



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1200720
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: _____

1200720

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: 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 |
|-----------------------------------|-----------|---------|-------------|---------------|---------|
| | | | | | |

| | | |
|--|---|---|
| DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION: <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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____ | PRODUCTION INTERVAL: _____ _____ |
|--|---|---|

Dunn #1-25 Frac Job

04-09-14 Nuverra set 17 - 500 bbl frac tanks then filled them w/ well from Gregg Ranch. RU Basic Energy Svc frac equipment, frac well as follows: SICP – ~50# FL @ 1800', Stage #1; 66,000 gal pad, 1211# @ 76.1 bpm (increased pad rate slowly). Stage #2; 20,000 gal w/ .1# of 30/50 sand, 1197# @ 76.7 bpm. Stage #3; 21,000 gal w/ .2# of 30/50 sand, 1169# @ 76.6 bpm. Stage #4; 21,000 gal w/ .3# of 30/50 sand, 1141# @ 76.8 bpm. Stage #5; 26,000 gal w/ .4# of 30/50 sand, 1116# @ 77.1 bpm. Stage #6; 26,000 gal w/ .5# of 30/50 sand, 1097# @ 77.1 bpm. Stage #7; 26,000 gal w/ .6# of 30/50 sand, 1073# @ 77.2 bpm. Stage #8; 26,000 gal w/ .7# of 30/50 sand, 1066# @ 77.3 bpm. Stage #9; 26,000 gal w/ .8# of 30/50 sand, 1034# @ 77 bpm. Stage #10; 23,000 gal w/ .9# of 16/30 sand, 1063# @ 76.5 bpm. Stage #11; 20,000 gal w/ 1# of 16/30 sand, 1060# @ 76.4 bpm. Stage #12; 4,000 gal w/ 1.5# of 16/30 resin sand, 1053# @ 76.7 bpm. Stage #13; 2,271 gal w/ 2# of 16/30 resin sand, 1033# @ 76.5 bpm. Stage #14; 6,600 gal flush, 1049# @ 76.8 bpm. ISIP – 192#, 5 min – 118#, 10 min – 80# & 15 min - 54. Total load – 7628 bbl. RDMO Basic Energy Svc.



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 A

DATE _____ TICKET NO. _____

| | | | | | | | | | |
|-----------------------------------|-----|--|-----|------------|-----|----------------------------|---------|----|-------|
| DATE OF JOB 2-1-14 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 Caswell, E. K. & Assoc. | | LEASE Dunn WELL NO. J-25 | | | | | | | |
| ADDRESS | | COUNTY Comanche STATE KS | | | | | | | |
| CITY STATE | | SERVICE CREW [unclear], [unclear], [unclear] | | | | | | | |
| AUTHORIZED BY | | JOB TYPE: C N W Construction | | | | | | | |
| EQUIPMENT# | HRS | EQUIPMENT# | HRS | EQUIPMENT# | HRS | TRUCK CALLED | DATE | AM | TIME |
| 37545 | .5 | | | | | | 1-31-14 | PM | 10:30 |
| | | | | | | ARRIVED AT JOB | 2-1-14 | AM | 7:00 |
| 27403 | .5 | | | | | START OPERATION | | AM | 9:47 |
| | | | | | | FINISH OPERATION | | AM | 10:25 |
| 19831/19800 | .5 | | | | | RELEASED | | AM | 11:00 |
| | | | | | | MILES FROM STATION TO WELL | | | 75 |

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 |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| CP106 | A-5000 line | SA | 200 | | 2,600.00 |
| CP103 | 60/40 PVC | SA | 150 | | 1,800.00 |
| CC102 | cellulose | LB | 85 | | 322.50 |
| CC109 | calcium chloride | LB | 909 | | 954.45 |
| E100 | PV mix | MT | 75 | | 318.75 |
| E101 | Heavy red mix | MT | 150 | | 1,050.00 |
| E111 | Heavy red mix | MT | 1130 | | 1,018.50 |
| CC200 | Dunn chem 0.500' | 4/oz | 1 | | 1,000.00 |
| CC240 | Heavy red mix chem | SA | 350 | | 490.00 |
| S003 | Service charge | | 1 | | 175.00 |

SUB TOTAL *16* 7,898.85

| CHEMICAL / ACID DATA: | | | |
|-----------------------|--|--|--|
| | | | |
| | | | |
| | | | |

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

| | |
|--|---|
| SERVICE REPRESENTATIVE <i>M. J. Madari</i> | THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i> (WELL OWNER OPERATOR CONTRACTOR OR AGENT) |
|--|---|

FIELD SERVICE ORDER NO.

| | | |
|--|------------------|-------------------------------|
| Customer Castelli Exploration, Inc. | Lease No. | Date 2-1-14 |
| Lease Dunn | Well # 1-25 | |
| Field Order # 9905 | Station PLATT | Casing 3 3/8 |
| | | Depth 308.03 |
| Type Job C.N.W. COAD | Formation | County Comanche |
| | | State KS |
| | | Legal Description 25-33-17 |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | |
|-----------------------|--------------|------------------|----|------------------------------|-------------|------------------|------------------|
| Casing Size 13 3/8 | Tubing Size | Shots/Ft | | Acid 200 SWS A serve | Rate 6.0 | PRESS 200 | ISIP 214 cr |
| Depth 308.23 | Depth | From | To | Pre Pad 150 SWS 60/40 POZ | Max 27.9 | 3% | 5 Min. 1/4 cr |
| Volume 48.4 | Volume | From | To | Pad | Min | | 10 Min. |
| Max Press 300 | Max Press | From | To | Frac | Avg | | 15 Min. |
| Well Connection SV | Annulus Vol. | From | To | | HHP Used | | Annulus Pressure |
| Plug Depth 288.03 | Packer Depth | From | To | Flush 45 | Gas Volume | | Total Load |

| | | |
|--------------------------------------|---------------------------------|-------------------------|
| Customer Representative Rick Popp | Station Manager Kevin Gordin | Treater Mike Matthei |
|--------------------------------------|---------------------------------|-------------------------|

| | | | | | | | | |
|---------------|---------|--------|--------|-------|--|--|--|--|
| Service Units | 37586 | 27407 | 19831 | 19867 | | | | |
| Driver Names | Matthei | Kuemin | Person | | | | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|---------|-----------------|-----------------|--------------|------|------------------------------------|
| 7:30 AM | | | | | ON LOCATION / SAFETY MEETING |
| 8:10 | | | | | Run 13 3/8 CSWS |
| 9:20 | | | | | CSWS ON BOTTOM |
| 9:35 | | | | | HOOK UP TO CSWS / BREAK CIRC W ROY |
| 9:47 | 200 | | 3 | 5 | PUMP 3 BBL H ₂ O |
| 9:49 | 200 | | 60 | 6 | MIX 200 SWS A SERVELITE |
| 10:03 | 300 | | 32 | 6 | MIX 150 SWS 60/40 POZ |
| 10:12 | 200 | | — | 5 | START DISPLACEMENT |
| 10:23 | 300 | | 45 | — | PLUG DOWN, SHUT IN WELL |
| | | | | | 20 BBL CMT TO PIT |
| | | | | | JOB COMPLETE |
| | | | | | Thank You! |
| | | | | | MIKE MATTHEI |



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ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 A

DATE _____ TICKET NO. _____

| | | | | | | | | | |
|---------------------------------|-----|-------------------------|-----|--|-----|----------------------------|---------------|-----------|--------------|
| DATE OF JOB 2-9-14 | | 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 Conoco Phillips | | LEASE Duran | | WELL NO. 1-25 | | | | | |
| ADDRESS | | COUNTY Comanche | | STATE OK | | | | | |
| CITY | | STATE | | SERVICE CREW Pratt | | | | | |
| AUTHORIZED BY | | JOB TYPE: new LS | | | | | | | |
| EQUIPMENT# | HRS | EQUIPMENT# | HRS | EQUIPMENT# | HRS | TRUCK CALLED | DATE | AM/PM | TIME |
| | | | | | | ARRIVED AT JOB | 2-9-14 | AM | 7:45 |
| | | | | | | START OPERATION | | AM | 8:45 |
| | | | | | | FINISH OPERATION | | AM | 9:45 |
| | | | | | | RELEASED | | AM | 10:30 |
| | | | | | | MILES FROM STATION TO WELL | | | 75 |

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 |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| CF 100 | AA 100 | SR | 150 | | 2,250 |
| CF 105 | 60/40 PAR | SR | 85 | | 1,275 |
| CC 101 | CONCRETE | LB | 35 | | 140 |
| CC 111 | SALT | LB | 684 | | 2,466 |
| CC 112 | CONCRETE | LB | 43 | | 1,722 |
| CC 115 | C-44 | LB | 141 | | 705 |
| CC 129 | PIA-322 | LB | 43 | | 1,722 |
| CC 201 | SUBSOIL | LB | 750 | | 3,750 |
| C 700 | CIRY MIX | SI | 6 | | 21 |
| CF 107 | 1 1/2" DIAM 1164 T 3000 | PIA | 1 | | 4,000 |
| CF 1251 | PAV 1 1/2" 5400 | PIA | 1 | | 360 |
| CF 1851 | PAV 1 1/2" | PIA | 10 | | 3,600 |
| CF 1901 | DIAMET | PIA | 2 | | 720 |

| CHEMICAL / ACID DATA: | | | |
|-----------------------|--|--|--|
| | | | |
| | | | |
| | | | |

| | | |
|---------------------|------------|--|
| SUB TOTAL | | |
| 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. _____



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718-~~---~~-A

Customer No: 1718 09910

DATE _____ TICKET NO. _____

| DATE OF JOB <u>2-9-10</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>Crystalline</u> | | LEASE <u>Dustin</u> | | WELL NO. <u>1-1</u> | | | | | |
| ADDRESS | | COUNTY <u>Cherokee</u> | | STATE <u>OK</u> | | | | | |
| CITY STATE | | SERVICE CREW | | | | | | | |
| AUTHORIZED BY | | JOB TYPE: | | | | | | | |
| 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 | | | |

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 |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| E 100 | P.W. Oil | ml | 75 | | 315 75 |
| E 101 | Heavy eq. oil | ml | 15 | | 1,050 00 |
| E 113 | Prod + water 2 hrs | hr | 800 | | 1,280 00 |
| C 206 | 2 1/2" chms 500' - 1,000' | 4hr | 1 | | 2,580 00 |
| C 240 | 12 1/2" + 12" chms | 5hr | 255 | | 329 00 |
| C 500 | Flng coil | 500 | 1 | | 250 00 |
| S 003 | S... | 100 | 1 | | 175 00 |
| CC 503 | H. 16.0 | 100 | 1 | | 300 00 |

SUB TOTAL 11,328 38

| CHEMICAL / ACID DATA: | | | |
|-----------------------|--|--|--|
| | | | |
| | | | |
| | | | |

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

| | |
|---|---|
| SERVICE REPRESENTATIVE <u>M. J. Smith</u> | THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>[Signature]</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT) |
|---|---|

FIELD SERVICE ORDER NO.

BASIC

energy services, L.P.

TREATMENT REPORT

| | | |
|---|------------------|-------------------------------|
| Customer CASTELL Exhibition Exhibition Exhibition | Lease No. | Date 2-9-14 |
| Lease Dunn | Well # 1-25 | |
| Field Order # 9110 | Station PIATR | Casing 5 1/2 |
| | | Depth 5730 |
| Type Job C/W L/S | Formation | County COMANCHE |
| | | State KS |
| | | Legal Description 25-33-17 |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | |
|-------------------------|--------------|------------------|----|-----------------------|--------------------|-------------------|------------------|
| Casing Size 5 1/2 | Tubing Size | Shots/Ft | | Acid 150 SKS AA2 | 1/4 RATE | PRESS 1000 PSI | DISP 200 GALS |
| Depth 5730 | Depth | From | To | Pre Pad .3% F14-37 | Max 5# GILSONIC | | 5 Min. |
| Volume 126.37 | Volume | From | To | Pad 85 SKS 60/40 | Min 0 POZ | | 10 Min. |
| Max Press 1500 | Max Press | From | To | Frac | Avg | | 15 Min. |
| Well Connection P.C. | Annulus Vol. | From | To | | HHP Used | | Annulus Pressure |
| Plug Depth 5691.82 | Packer Depth | From | To | Flush | Gas Volume | | Total Load |

| | | |
|--------------------------------------|----------------------------------|-----------------------|
| Customer Representative Rick Puff | Station Manager Kevin Guidley | Treater Mike Matta |
|--------------------------------------|----------------------------------|-----------------------|

| | | | |
|------------------------|--------|--------|-------|
| Service Units 37586 | 27463 | 19959 | 73768 |
| Driver Names MATTIA | KUENIA | HARSON | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|---------|-----------------|-----------------|--------------|------|---|
| 7:40 AM | | | | | ON LOCATION / SAFETY MEETING |
| 7:55 | | | | | Big crew started pulling Drill Pipe |
| 3:55 PM | | | | | Run 5 1/2 15.5# casing Bldgs on 12, 13 |
| | | | | | TRIBOS ON 1, 12, 13, 14, 15, 16, 17, 18, 19, 20 |
| 5:45 | | | | | Circulate, RO JTS casing loc |
| 6:15 | | | | | run casing |
| 6:45 | | | | | Casing on bottom |
| 7:00 | | | | | hook up to casing / Break circ w/ rig |
| 8:44 | 250 | | 8 | 5 | Run mix 35 SKS 60/40 POZ |
| 8:46 | 250 | | 36 | 5 | Mix 150 SKS AA2 |
| 8:55 | - | | 4 | 3 | WASH PUMP + LINE |
| 8:59 | - | | - | - | RELEASE PLUG |
| 9:00 | 200 | | - | 6.5 | START DISPLACEMENT |
| 9:18 | 300 | | 105 | 5.5 | LIFT PRESSURE |
| 9:22 | 500 | | 125 | 4 | SLOW RATE |
| 9:25 | 1000, 1500 | | 135 | - | Plug down, PSI TO 1500, RELEASED + HOLD |
| 9:35 | - | | 7, 5 | - | Plug FAT + mouse hole |
| | | | | | CIRCULATION THIS JOB |
| | | | | | JOB COMPLETE |
| | | | | | THANK YOU |
| | | | | | MIKE MATTA |