



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1190587  
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: \_\_\_\_\_

1190587

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> _____ _____
--	---	---



# Koda Services, Inc.

# INVOICE

Conductor and Rat Hole Drilling, Landfill Gas Drilling and Well Construction Nationwide

Date	Invoice #
1/13/2014	11098

Bill To
CMX Oil & Gas Exploration 1700 N Waterfront Parkway Bldg 300, Suite B Wichita KS 67206

Legal Description	Ordered By	Terms	Field Ticket	Lease Name	Drill Rig
Sec.8-35S-12Left	Leah	Net 30	8485	Barber County Fair...	Duke 7

Item	Quantity	Description
Conductor	60	Drilled 60' of 26" hole for conductor
16" pipe	60	Furnished 60' of 16" Conductor Hole Pipe
Ream Hole		Ream Hole
60" X 5'	1	Furnished 5' X 5' tinhorn
Dirt Removal		Provided Labor and Equipment for dirt removal and cleanup
15"X 30'	1	Furnished 30' Shuck
Placement	1	Equipment and Labor to install shuck in hole
Welder		Welder
Grout		Furnished grout
Deliver Grout		Deliver grout to location
Rat & Mouse		Drilled Rat & Mouse Holes
Cover Plate		Cover Plate
Barrier Fence		Provided and Set Barrier Fence

Thank you for your business.	<b>Subtotal</b>	\$10,900.00
	<b>Sales Tax (7.15%)</b>	\$341.41
	<b>Total</b>	\$11,241.41



PAGE	CUST NO	INVOICE DATE
1 of 1	1000793	01/02/2014
<b>INVOICE NUMBER</b>		
<b>1718 - 91376253</b>		

Pratt (620) 672-1201  
 B CMX INC  
 I 1700 N WATERFRONT PKWY BLDG 300 STE B  
 L WICHITA  
 L KS US 67206  
 T  
 O ATTN: ACCOUNTS PAYABLE

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

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE		
40676992	20920		Net - 30 days	02/01/2014		
			<b>QTY</b>	<b>U of M</b>	<b>UNIT PRICE</b>	<b>INVOICE AMOUNT</b>
<i>For Service Dates: 12/31/2013 to 12/31/2013</i>						
0040676992						
171809691A Cement-New Well Casing/Pi 12/31/2013 Cement 8 5/8 Surface						
A-Con Blend Common		245.00	EA	11.16	2,734.28	T
Common Cement		200.00	EA	9.92	1,984.05	T
Celloflake		112.00	EA	2.29	256.93	T
Calcium Chloride		1,069.00	EA	0.65	695.94	T
Sugar		100.00	EA	1.24	124.00	T
"Top Rubber Cmt Plug, 8 5/8""		1.00	EA	139.50	139.50	T
Centralizer 8 5/8 x 12 1/4		3.00	EA	89.90	269.71	T
"8 5/8" Basket (Blue)"		1.00	EA	195.30	195.30	T
Flapper Type Insrt Float Vlve 8 5/8"(BI		1.00	EA	173.60	173.60	T
"Unit Mileage Chg (PU, cars one way)"		55.00	MI	2.64	144.93	T
Heavy Equipment Mileage		165.00	MI	4.34	716.12	T
"Proppant & Bulk Del. Chgs., per ton mil		1,152.00	EA	0.99	1,142.81	T
Depth Charge; 1001'-2000'		1.00	EA	930.02	930.02	T
Blending & Mixing Service Charge		445.00	BAG	0.87	386.27	T
Plug Container Util. Chg.		1.00	EA	155.00	155.00	T
"Service Supervisor, first 8 hrs on loc.		1.00	EA	108.50	108.50	T

<b>PLEASE REMIT TO:</b>	<b>SEND OTHER CORRESPONDENCE TO:</b>	<b>SUB TOTAL</b>	<b>10,156.96</b>
<b>BASIC ENERGY SERVICES, LP</b>	<b>BASIC ENERGY SERVICES, LP</b>	<b>TAX</b>	<b>414.36</b>
<b>PO BOX 841903</b>	<b>801 CHERRY ST, STE 2100</b>	<b>INVOICE TOTAL</b>	<b>10,571.32</b>
<b>DALLAS, TX 75284-1903</b>	<b>FORT WORTH, TX 76102</b>		



**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 09691 A

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

DATE OF JOB <u>12-31-13</u> DISTRICT <u>Pratt KS</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>CIMX</u>		LEASE <u>BARBER COUNTY Fair Woods</u> WELL NO. <u>1</u>								
ADDRESS		COUNTY <u>BARBER</u> STATE <u>KS</u>								
CITY		STATE								
AUTHORIZED BY		SERVICE CREWS <u>Sullivan, CRAVENS, HANBY, EGGING</u>								
		JOB TYPE <u>CNGI Surface</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>33708-20920</u>	<u>1</u>						<u>12-31-13</u>			<u>2:00</u>
<u>19960-21010</u>	<u>1</u>									<u>4:30</u>
<u>19959-19860</u>	<u>1</u>									<u>1:15</u>
<u>37900</u>										<u>3:15</u>
										<u>2:45</u>
										<u>55</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: Robert D. Beck  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 101	A-CON Blend cmt	SK	245		4 410 00
CP 100-C	Common cmt	SK	200		3 200 00
CC 102	CellFAXe	lb	112		414 40
CC 109	CACCUM chloride	lb	1069		1 122 45
CF 105	TOP Rubber Plug 8 3/8	SA	1		225 00
CF 1453	FRSnt Hoop	SA	1		280 00
CF 1773	Cont	SA	3		435 00
CF 1903	BASKET	SA	1		315 00
CC 131	SupAR	lb	100		200 00
CE 101	Heavy Sct	mi	155		1 155 00
CE 240	Blending Mixing	SK	445		623 00
E 112	Bulk Delivery	TM	1152		1 843 60
CE 202	Depth Change 1000' - 200'	SA	1		1 500 00
CE 504	Plug Costers Rental	SA	1		250 00
S 003	Skid Supervise	SA	1		175 00
E 100	outcrop	mi	55		233 75

SUB TOTAL KG 10,156 96

CHEMICAL / ACID DATA:			

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

Thank you

TOTAL

SERVICE REPRESENTATIVE Robert D. Beck

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Robert D. Beck

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



**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 09691 A

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

DATE OF JOB: 12-21-12		DISTRICT: Pratt 2		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: CMLX				LEASE: [unclear]				WELL NO.:	
ADDRESS:				COUNTY: [unclear]		STATE: KS			
CITY:				STATE:		SERVICE CREW: [unclear]			
AUTHORIZED BY:				JOB TYPE: CNG / [unclear]					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
33208-2092	1						12-21-12		7:00
19960-31010	1					ARRIVED AT JOB		AM/PM	4:30
19959-19860	1					START OPERATION		AM/PM	1:15
37810						FINISH OPERATION		AM/PM	2:15
						RELEASED		AM/PM	2:45
						MILES FROM STATION TO WELL			55

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
CP 101	A (C) [unclear]	SK	245		4 410 00
CP 100-C	[unclear]	SK	200		3 300 00
PC 102	Call [unclear]	lb	112		414 40
PC 109	[unclear]	lb	1367		1.122 45
CF 105	TOP Rubber Plug 8 1/2	SA	1		225 00
CF 1453	FWS + [unclear]	SA	1		280 00
CF 1773	Cost	SA	3		435 00
CF 1903	1000 ft	SA	1		315 00
PC 131	Suppl	lb	100		200 00
CE 101	4 Rows [unclear]	mi	152		1.155 00
CE 240	Block [unclear]	SK	445		623 00
CE 113	Block [unclear]	mi	1152		1.893 60
CE 202	Or [unclear]	SA	1		1.500 00
CF 504	Plat [unclear]	SA	1		250 00
S 003	St [unclear]	SA	1		172 00
E 100	[unclear]	mi	55		233 75

CHEMICAL / ACID DATA:			

SUB TOTAL		10,167.60
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE: [Signature]	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]
FIELD SERVICE ORDER NO.:	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer <i>CWIX</i>		Lease No.		Date	
Lease <i>BARBER-County Fairlands</i>		Well # <i>1</i>		<i>12-31-13</i>	
Field Order # <i>9691</i>	Station	Casing <i>8 5/8</i>	Depth <i>1018'</i>	County <i>BARBER</i>	State <i>KS</i>
Type Job <i>CWU 8 5/8 Surface</i>			Formation	Legal Description <i>8-35-12</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>8 5/8</i>				Pre Pad	Max		5 Min.	
Depth <i>1018'</i>	Depth	From	To	Pad	Min		10 Min.	
Volume <i>62</i>	Volume	From	To	Frac	Avg		15 Min.	
Max Press <i>500</i>	Max Press	From	To		HHP Used		Annulus Pressure	
Well Connection <i>PC</i>	Annulus Vol.	From	To	Flush	Gas Volume		Total Load	
Plug Depth <i>770'</i>	Packer Depth	From	To					

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Johnson</i>
-------------------------	-----------------------------------	-------------------------------

Service Units	<i>37900</i>	<i>33208</i>	<i>20920</i>	<i>19960</i>	<i>21010</i>	<i>19959</i>	<i>19860</i>				
Driver Names	<i>Sullivan</i>	<i>GRAVES</i>	<i>HAMBY</i>	<i>ESSEN</i>							

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>4:30</i>					<i>on loc softy meeting</i>
					<i>Ran 24 ITS 8 5/8 24 cyl.</i>
<i>12:50</i>					<i>CASING on Bottom</i>
<i>1:00</i>					<i>Hook By Circ.</i>
<i>1:15</i>			<i>107</i>	<i>4.5</i>	<i>St mix A-GW cont 245 @ 3% cc 1/4 CF</i>
			<i>42</i>		<i>St mix (Common) cont 200 @ 2% cc 1/4 CF</i>
					<i>cont mixed shut down</i>
					<i>Release Plug</i>
<i>2:15</i>	<i>600</i>		<i>62</i>	<i>4</i>	<i>St Plug plug down</i>
					<i>circulated 20 @ cont pit</i>
					<i>JOB Complete</i>
					<i>Thank you</i>





PAGE	CUST NO	INVOICE DATE
1 of 1	1000793	01/11/2014
<b>INVOICE NUMBER</b>		
<b>1718 - 91381681</b>		

Pratt (620) 672-1201  
 B CMX INC  
 I 1700 N WATERFRONT PKWY BLDG 300 STE B  
 L WICHITA  
 L KS US 67206  
 T  
 O ATTN: ACCOUNTS PAYABLE

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

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40679895	27463		Net - 30 days	02/10/2014

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 01/08/2014 to 01/08/2014</i>				
0040679895				
171809633A Cement-New Well Casing/Pi 01/08/2014				
Cement 5 1/2" Longstring				
AA2 Cement	275.00	EA	11.39	3,132.32 T
Salt	1,382.00	EA	0.34	462.98 T
Gilsonite	1,375.00	EA	0.45	617.25 T
C-41P	52.00	EA	2.68	139.36 T
FLA-322	130.00	EA	5.03	653.27 T
Cement Friction Reducer	78.00	EA	4.02	313.57 T
Mud Flush	500.00	EA	0.58	288.11 T
Claymax KCL Substiute	6.00	EA	23.45	140.70 T
"Latch Down Plug & Baffle, 5 1/2" (Blu	1.00	EA	268.01	268.01
"Auto Fill Float Shoe 5 1/2" (Blue)"	1.00	EA	241.21	241.21
"Turbolizer, 5 1/2" (Blue)"	7.00	EA	73.70	515.91
"5 1/2" Basket (Blue)"	2.00	EA	194.31	388.61
"Unit Mileage Chg (PU, cars one way)"	55.00	MI	2.85	156.62
Heavy Equipment Mileage	110.00	MI	4.69	515.91
"Proppant & Bulk Del. Chgs., per ton mil	712.00	EA	1.07	763.28
Depth Charge; 5001-6000'	1.00	EA	1,929.65	1,929.65
Blending & Mixing Service Charge	275.00	BAG	0.94	257.96
Plug Container Util. Chg.	1.00	EA	167.50	167.50
"Service Supervisor, first 8 hrs on loc.	1.00	EA	117.25	117.25

<b>PLEASE REMIT TO:</b>	<b>SEND OTHER CORRESPONDENCE TO:</b>	<b>SUB TOTAL</b>	<b>11,069.47</b>
<b>BASIC ENERGY SERVICES, LP</b>	<b>BASIC ENERGY SERVICES, LP</b>	<b>TAX</b>	<b>410.95</b>
<b>PO BOX 841903</b>	<b>801 CHERRY ST, STE 2100</b>	<b>INVOICE TOTAL</b>	<b>11,480.42</b>
<b>DALLAS, TX 75284-1903</b>	<b>FORT WORTH, TX 76102</b>		



**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 09633 A

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

DATE OF JOB <b>1-8-14</b>		DISTRICT <b>Pratt</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>CMX inc.</b>				LEASE <b>BAIBER CO. FAIGIONWIS</b>				WELL NO. <b>1</b>	
ADDRESS				COUNTY <b>BAIBER</b>		STATE <b>KS</b>			
CITY				STATE		SERVICE CREW <b>MATTAI, Kuehn, Piersol</b>			
AUTHORIZED BY				JOB TYPE: <b>cnw L.S.</b>					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM PM	TIME
<b>37586</b>	<b>1</b>						<b>1-8-14</b>	<b>AM</b>	<b>12:30</b>
						ARRIVED AT JOB		<b>AM</b>	<b>2:30</b>
<b>27463</b>	<b>1</b>					START OPERATION		<b>AM</b>	<b>8:00</b>
						FINISH OPERATION		<b>AM</b>	<b>9:00</b>
<b>19831/19862</b>	<b>1</b>					RELEASED		<b>AM</b>	
						MILES FROM STATION TO WELL			<b>55</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  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 105	AA-2 cmt	SK	225		3,825.00
CP 105	AA-2 cmt	SK	50		850.00
CC 111	SALT	LB	1382		691.00
CC 201	Silsonite	LB	1375		921.25
CC 105	C-4IP	LB	52		208.00
CC 129	F 1A 322	LB	130		975.00
CC 112	CMT FRICTION REDUCER	LB	78		468.00
CF 607	LATCH DOWN PLYG + BAFFLE 5 1/2	EA	1		400.00
CF 1901	5 1/2 BASKET	EA	2		580.00
CF 1251	AUTO FILL FLOAT SHOR 5 1/2	EA	1		360.00
CF 1651	TURBOLIZER	EA	7		770.00
CC 151	MUD FLUSH	SI	500		430.00
C 704	CLAYMAX KCL SUB	SI	6		210.00
E 101	HEAVY EQ. MILES	MI	110		770.00
CE 240	BLEND + MIX CHARGE	SK	275		385.00
E 113	PROP + BULK DEL	TM	712		1,139.60
CE 206	DEPTH CHARGE 500'-6000'	HM	1		2,880.00
CE 504	PLYG CONTAINER	JOB	1		250.00
S 003	SERVICE SUPERVISOR	EA	1		175.00
E 100	P.U. MILES	MI	55		233.75
				SUB TOTAL	11,069.47
CHEMICAL / ACID DATA:				SERVICE & EQUIPMENT	%TAX ON \$
				MATERIALS	%TAX ON \$
				TOTAL	

SERVICE REPRESENTATIVE Mike Mattai

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: X Taylor  
(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 09633 A

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

DATE OF JOB: 1-8-14		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: CMX inc				LEASE: LANE 2145				WELL NO.:		1
ADDRESS:				COUNTY: Pratt				STATE:		K
CITY:				STATE:				SERVICE CREW:		MATTIE W
AUTHORIZED BY:				JOB TYPE: CMX						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME	
3750	1						1-8-14	AM	11:00	
						ARRIVED AT JOB		AM	2:30	
2740	1					START OPERATION		AM	8:00	
						FINISH OPERATION		AM	9:00	
1950/1950	1					RELEASED		AM		
						MILES FROM STATION TO WELL		AM	55	

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	50	225		3825.00
CP 105	AA 2	50	50		850.00
CC 111	SALT	10	1387		691.00
CC 201	SALT	10	1370		921.00
CC 105	C-411	10	52		208.00
CC 129	F 1022	10	130		975.00
CC 112	C 1022	10	78		468.00
CF 607	LANE 2145		1		400.00
CF 1901	SALT		2		580.00
CF 1251	SALT		1		360.00
CF 1651	SALT		7		770.00
CC 151	M 140	51	400		430.00
C 704	C 1022	21	6		210.00
E 101	M 200	20	11		770.00
E 204	M 200	50	27		385.00
E 115	M 200	10	71		1,139.60
C 200	M 200	40	1		2,880.00
C 200	M 200	20	1		250.00
S 200	S 200	1	1		175.00
E 101	M 200	10	1		233.75
SUB TOTAL					11,069.97
SERVICE & EQUIPMENT					%TAX ON \$
MATERIALS					%TAX ON \$
TOTAL					

CHEMICAL / ACID DATA:			

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

Customer <b>CIMX INC</b>	Lease No.	Date <b>1-8-14</b>
Lease <b>KARLSON CO. (201300000)</b>	Well # <b>1</b>	
Field Order # <b>7633</b>	Station <b>Pratt</b>	Casing <b>5 1/2</b>
		Depth <b>5161.82</b>
Type Job <b>COV IS</b>	Formation	County <b>WABASH</b>
		State <b>K</b>
		Legal Description <b>8-35-5-12W</b>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
5 1/2								
Depth <b>5161.82</b>	Depth	From	To	Pre Pad	Max		5 Min.	
Volume <b>122.85</b>	Volume	From	To	Pad	Min		10 Min.	
Max Press <b>1500</b>	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection <b>PC</b>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <b>5140.5</b>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative <b>TRACY MADDA</b>	Station Manager <b>KEVIN A GORDON</b>	Treater <b>MIKE PRATT</b>
Service Units <b>27586</b>	<b>27462</b>	<b>1952</b>
Driver Names <b>MADDA</b>	<b>KUCI</b>	<b>KUCI</b>

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
2:30					ON LOCATION / SAFETY MEETING
3:30					RUN 5 1/2 15.5" CS
					DRY 1, 10 TUBING 2, 4, 8, 15, 20, 30, 35
6:00					CS ON BOTTOM
6:10					HOOK UP TO CS / BREAK OUT W R.
7:40	300		5	5	PUMP 5 BBL H2O
7:52	300		12	5	PUMP 12 BBL H2O + H2O
7:55	250		5	5	PUMP 5 BBL H2O
7:57	250		58		MIX 225 GAL H2O
8:17					WASH PUMP + L. / WASH PUMP
8:17	100			6	STOP PUMP
8:35	600		87	5	LIQUID
8:43	700		112	4	STOP PUMP
8:45	1000/1500		169		PLUG DOWN, 151 TO 150, 1 1/2" + 1/2"
					PLUG R.H. + M.H.
					CONNECTION 3.0"
					THANK YOU!
					MIKE PRATT