

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division 1199480

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 #			API No. 15						
Name:			Spot Description:						
Address 1:			Sec.	Twp S. R	East West				
Address 2:			F6	eet from North / Se	outh Line of Section				
City: S	tate: Z	ip:+	Fe	eet from East / W	lest Line of Section				
Contact Person:			Footages Calculated from	Nearest Outside Section Cor	rner:				
Phone: ()			□ NE □ NW	V □SE □SW					
CONTRACTOR: License #			GPS Location: Lat:	, Long:					
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxxx)				
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84					
Purchaser:			County:						
Designate Type of Completion:			Lease Name:	Well	l #:				
	e-Entry	Workover	Field Name:						
	_	_	Producing Formation:						
☐ Oil ☐ WSW ☐ D&A	☐ SWD	□ SIOW □ SIGW	Elevation: Ground:	Kelly Bushing: _					
OG	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total Dep	oth:				
CM (Coal Bed Methane)	_ dow	тетір. дай.	Amount of Surface Pipe Se	et and Cemented at:	Feet				
Cathodic Other (Con	re, Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes N	No				
If Workover/Re-entry: Old Well In			If yes, show depth set:		Feet				
Operator:			If Alternate II completion, of	cement circulated from:					
Well Name:			feet depth to:	w/	sx cmt.				
Original Comp. Date:	Original T	otal Depth:							
Deepening Re-perf.	Conv. to E	NHR Conv. to SWD	Drilling Fluid Managemer	nt Plan					
☐ Plug Back	Conv. to G	SW Conv. to Producer	(Data must be collected from t						
Commingled	Dormit #		Chloride content:	ppm Fluid volume: _	bbls				
Dual Completion			Dewatering method used:						
SWD			Location of fluid disposal if	i hauled offsite:					
☐ ENHR			Loodiion of haid diopodal in	nation office.					
GSW	Permit #:		Operator Name:						
_ <del>_</del>				License #:					
Spud Date or Date Re	ached TD	Completion Date or	Quarter Sec	TwpS. R					
Recompletion Date		Recompletion Date	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:											

Page Two



Operator Name:			Well #:												
Sec Twp	S. R	East West	County:												
open and closed, flow	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														
		tain Geophysical Data a r newer AND an image f		gs must be ema	iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log								
Drill Stem Tests Taken  (Attach Additional Sheets)  Name  Top															
Samples Sent to Geo	logical Survey	☐ Yes ☐ No	Nam	9		Тор	Datum								
Cores Taken Electric Log Run		Yes No													
List All E. Logs Run:															
		CASING Report all strings set-c	RECORD Ne conductor, surface, inte		ion, 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 / SQU	EEZE RECORD											
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Sacks Used Type and Percent Additives											
Protect Casing Plug Back TD															
Plug Off Zone															
	ulic fracturing treatment or otal base fluid of the hydra	n this well? aulic fracturing treatment ex	ceed 350.000 gallons	Yes ?      Yes		p questions 2 an p question 3)	d 3)								
	· · · · · · · · · · · · · · · · · · ·	submitted to the chemical of	_	Yes		out Page Three	of the ACO-1)								
Shoto Par Foot	PERFORATIO	N RECORD - Bridge Plug	s Set/Type	Acid, Fra	cture, Shot, Cement	Squeeze Record	i								
Shots Per Foot	Specify Fo	ootage of Each Interval Perf	orated	(AI	mount and Kind of Ma	terial Used)	Depth								
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:											
					Yes No										
Date of First, Resumed	Production, SWD or ENH	R. Producing Meth		Gas Lift C	Other (Explain)										
Estimated Production Per 24 Hours	Oil B		Mcf Wate			as-Oil Ratio	Gravity								
DISPOSITIO	ON OF GAS:	N.	METHOD OF COMPLE	TION:		PRODUCTIO	ON INTERVAL:								
Vented Sold		Open Hole	Perf. Dually	Comp. Cor	nmingled										
	bmit ACO-18.)	Other (Specify)	(Submit A	ACO-5) (Sub	mit ACO-4)										

Form	ACO1 - Well Completion
Operator	Siroky Oil Management
Well Name	Evelyn #1
Doc ID	1199480

## All Electric Logs Run

Compensated Density/Neutron Log
Micro Log
Dual Induction Log
Sonic Cement Bond Log

Form	ACO1 - Well Completion
Operator	Siroky Oil Management
Well Name	Evelyn #1
Doc ID	1199480

#### Casing

Purpose Of String		Size Casing Set	Weight	Setting Depth	Cement		Type and Percent Additives
surface	12.25	10.75	32.75	281	60/40 poz	350	
production	7.875	5.5	15.5	4297	AA2	125	

# PRES

DATE OF JOB

CITY

CUSTOMER **ADDRESS** 

**AUTHORIZED BY** EQUIPMENT# 10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

HRS

become a part of this contract without the written consent of an officer of Basic Energy Services LP.

#### FIELD SERVICE TICKET 1718 09950 A

NENGT SERVICES THORE 020-072-1201					
SURE PUMPING & WIRELINE		DATE	TICKET NO		
DISTRICT	NEW ⊠ OLD □	PROD   INJ	WDW	CUSTOME ORDER NO	R O.:
DKY OIL MANAGEMENT	LEASE EVELY	W	10 10	WELL	NO. /
	COUNTY PATT		STATE	KS	
STATE	SERVICE CREW	ATT KS			
BRIAN SIROKY	JOB TYPE:/5 TAN	X SLKKU	SATER F.	RACNEW	/STACE
HRS EQUIPMENT# HRS EQU	JIPMENT# HRS	TRUCK CALL	ED -	DATE AM	TIME

HRS

TRUCK CALLED

ARRIVED AT JOB START OPERATION **FINISH OPERATION** 

RELEASED 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

**EQUIPMENT#** 

9824/19948

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

AM PM

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
C1311	FR-7	CAL	194	7	4.656 00
C2315	580 ME	GHI	20		2940 00
C704	CLAYMAY	CAL	139	, a de la companya del companya de la companya del companya de la	4,865 00
C604	B10-3	LB	15		996 00
C505	PLEXCEL BREAKER	GAL	53	i dittion i	1,318 00
P504	ACTIVATOR 730	CAL	90		675000
PK209	30/50 MESH NORTHERAN WHITE SAND KANSAS	CWT	806		17,732 00
PKZIZ	16/30 MESH NORTHERN WHITE SAND KANSAS	CWT	398	10 - 10 in	8,75600
2049	RESIN COATED, 16/30 MESH	CWI	100	11-1	8,000 00
FIOL	HEAVY EQUIPMENT MILEAGE	mi	55		- 385 00
E100	UNIT MILEAGE PICKUPS	MI	10	a majarah yan	42 50
EIIS	PROPHANT AND BULK DELIVERY CHARGES	Tm	326		52160
E435	1800 AHP TRIALEY FRAC PUMP CHARGE	FA	/		6,500 00
E437	2250 HAP QUINTUPLEX FRAC PUMP CHARGE	FA	4		40,000 00
-R207	BLENDER 71-80 BPM	FA	1		6,500 00
TIOI	TREATMENT VAN	JOB	/		2,20000
P800	20/40 MESH OR SMALLER PROP HUMP CHARCE	CWI	806		32240
P801	16/30 MESH OR LARGER PROP PUMP CHARGE	CWI	- 498		567 72
P900	1 TO 4PPG PROPARNT CONCENTRATION CHARCE	GAL	2/6,000	-	4.32000
CHI	EMICAL / ACID DATA:			SUB TOTAL	
	SERVICE & EQU	IPMENT	%TA	X ON \$	
444	MATERIALS	Die	%TAX	X ON \$	1 5 M 15 M
		vs (		TOTAL	1 11 11 11 11 11 11

SERVICE SAIJEY/ REPRESENTATIVE STERMAIN

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

#### FIELD SERVICE TICKET

1718 10301 A

810, 2000 HI 2000

-	ĸ.	-	P**	
1	Δ	-	-	

TICKET NO 09950 A

DATE OF 3/14/14 DISTRICT							NEW ☑ OLD □ PROD □ INJ □ WDW □ CUSTOMER ORDER NO.:								
CUSTOMER	SIROXY	01	MANAGEM	NENT	Ma (2004)	LEASE FUFLYN WELL NO.									
ADDRESS						COUNTY PRATT STATE KS									
CITY STATE						SERVICE CI	REW B	475 KS							
AUTHORIZED B	RY								VANCA FOR	/-					
EQUIPMENT		RS	EQUIPMENT#	HRS	EQL	JOB TYPE: 5 TANK SUCKWATER FRACIUEW ST. QUIPMENT# HRS TRUCK CALLED DATE AM TIME									
								ARRIVED AT	PM AM	-					
								START OPER		PM AM					
								FINISH OPER		AM	100				
				-	-			RELEASED		PM AM	78.0				
									STATION TO WEL	PM L	_				
TEM/PRICE			e written consent of an of	*				,	R, OPERATOR, CONT	T					
REF. NO.		MAI	ERIAL, EQUIPMENT	4	CES US	ED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUN	IT				
E600	SAND P		A	LOUIT	0		FA	1	/	3000	0				
EN19	Laura			TIDE L	WIT		JOB	/		200	16				
F 5 25	DENS		Α.	ENTAL		,	EA	1		3 500	00				
Fron	H" FRA		PALUE REN		1111		JOB	7		300	1				
FMH	MANIE	-	TRAILER			1	JOB	1		3000	10				
5003	SERVIC	F	MPERDICOR			<u> </u>	FA	1		135	0				
											+				
Section 1 - Transition	Orlange	7000	on our of we	CONTRACTOR		recovery from a				-	13				
	8 812			1 1							17				
7/4										1000					
											+				
											-				
											-				
20-5										1.78					
Drawn a		- 27		- 1 v						a the factor	1				
		4									1				
CHI	EMICAL / ACI	D DATA:		Ī					SUB TOTAL						
		-			SEF	RVICE & EQUI	ON \$								
					MA	TERIALS	- 5	%TAX							
									TOTAL	69,933	90				
SERVICE BANGEREPRESENTATION		THOM	SP MAN)			RIAL AND SEF		D BY:		1					



## TREATMENT REPORT

Customer		2	Mus	45446	IL	ease No.		2063 19019555	0.630 879	TOTAL CO.	- 1	Date						
Lease	LINGS (	11	11/14/10/4	CP MPI	Well #							3/11/14						
Field Order #	Station	n D	ATT. K	45	Casing 51/2 Depth							County Pratt State						
Type Job 15 TANK SLICKWATER FRAC									Fo	rmation	SSIPPI			Legal Des	scription	34	)	
PIPI	E DATA					DATA		FLUID	USED	)			TREA	TMENT F				
Casing Size	Tubing Siz	ze	Shots/F	5	29	HOLES	Ac	id				RATE	PRE	SS	ISIP	20	2	
Depth	Depth		From 4	140		154	Pro	e Pad			Max . >	6.5	25	53	5 Min.	10	)	
Volume	Volume		From 4			1166	Pa	d55000 C		0	Min >	5.3	213	28	10 Min.	103		
Max Press	Max Press	S	From		То		Fra	ac2/6000	0	LON	Avg >	6	23	0	15 Min.	1012	2	
Well Connection	on Annulus V	/ol.	From		То	1 .	9	SLICKWI			HHP Use	d		- '	Annulus		ESTRESSES	
Plug Depth	Packer De	epth	From		То		1	ISh 5800 LICKWA	Dr. 12	·,·O	Gas Volu	me			Total Loa	ad 6	180	
Customer Rep	presentative	AN	SROP	<		Station	Mar	nager KEVII	GOR	NEY		Trea	EY/I	PUTHONY	/wes	FRI	MAN	
Service Units	833541	1	1/83	1/51	75	36242	)	21959	210		13422	369		37281	7996	7	79963	
Driver Names	J.W.		915ER	E	B,	JOHN	)	DARYL	AD	9m	JAMES	To	0	EJ.	JAK	E	BALLEY	
Time	Casing Pressure		ubing ressure	Bbl	s. Pum	ped		Rate				-	Serv	rice Log				
7:30Am		L					_		ON	LOCAL	non (	SAFE	TY /	DEETING	AND	SET	TUP	
10:06	4562				_				PRI	mE 1	IP AND	PRE	ssur	= TEST	-			
10:13	12	_					(~)	37	Siz	AT	55000	GA	LLOR	J PAI	2			
10:14	1026				68	-	1	5	He	HOLE LOADED								
10:19	1167		10.1		42	-	20	0./	INCREASE RAIE									
10:22	1376			2	17	- 1	3	6	LUC	ENEASE	E RAT	E.						
10:27	2181			51		-		08	luc	REAS	E BATTE	_				_	100	
10:30	2323			23	4			6	100	REA	ISE RA	is .		1 2	2.1			
10:38	2284			13	10	_	-	76	Siza	12T /	16000	GALI	on	, / . 2	30/50		20	
10:39	2274	_		14		-	2	6	1/	# 39	30 on	16	50/2	me	151			
10:43	2277				92	_		6	STA	RT	18000	CIALL	ON	10 1	50			
10:44	2271	_		129		-		6.2	12	150	000 1	20,70	1121					
10:48	2253			210		-		0.3	577	427	2000	) W	FLLON	J.3 Z	150			
10:50	2545	-		22		-	71	5.0	13.	150	00	50)	901	1	307			
	2234			26			70	6.1	SMARCT 2000 GALLON, 4" 5/50									
10:56	2225			270		-		6.1	5 THET 22000 CALLON, 5# 30/50									
11:01	2211	-		30		- 1 14		6.3	7/7	AT O	13000	CIAL	WN	,5	150			
11:03	2215	- (-		3/9		7		02	15	- 1/2	SO ON	1509	TON	1 200	,	_		
11:08	2213	-			28			6.3	SM	RT &	14000	ario	rU 1	6 2 30%	0			
11:09	2212				27			5.2	16	- 3/	30 on	15	STE	MA 3	07			
11:16	2197			1963	75	-		6.2	>77	4T 0	24000	CALL	OIU	1743	150			
11:17	2176			H3	14		1	6.1	11/	150	O on	CEST	2020	1.				



## TREATMENT REPORT

Customer	SPROKY D	Ma	)dremen	U5 L	ease No.	re.	William Parks		The second		Date	)		
Lease	VELYN	<u> </u>	all Enter	V	Well #							3/11/14		
Field Order	r# Station	POAT	7.165				Casing	-1/.	Depth	n	Coun	1//		State
Type Job	15 TANI		KWAI	20	FR	10	,	For	mation	1	2.14	Lega	I Description	KS
PII	PE DATA		RFORA				ELLID			13318				
Casing Size		7	s/Ft_		DATA	Acid	FLUID	USED	- 1			TREATMEN		E
5 % /S. Depth	Depth		1+2		HOLES	Pre Pa	o.d				RATE	PRESS	ISIP /	202
Volume	Volume		14/40		1154		35000	GALL	n.d.)	Max	76.5	2553	5 Min.	1100
Max Press	Max Press		14/55	To 4	1166	Frac	CKWA	TER		Min	75.3	2128	10 Min.	1035
3000	tion Annulus V	From	1	То		Frac	16000	CAL	on	Avg	76	2340	15 Min.	1012
Plug Depth	Packer De	From		То		SL	CENO	TER		HHP				Pressure
	epresentative	From	1	То	04-4:	SLIC	5800 G	FR	)		/olume		Total Loa	ad 6780
	1/3083	19824	SIROK	,	Station	Ivianage	er KE UIL	GOR	DLEY	/	Trea	ater LEY/ANTHO	NY/WES)	ERMAN
Service Units Driver	58090	19548	1989		7803	1 X	HAND							
Names	HARON Casing	Tubing	1		CARE.	m E	OLT	1					+	
Time	Pressure	Pressure		. Pum	ped	Ra	ite					Service Log	25	
11:24	2192		480	05		76,	5	Sint	-	240	00 Q	ALLON .	8 th 3/32	
11:25	2190		49	04		76.	/	188	1 30	30	on B	morte		
//:3/	2184		53	91.	1 1	76.		STA	er a	2200	00 GA	HUON ,	7 × 16/30	
11:32	2160		54	196		76,4	1	,9#	16/30	01	0 80	nom	w 2	
11:38	2156		59	42		75.6		STA	27	200	DO CA	LLON /E	16/30	
11:40	2160		60	41		25.5		1#	16/30	OA	S Bo	Hom		M. T.
11:45	2192		64	140		75.7		SM	15	400		LON /IS	-H 16/30	RESIN
11:46	2201		65	39		75,1	> "	1,5	2 16	30	RESIN	0	moi	
11:46	2204		65	42		25.	>	STAR	r á	200	CALLO	0.1	16/	FSIN
11:48	1082		66	41		75.9	9	STA	27 5	5800		ON FIL		
11:48	1082		66	41		76		24	16/30	RES	IN ON	Porson	n	
11:50	505/		628	0				SMIT	2011)	UJ	OB COI	MPLETE		7
		V				1					F .			
										u:				
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			100			16				1343				
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		7	7											
		70		,		1 70								
,									7			- X		
		, 4,			31 4									



Date: 11-Mar-14

Well Name:		Location:	Customer Ro	ep:	Field Orde	er#
EVELYN #1		4-27S-12W	BRIAN SIRC	KY		09950A
Stage:		Formation:	Treat Via:	Allowab Tbg	le Pressure Csg	Well Type:
		MISSISSIPPI	CASING		3,000	OIL
County:		State:	Well Age:	PackerType:	PackerDep	oth: Csg Size:
PRATT		KS	NEW			5.5
Type Of Service:	15 TANK SLICKV	VATER	Csg Depth	Tbg Size:	Tbg Depth:	Liner Size:
Customer Name: Address:	SIROKY OIL MAN	AGEMENT	Liner Depth:	: Liner Top:	Liner Bot:	Total Depth:
			Open Hole:	Csg Vol:	BHT:	
				99.1		
			Perf Depths	:	Perfs:	TotalPerfs:
			4140	4154	27	
Remarks:			4155	4166	12	

THE RESERVE	INJECTION RATE		PRESSURE		DEMARKS	pece		FILLUR
TIME	FLUID	N2/CO2	STP	ANNULUS	REMARKS	PROP (lbs)	FOAM/FLD (gls)	FLUID (bbls)
10:05	0.0		4556		PSI TEST		10-7	1/
10:12	37.5		12		ST PAD		55,000	1,310.0
10:14	25.3		884		HOLE LOADED			
10:18	20.0		1163		INCREASE RATE			
10:21	36.7		1380		INCREASE RATE			
10:25	63.9		1974		INCREASE RATE			
10:27	70.8		2174		INCREASE RATE			
10:30	75.8		2323		INCREASE RATE			
10:38	76.0		2288		ST .1#	1,600	16,000	383.0
10:39	76.2		2278		ON BOTTOM			
10:43	76.1		2275		ST .2#	3,600	18,000	433.0
10:44	76.0		2268		ON BOTTOM			
10:48	76.2		2260		ST .3#	6,000	20,000	483.0
10:50	76.2		2245		ON BOTTOM			
10:55	76.2		2235		ST .4#	8,000	20,000	485.0
10:56	76.0		2219		ON BOTTOM			
11:01	76.1		2211		ST .5#	11,000	22,000	536.0
11:02	76.2		2209		ON BOTTOM			
11:08	76.3		2217		ST .6#	14,400	24,000	587.0
11:09	76.2		2210		ON BOTTOM			
11:16	76.3		2198		ST .7#	16,800	24,000	590.0
11:17	76.1		2177		ON BOTTOM			
11:23	76.3		2193		ST .8#	19,200	24,000	592.0
11:25	76.3		2194		ON BOTTOM			

Customer Acknowledgement:	Service Rating:	Treater:	PRODUCTS USED
	Satisfactory	JUSTIN BAILEY	
	Unsatisfactory		

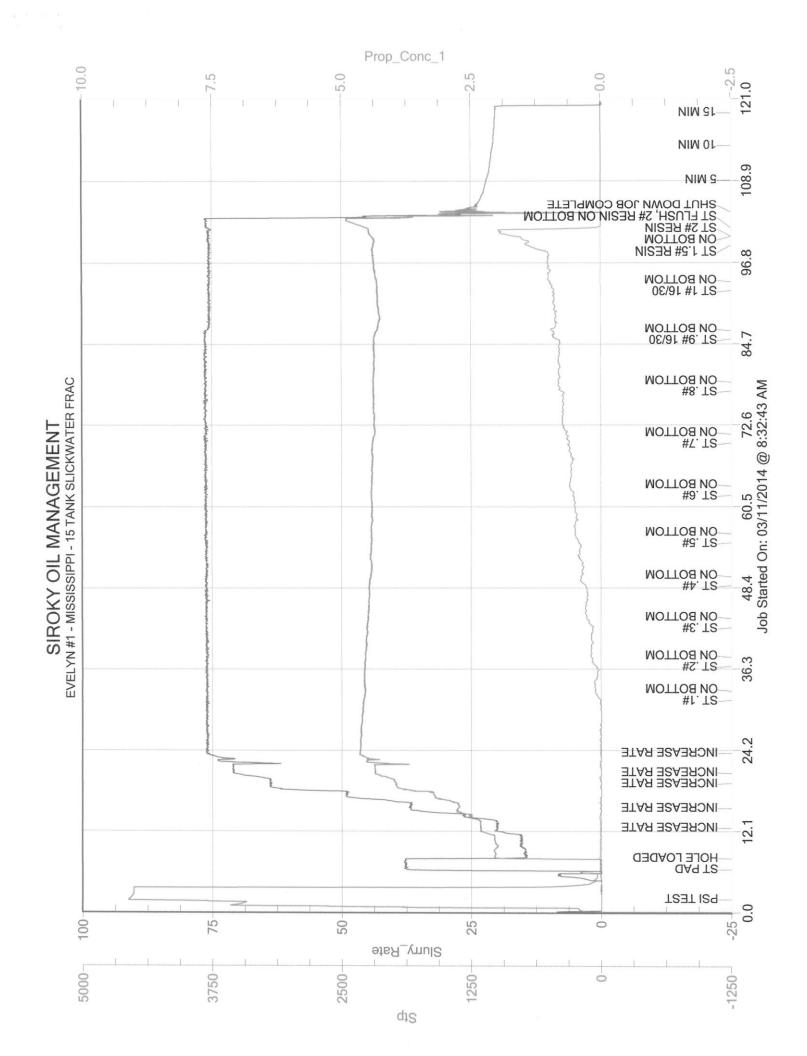


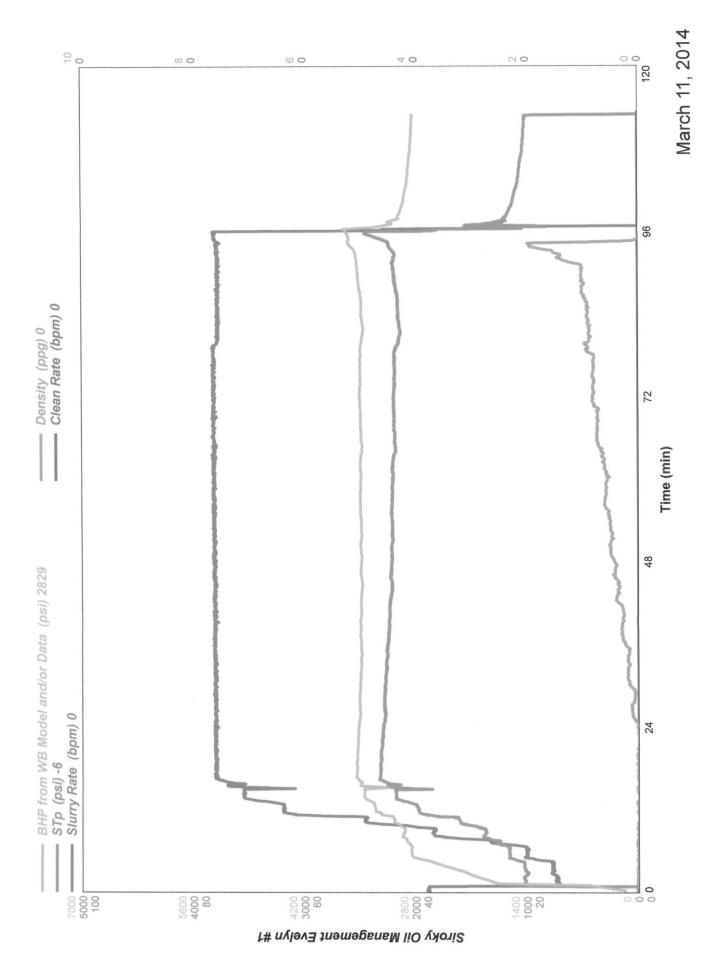
			*****		Date:	11-Mar-1
11:31	76.3	2186	ST .9# 16/30	19,800	22,000	545.0
11:32	76.5	2160	ON BOTTOM			
11:38	75.6	2150	ST 1# 16/30	20,000	20,000	498.0
11:40	75.5	2157	ON BOTTOM			
11:45	75.6	2191	ST 1.5# RESIN	6,000	4,000	102.0
11:46	75.7	2203	ON BOTTOM			
11:46	75.7	2208	ST 2# RESIN	4,000	2,000	99.0
11:48	75.4	2241	ST FLUSH, 2# RESIN ON BOTTOM		5,800	138.0
11:50	0.0	1202	SHUT DOWN JOB COMPLETE			
11:55	0.0	1100	5 MIN			
12:00	0.0	1035	10 MIN			
12:05	0.0	1012	15 MIN			
			Total:	130,400	276,800	6,781.0

#### Summary

Max Fl. Rate	Avg Fl. Rate	Max Psi	Avg Psi
76.5	68.4	4,565	2,039

Customer Acknowledgement:	Service Rating:	Treater:	PRODUCTS USED
	Satisfactory	JUSTIN BAILEY	
	Unsatisfactory		







## FIELD SERVICE TICKET 1718 10083 A

		SERVICES Pho	one 620-67	72-1201			DATE	TICKET NO.		
DATE OF JOB 02-22-	14	DISTRICT PRATT	KS		NEW WELL	OLD U	PROD IN		□ CUS	STOMER DER NO.:
CUSTOMER SIR	OK	4 0,6 M	hutce	MEW	LEASE	VELYA	)	/		WELL NO.
ADDRESS	Ę.				COUNTY	PRA-		STATE		2
CITY		STATE			SERVICE (	CREW S	Misas	-		W.
AUTHORIZED BY					JOB TYPE:	cua	51/2 1	6. 8.		
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQU	IIPMENT#	HRS	TRUCK CAL		DATE	AM TIME
19959-73768	11	m)					ARRIVED A	Т ЈОВ		AM 5:45
37900							START OPE	RATION	> -	AM 1050
		i i					FINISH OPE	RATION		AM 11:30
							RELEASED			AM 12:15
Y 5 - 1							MILES FRO	M STATION TO	WELL	5
Fire and a supplied it	cludes all	TRACT CONDITIONS: (This execute this contract as an a of and only those terms and the written consent of an of	gent of the cu	ustomer. As nearing on	such, the under	ersigned agr ack of this do	occ and salusau	dedese that the	ntract for terms and	services, materials, d/or conditions shall

ITEM/PRICE REF. NO.	MATERIAL FOURDMENT AND OFF	#050 HOTO		R, OPERATOR, CONTI		1 70
- 0	MATERIAL, EQUIPMENT AND SER	VICES USED UNIT	QUANTITY	UNIT PRICE	\$ AMOUN	TV
CP 105	AA-2 CMT	sK.	125		2.125	00
CP 103	60/40 POZ ent	SK	30		360	00
CC 105	C-41 Deformer	16	24		96	_
CC///	SALT	16	57/		285	50
CC112	CFR.	16	36		2//-	00
CC115	C-44	16	114		1000	00
00/29	Hered Lass	16	59		11/12	50
CC 201	9,130017c	16	625		1114	20
CF 607	LATCH DOWN BUFFLE 1 Play 54		1		418	19
OF 1251	FUSEN HORY Shoe	54	/		700	00
CF 1451	Cent.	EH	_		360	
CF 1901	BASKX	51	7		550	00
1204	CLAY MAX		,		290	00
10151	mun Fluch	Mt	-		.,35	00)
	THE	· JAL	500		400	00
CHE	MICAL / ACID DATA:			SUB TOTAL		
	77010 57171.			K		
		SERVICE & EQUIPMENT	%TAX			
		MATERIALS	%TAX	-		
			1	ANK TOTAL		77

SERVICE REPRESENTATIVE Polyant	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
	OMELL OMNERS ASSESSED TO THE STATE OF THE ST



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

#### FIELD SERVICE TICKET

NIDWUNTTEN

TICKET NO. 100 ☐ CUSTOMER ORDER NO.: ☐ INJ ☐ WDW WELL NO.

DATE OF OLD PROD JOB Ø DISTRICT CUSTOMER LEASE CILC **ADDRESS** COUNTY STATE CITY STATE SERVICE CREW **AUTHORIZED BY** JOB TYPE: **EQUIPMENT#** HRS **EQUIPMENT#** EQUIPMENT# HRS HRS TRUCK CALLED ARRIVED AT JOB START OPERATION **FINISH OPERATION** AM PM RELEASED 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 TM

-							
	CHEMICAL / A	CID DATA:		5	SUB TOTAL	2 5/1/	N
			SERVICE & EQUIPMENT	%TAX ON \$	10	1,544	1
V			MATERIALS	%TAX ON \$	TOTAL		
				MAINE	TOTAL		

SERVICE REPRESENTATIVE

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. (



## TREATMENT REPORT

Customer	ROKY	0	: _		L	ease No.		participa //	the acceptance	ritoria.		Date		-			
Lease	IELYM	0			W	/ell #	,					1	02.	-22	-14		
Field Order #	Statio	n PR	14	KS				Casir	19/2	Dept	297	County	2217	T			State
Type Job	W 5"	26	010/51	ting					200	ormation	i			Legal [	Description	on /	
PIPE	DATA			FORAT	ΓING	DATA		FLUI	D USE	D		7	REA	TMENT	RESU		
Casing Size	Tubing Si	ize	Shots/F	-t		_	Ad	oid				RATE	PRE		ISIP		
Depth	Depth		From		То		Pr	e Pad			Max		2		5 Mir	٦.	
Volume 9 7	Volume		From		То		Pa	ad			Min				10 M	in.	
Max Press	Max Pres	s	From		То		Fr	ac			Avg				15 M	in.	
Well Connection	n Annulus \	Vol.	From		То						HHP Use	d			Annu	lus Pre	ssure
Plug Depth	Packer D	epth	From		То		Flu	ush	5		Gas Volu	me			Total	Load	
Customer Repr	resentative					Station	Mai	nager	DAV	E Sco	+	Treat	ter Z	best	4/1	, D	
Service Units	37900	20	970	33.70	18	1995	9	7376				- 5					
Driver Names	ullivan			000		E991	200					-					Section 1
Time	Casing Pressure		ubing essure	Bbls	. Pump	oed		Rate		/			Service	ce Log			
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10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • (620) 672-1201 • Fax (620) 672-5383



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

#### FIELD SERVICE TICKET 1717 04862 A

PRESSURE PUMPING & WIRELINE DATE TICKET NO. NEW WELL OLD PROD CUSTOMER ORDER NO.: ☐ INJ DISTRICT ☐ WDW CUSTOMER LEASE WELL NO. **ADDRESS** COUNTY STATE CITY STATE SERVICE CREW **AUTHORIZED BY** MUDT JOB TYPE: **EQUIPMENT#** HRS **EQUIPMENT#** HRS **EQUIPMENT#** HRS ARRIVED AT JOB START OPERATION FINISH OPERATION RELEASED 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 ponditions 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 00 47.00 60 25 244 2400 W 25 76 100000 500 700 00 17500

CHEMICAL / ACID DATA:	SUBTOTAL	7864-4
	SERVICE & EQUIPMENT %TAX ON \$	1
	MATERIALS %TAX ON \$	
	TOTAL	
21 2		

SERVICE REPRESENTATIVE

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

SUB TOTAL



**Cement Report** Liberal, Kansas Customer Lease No. Date -15-14 Lease Well # Service Receipt Casing County State Job Type Legal Description Pipe Data **Perforating Data Cement Data** Casing size Tubing Size Lead Shots/Ft Depth Depth From Volume Volume From To Max Press Max Press From To Well Connection Annulus Vol. From To Plug Depth Packer Depth From To Casing Tubing Time Pressure Pressure Bbls. Pumbed Rate Service Log 300 200 300 36 Service Units **Driver Names** 

Customer Representative

Station Manager Station

Cementer Taylor Printing, Inc.

