1-31  
 O LOCATION  
 B COUNTY Cowley  
 S STATE KS  
 I JOB DESCRIPTION Cement-New Well Casing/Pi  
 T  
 E JOB CONTACT

**RECEIVED**

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40669834	20920	DEC 12 2013	Net - 30 days	01/09/2014

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 12/07/2013 to 12/07/2013</i>				
0040669834				
171809587A Cement-New Well Casing/Pi 12/07/2013				
Cement 8 5/8" Surface				
60/40 POZ	215.00	EA	7.20	1,548.00 T
Celloflake	54.00	EA	2.22	119.88 T
Calcium Chloride	555.00	EA	0.63	349.65 T
Sugar	50.00	EA	1.20	60.00 T
"Unit Mileage Chg (PU, cars one way)"	120.00	MI	2.55	306.00
Heavy Equipment Mileage	240.00	MI	4.20	1,008.00
"Proppant & Bulk Del. Chgs., per ton mil	1,110.00	EA	0.96	1,065.60
Depth Charge; 0-500'	1.00	EA	600.00	600.00
Blending & Mixing Service Charge	215.00	BAG	0.84	180.60
Plug Container Util. Chg.	1.00	EA	150.00	150.00
"Service Supervisor, first 8 hrs on loc.	1.00	EA	105.00	105.00

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	5,492.73
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	132.96
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	5,625.69
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		





**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 00587 A

31-325-6W

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

DATE OF JOB 12-7-13		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, Incorporated				LEASE Gates V				WELL NO. 1-31	
ADDRESS				COUNTY Cowley		STATE Kansas			
CITY				STATE		SERVICE CREW C Messick, S. Graves, D Phye			
AUTHORIZED BY				JOB TYPE C. N. W. - Surface					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
37,216	.75						12-6-13	AM	3:00
						ARRIVED AT JOB	12-6-13	AM	3:00
33,709-20,920	.75					START OPERATION	12-7-13	AM	4:45
						FINISH OPERATION	12-7-13	AM	5:30
19,960-21,010	.75					RELEASED	12-7-13	AM	5:45
						MILES FROM STATION TO WELL	120		

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

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SIGNED: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
P CP103	60/40 Poz Blend Cement	skt	215		\$ 2,580.00
P CC102	cell plate	Lb	54		\$ 199.80
P CC109	Calcium Chloride	Lb	555		\$ 582.75
P CF153	Wooden Plug, 8 7/8"	ea	1		\$ 160.00
P CC131	Sugar	Lb	50		\$ 100.00
P E100	Pickup Mileage	mi	120		\$ 510.00
P E101	Heavy Equipment Mileage	mi	240		\$ 1,680.00
P E113	Bulk Delivery	tm	1,110		\$ 1,776.00
P CE200	Cement Pump: 0 Feet To 500 Feet	hrs	4		\$ 1,000.00
P CE240	Blending and mixing service	skt	215		\$ 301.00
P CE504	Plug container	Job	1		\$ 250.00
P S003	Service Supervisor	hrs	8		\$ 175.00

SUB TOTAL  
\$5,492.73

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE *R. Messick*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: \_\_\_\_\_  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer Val Energy, Inc.	Lease No.	Date 12-7-13
Lease Gates V	Well # 1-31	
Field Order # 9587	Station Pratt, Kansas	Casing 8 5/8 24lb.
Type Job C.N.W. - Surface Cement	Formation	Depth 309 Feet
		County Cowley
		State Kansas
		Legal Description 31-325-6W

PIPE DATA		PERFORATING DATA		CEMENT USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft				RATE	PRESS	ISIP
8 5/8 24lb.	2 3/8 11.3lb.	215	sacks	60/40 Poz	with			
Depth 309 Feet	Depth	From	To	28 Gal.	38 Calcium Chloride	Max	.25 LB/st.	5 Min. cell flate
Volume 14.7 Bbl.	Volume	From	To	14.8 LB./Gal.	5.8 Gal./st.	Min	1.2 CU. FT./st.	10 Min.
Max Press 250 P.S.I.	Max Press	From	To			Avg		15 Min.
Well Connection Plug Container	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth 214 Feet	Packer Depth	From	To	Flush	18.7 Bbl. Fresh Water	Gas Volume		Total Load

Customer Representative Nandy Smith	Station Manager Kevin Gordley	Treater Clarence R. Messich
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Service Units	37,216	33,708	20,920	19,960	21,010					
Driver Names	Messich	Graves		Phye						

Time P.M.	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
8:00					Trucks on location and hold safety meeting.
1:45 A.M.					Val Drilling start to run Joints new 24lb./ft 8 5/8" casing.
4:00					Casing in well Circulate for 5 minutes.
4:45	250			5	Start Fresh water Pre-Flush.
	250		10	5	Start mixing 215 sacks 60/40 Poz cement.
			56		stop pumping. Shut in well. Release Wooden Plug. Open well.
5:05	100			5	Start Fresh water Displacement.
5:10	250		19		Plug down. Shut in well. Circulated 10 Bbl cement to the pit.
6:00					Wash up pump truck Job complete Thank you Clarence, Scott, Dale