



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1187816  
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: \_\_\_\_\_

1187816

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

<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	BRANSTETTER CHESTER UNIT 412
Doc ID	1187816

All Electric Logs Run

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

Form	ACO1 - Well Completion
Operator	OXY USA Inc.
Well Name	BRANSTETTER CHESTER UNIT 412
Doc ID	1187816

Tops

Name	Top	Datum
HEEBNER	4128	
LANSING	4212	
KANSAS CITY	4612	
MARMATON	4752	
PAWNEE	4859	
CHEROKEE	4910	
ATOKA	5138	
MORROW	5192	
CHESTER	5301	
STE GENEVIEVE	5387	





1700 S. Country Estates Rd.  
Liberal, Kansas 67905  
Phone 620-624-2277

FIELD SERVICE TICKET  
1717 04594 A

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

DATE OF JOB <b>10-29-13</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>OKY USA</b>		LEASE <b>TRCU #412</b> WELL NO.:							
ADDRESS		COUNTY <b>Haskell</b> STATE <b>KS</b>							
CITY STATE		SERVICE CREW <b>I. Chavez, Sam, Cesar</b>							
AUTHORIZED BY <b>Jay Burt</b>		JOB TYPE: <b>242 5 1/2 long string</b>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
							<b>10-28-13</b>		<b>-700</b>
<b>78938</b>	<b>9</b>	<b>70847</b>	<b>- 9</b>	<b>14355</b>	<b>9</b>	ARRIVED AT JOB	<b>10-28-13</b>	AM	<b>-910</b>
		<b>19570</b>	<b>- 1</b>	<b>37725</b>	<b>1</b>	START OPERATION	<b>10-29-13</b>	AM	<b>130</b>
						FINISH OPERATION	<b>10-29-13</b>	AM	<b>230</b>
						RELEASED	<b>10-29-13</b>	AM	<b>330</b>
						MILES FROM STATION TO WELL	<b>60</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: X Martin Goia Salinas  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL104	50-50PUZ	SK	270	8 25	2227 50
CC113	Gypsum	16	1135	56	635 60
CC111	Salt	16	1658	38	630 04
CC103	C-15	16	137	9 38	1285 06
CC105	C-41A	16	57	3 00	171 00
CC201	Gilsonite	16	1350	50	675 00
CF251	Guide Shoe	EA	1		187 50
CF1451	Insert Float Valve	EA	1		161 25
CF4105	Stop Collar	EA	1		63 00
CF4452	Centralizer 5/2	EA	25	56 25	1406 25
CF103	Rubber Plug	EA	1		78 75
CC135	Super Flush	SD	500	1 15	575 00
E101	Heavy Equipment Mileage	mi	120	5 25	630 00
CE240	Blending + Mix Charge	SK	270	1 05	283 50
E113	Bulle Delivery Charge	TR	681	1 20	817 20
CE206	Death Charge	4hrs	1		216 00
CE504	Plus Contingency Charge	job	1		187 50
E100	Pickup Mileage	mi	60	3 19	191 40
5003	Service Supervisor	EA	1		131 25
SUB TOTAL					<b>12721 80</b>
SERVICE & EQUIPMENT					%TAX ON \$
MATERIALS					%TAX ON \$
TOTAL					

CHEMICAL / ACID DATA:			

SERVICE REPRESENTATIVE: I. Chavez

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: X Martin Goia Salinas  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

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





# Cement Report

Customer <i>OKY USA</i>		Lease No.		Date <i>10-29-13</i>	
Lease <i>BCU</i>		Well # <i>412</i>		Service Receipt <i>4594</i>	
Casing <i>5 1/2</i>	Depth <i>5612</i>	County <i>Haskell</i>		State <i>KS</i>	
Job Type <i>242 Long Strg</i>		Formation	Legal Description <i>31-27-33</i>		
Pipe Data			Perforating Data		Cement Data
Casing size <i>5 1/2 17. #</i>	Tubing Size		Shots/Ft		Lead
Depth <i>5615</i>	Depth <i>55, 43</i>		From	To	<i>Tail in 270 sk 50-50 1158 FT 3-52 POZ 7.366 sk 13.5 #</i>
Volume <i>129.5615</i>	Volume		From	To	
Max Press <i>2000</i>	Max Press		From	To	
Well Connection <i>5 1/2</i>	Annulus Vol.		From	To	
Plug Depth <i>5569</i>	Packer Depth		From	To	
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	
<i>2100</i>					<i>Arrive On Location</i>
<i>2110</i>					<i>Safety Meeting Plus Up</i>
<i>2200</i>					<i>Run Pumping Casing</i>
<i>1245</i>					<i>Circulate w/ Run</i>
<i>125</i>					<i>Hook up To BES</i>
<i>130</i>	<i>2000</i>		<i>6.0</i>	<i>1.0</i>	<i>Pressure Test</i>
<i>133</i>	<i>350</i>		<i>5</i>	<i>5.5</i>	<i>Pump Water Spacer</i>
<i>138</i>	<i>300</i>		<i>12</i>	<i>5.5</i>	<i>Pump Super Flush</i>
<i>141</i>	<i>250</i>		<i>5</i>	<i>5.5</i>	<i>Pump Water Spacer</i>
<i>145</i>	<i>200</i>		<i>70</i>	<i>5.9</i>	<i>Pump cent @ 13.5 #</i>
<i>200</i>					<i>WASH UP - DISPLACE</i>
<i>205</i>	<i>350</i>		<i>119</i>	<i>6.0</i>	<i>Displace</i>
<i>225</i>	<i>1000</i>		<i>10</i>	<i>2.0</i>	<i>Slow Down</i>
<i>230</i>	<i>1500</i>		<i>11</i>	<i>11</i>	<i>Lead Plug - Float Held</i>
					<i>Plug Mouse Hole</i>
					<i>Job Complete</i>
					<i>Thanks For Using BASIC Energy</i>
Service Units	<i>78938</i>	<i>70897-1950</i>	<i>14355-37725</i>		
Driver Names	<i>L. Chavez</i>	<i>Sam</i>	<i>Cesar</i>		

*Martin*  
Customer Representative

*Key Beith*  
Station Manager

*Israel Chavez*  
Cementer





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

1700 S. Country Estates Rd.  
Liberal, Kansas 67905  
Phone 620-624-2277

FIELD SERVICE TICKET  
1717 04591 A

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

DATE OF JOB <b>10-25-13</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>BCU #412</b>		WELL NO.		
ADDRESS		COUNTY <b>Haskell</b>		STATE <b>KS</b>		
CITY STATE		SERVICE CREW <b>J. Chavez, Sam, Santiago, Daniel</b>				
AUTHORIZED BY <b>Jay Pratt</b>		JOB TYPE: <b>242 8 9/8 Surface</b>				
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <b>10-24-13</b> DATE AM PM - TIME
<b>78938</b>	<b>10</b>	<b>70899</b>	<b>10</b>	<b>38119</b>	<b>10</b>	ARRIVED AT JOB <b>10-24-13</b> AM PM - TIME
		<b>19570</b>	<b>1</b>	<b>19566</b>	<b>1</b>	START OPERATION <b>10-25-13</b> AM PM - TIME
<b>30464</b>	<b>10</b>					FINISH OPERATION <b>10-25-13</b> AM PM - TIME
<b>37724</b>	<b>1</b>					RELEASED <b>10-25-13</b> AM PM - TIME
						MILES FROM STATION TO WELL <b>50</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: *[Signature]*  
(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	335	13 95	4673 25
CL110	Promo Plus Cont	SK	245	12 23	2996 35
CC109	Calcium Chloride	lb	1407	79	1111 53
CC102	Celloflake	lb	145	2 78	403 10
CC130	C-51	lb	63	18 75	1181 25
CF253	Guide Shoe	EA	1		285 00
CF1453	Insert Float Valve	EA	1		210 00
CF4403	Centralizer	EA	15	108 75	1631 25
CF105	Rubber Plug	EA	1		168 75
CF4109	Stop Collar	EA	1		75 00
E101	Heavy Equipment Mileage	mi	150	5 25	787 50
CE240	Blending & Mixing Charge	SK	580	1 05	609 00
E113	Bulk Delivery Charge	tn	1365	1 20	1638 00
CE202	Depth Charge	4hrs	1		1125 00
CE504	Plus Container Charge	sub	1		187 50
E100	Pickup Mileage	mi	50	3 19	159 50
5003	Service Supervisor	EA	1		131 25
CE503	Derrick Charge	EA	1		225 00
E724	2" Pop off Valve Rental	EA	1		225 00
SUB TOTAL					<b>17823 23</b>

SIGNATURE: *[Signature]*  
 PRINTED NAME: *[Name]*  
 TITLE: *[Title]*  
 CONTRACT #: **179547**  
 MAKE/O. / WSM #: **01-02**  
 LEASEWELL/FAC: **BCU #412**  
 AP LOCATION/DEPT.: **Lib. Cap**  
 ELEMENT: **3023**  
 CAPEX / OPEX - Circle one  
 UNSUPP/RTED

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: *[Signature]*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *[Signature]*  
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

# Cement Report

Customer <i>Oxy USA</i>		Lease No.		Date <i>10-25-13</i>	
Lease <i>BCU</i>		Well # <i>412</i>		Service Receipt <i>4591</i>	
Casing <i>8 5/8</i>	Depth <i>1790</i>	County <i>Haskell</i>		State <i>KS</i>	
Job Type <i>242 Surface</i>		Formation		Legal Description <i>31-27-33</i>	
Pipe Data			Perforating Data		Cement Data
Casing size <i>8 5/8 24#</i>		Tubing Size		Shots/Ft	
Depth <i>1799</i>		Depth <i>55.42</i>		From	To
Volume <i>111.7 b15</i>		Volume		From	To
Max Press <i>1800</i>		Max Press		From	To
Well Connection <i>8 5/8</i>		Annulus Vol.		From	To
Plug Depth <i>1757</i>		Packer Depth		From	To
				Lead <i>335 sk A-Con</i> <i>2.4 Ft 7-Sk</i>	
				Tail in <i>245 sk Class C</i> <i>1.34 Ft 7-Sk</i>	
				6.3 Gd-Sk <i>14.8#</i>	
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>1900</i>					<i>Arrive On location</i>
<i>1920</i>					<i>Safety Meeting - Rig Up</i>
<i>1930</i>					<i>Rig Pumping Casing</i>
<i>220</i>					<i>Circulate w/ Rig</i>
<i>300</i>					<i>Hook up to BES</i>
<i>305</i>	<i>2000</i>		<i>1.0</i>	<i>1.0</i>	<i>Pressure Test</i>
<i>310</i>	<i>300</i>		<i>143</i>	<i>5.0</i>	<i>Pump Lead amt @ 12.1#</i>
<i>345</i>	<i>200</i>		<i>58</i>	<i>4.0</i>	<i>Pump Tail amt @ 14.8#</i>
<i>400</i>					<i>Drop Plug - Wash Up</i>
<i>405</i>	<i>300</i>		<i>101</i>	<i>6.0</i>	<i>Displace</i>
<i>425</i>	<i>700</i>		<i>10</i>	<i>2.0</i>	<i>Slow Down</i>
<i>430</i>	<i>1200</i>		<i>1</i>	<i>1</i>	<i>Land Plug - Float Held</i>
					<i>Cement To Surface</i>
					<i>Job Complete</i>
<i>500</i>					<i>Test Casing - OK</i>
					<i>Thanks For Using BASIC Energy Services</i>
Service Units	<i>78998</i>	<i>70897-19570</i>	<i>38119-19566</i>	<i>30464-37724</i>	
Driver Names	<i>I. Chavez</i>	<i>Sam</i>	<i>Daniel</i>	<i>Sanjo</i>	

*Murky*  
Customer Representative

*Sanjo*  
Station Manager

*Izzy Chavez*  
Cementer