



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1190164  
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: \_\_\_\_\_

1190164

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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Rank OWWO 1-2



Accty -  
cc: WT  
cc: Lili  
cc: L-1

PAGE 1 of 1	INVOICE NO 1002852	INVOICE DATE 10/29/2013
INVOICE NUMBER 1717 - 91322201		

Liberal

B : Murfin Drilling  
L : PO Box 288  
L : Russell, KS 67665  
T : ATTN: ACCOUNTS PAYABLE  
O

LEASE NAME Rank OWWO #1-2  
LOCATION  
COUNTY Stafford  
STATE KS  
JOB DESCRIPTION Cement-New Well Casing/Pi  
JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40656039	19842		Net - 30 days	11/28/2013
<b>For Service Dates: 10/28/2013 to 10/28/2013</b>				
0040656039				
171704601A Cement-New Well Casing/Pi 10/28/2013 5 1/2" Longstring				
AA2 Cement	150.00	EA	12.75	1,912.49 T
60/40 POZ	80.00	EA	9.00	720.00 T
C-41P	29.00	EA	3.00	87.00 T
Salt	753.00	EA	0.38	282.38 T
Cement Friction Reducer	43.00	EA	4.50	193.50 T
C-44	141.00	EA	3.86	544.61 T
FLA-322	71.00	EA	5.63	399.38 T
Gilsonite	750.00	EA	0.50	376.88 T
"Top Rubber Cmt Plug, 5 1/2""	1.00	EA	78.75	78.75
"Guide Shoe - Regular. 5 1/2"" (Blue)"	1.00	EA	187.50	187.50
"Flapper Ins. Flt. Vlv., 5 1/2"" (Blue	1.00	EA	161.25	161.25
"Turbolizer, 5 1/2"" (Blue)"	8.00	EA	82.50	660.00
Cmt Scratchers Rotating Type	40.00	EA	37.50	1,500.00
Mud Flush	500.00	EA	0.65	322.50 T
Claymax	4.00	EA	26.25	105.00 T
"Unit Mileage Chg (PU, cars one way)"	45.00	MI	3.19	143.44
Heavy Equipment Mileage	90.00	MI	5.25	472.50
"Proppant & Bulk Del. Chgs., per ton mil	472.50	EA	1.20	567.00
Depth Charge; 3001-4000'	1.00	EA	1,620.00	1,620.00
Blending & Mixing Service Charge	230.00	BAG	1.05	241.50
Plug Container Util. Chg.	1.00	EA	187.50	187.50
Casing Swivel Rental	1.00	EA	150.00	150.00
"Service Supervisor, first 8 hrs on loc.	1.00	EA	131.25	131.25

USED FOR IC 103  
APPROVED [Signature]

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	11,044.43
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	353.48
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	11,397.91
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



**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 04601 A

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

DATE OF JOB 10-28-13 DISTRICT 1717		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>Murfin Drilling Co, Inc.</u>		LEASE <u>Rank Owwo</u>		WELL NO. <u>12</u>		
ADDRESS		COUNTY <u>Stafford</u>		STATE <u>KS</u>		
CITY STATE		SERVICE CREW <u>Ruben Carlos - Norma</u>				
AUTHORIZED BY <u>Tyler Davis TRB</u>		JOB TYPE: <u>2-42 - 5 1/2 Longstring</u>				
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <u>10-28-13</u> DATE AM PM TIME
				<u>78940</u>	<u>8</u>	ARRIVED AT JOB AM PM <u>0130</u>
				<u>19842</u>	<u>4</u>	START OPERATION AM PM <u>0800</u>
				<u>38750</u>	<u>4</u>	FINISH OPERATION AM PM <u>0857</u>
				<del>19842</del>		RELEASED AM PM <u>0930</u>
				<u>19827</u>	<u>4</u>	MILES FROM STATION TO WELL <u>45</u>
				<u>19883</u>	<u>4</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: Cory [Signature]  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA2 Cement	SK	130		2550 00
CP 103	60/40 Poz	SK	80		960 00
CC 105	C-41 <sup>0</sup> Deframer	Lb	29		116 00
CC 111	Salt	Lb	753		376 50
CC 112	Cement friction Reducer	Lb	43		258 00
CC 115	C-44	Lb	141		726 15
CC 129	fla - 322 low fluid loss	Lb	71		532 50
CC 201	Gilsonite	Lb	750		502 50
CF 103	Cement Rubber Plug 5 1/2	Eg	1		105 00
CF 145	Insert Valve 5 1/2	Eg	1		215 00
CF 145	Turbolizer 5 1/2	Eg	8		880 00
CF 2002	Cement scratchers rotating type	Eg	40		2000 00
CE 151	Mod flush	Eg	500		430 00
CE 704	Claymax - KCL Subst. tute	Gal	4		140 00
E 709	Pick up charge	ME	45		191 25
E 100	Heavy equipment Mileage	M.	90		630 00
E 143	Pipport and bulk Delivery charges	M.	473		756 00
CE 204	Depth Charge 3001' - 4000'	ea	1		2160 00
CE 240	Blending & mixing service charge	SK	230		322 00
SUB TOTAL					11044 43

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE <u>Ruben Martinez</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.





**BASIC<sup>SM</sup>**  
ENERGY SERVICES  
Liberal, Kansas

**Cement Report**

Customer <u>Martin Drilling Co, Inc.</u>		Lease No.		Date <u>10-28-13</u>	
Lease <u>Runk OWWO</u>		Well # <u>1-2</u>		Service Receipt	
Casing		Depth		County <u>Stafford</u>	
Job Type		Formation		State <u>KS</u>	
Pipe Data		Perforating Data		Legal Description <u>2-23-12</u>	
Casing size <u>5 1/2 17#</u>	Tubing Size	Shots/Ft		Cement Data	
Depth <u>3892'</u>	Depth	From	To	Lead <u>30SKS</u>	
Volume <u>89,866L</u>	Volume	From	To	@ <u>14.4 PPG</u>	
Max Press	Max Press	From	To	Scavenger	
Well Connection	Annulus Vol.	From	To	<u>60/40 POZ</u>	
Plug Depth <u>3871'</u>	Packer Depth	From	To	Tail in <u>150SKS @ 15PPG</u>	
				2% Defoamer	
				10% Salt, 3% CPR, 1%	
				Losses @ 10K, sv. #14-322	
				Low fluid loss <u>5#/66/1500</u> %	
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
0530					On location Rig up
0745					Safety Meeting
0800	2500				Pressure Test
0808					Plug <del>Route</del> Rat Hole
0818	150		3	5	Pump Water
0820	150		12	5	Pump Mud flush
0821	200		3	5	Pump Water
0822	200		7	6	Pump 30 SKS Scavenger Cement
0825	200		38	6	Pump 150 SKS @ 15PPG AA2 Cement
0834	150			5	Start Displacement
0846	600		75	2	Slow Rate
0852	1100		90	2	Plug Landed
0857	0				Release Pressure & float Held
Service Units		<u>78940</u>	<u>38750</u>	<u>14827</u>	<u>19883</u>
Driver Names		<u>Ruben</u>	<u>Carlos</u>	<u>Norma</u>	

Jerry Bennett

Ruben Martinez

Customer Representative

Station Manager

Cementer