



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1208144  
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<br>Recompletion Date | Date Reached TD | Completion Date or<br>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: \_\_\_\_\_

1208144

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<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>List All E. Logs Run: _____ | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><br>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<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><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><br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | <b>METHOD OF COMPLETION:</b><br><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____<br><i>(Submit ACO-4)</i> | <b>PRODUCTION INTERVAL:</b><br>_____<br>_____ |
|--|---|---|

|           |                        |
|-----------|------------------------|
| Form      | ACO1 - Well Completion |
| Operator  | OXY USA Inc.           |
| Well Name | E.M. WATKINS A 1       |
| Doc ID    | 1208144                |

All Electric Logs Run

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

|           |                        |
|-----------|------------------------|
| Form      | ACO1 - Well Completion |
| Operator  | OXY USA Inc.           |
| Well Name | E.M. WATKINS A 1       |
| Doc ID    | 1208144                |

Tops

| Name         | Top  | Datum |
|--------------|------|-------|
| HEEBNER      | 4096 |       |
| TORONTO      | 4115 |       |
| LANSING      | 4178 |       |
| KANSAS CITY  | 4635 |       |
| MARMATON     | 4765 |       |
| PAWNEE       | 4867 |       |
| CHEROKEE     | 4915 |       |
| ATOKA        | 5038 |       |
| MORROW       | 5205 |       |
| ST GENEVIEVE | 5466 |       |





**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 05693 A

DATE: TICKET NO.

|               |               |            |      |              |                                     |                            |                          |      |                          |     |                          |     |                          |                     |  |
|---------------|---------------|------------|------|--------------|-------------------------------------|----------------------------|--------------------------|------|--------------------------|-----|--------------------------|-----|--------------------------|---------------------|--|
| DATE OF JOB   | 4-8-14        | 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      | Oxy USA       |            |      | LEASE        | EM Watkins A #1                     |                            |                          |      |                          |     | WELL NO.                 |     |                          |                     |  |
| ADDRESS       |               |            |      | COUNTY       | Haskell                             |                            |                          |      |                          |     | STATE                    | KS  |                          |                     |  |
| CITY          |               |            |      | STATE        |                                     |                            |                          |      |                          |     |                          |     |                          |                     |  |
| AUTHORIZED BY | J Bennett JRB |            |      | SERVICE CREW | E Mendez, D Canaday, S Chae         |                            |                          |      |                          |     |                          |     |                          |                     |  |
|               |               |            |      | JOB TYPE     | 242 8 5/8 Surface                   |                            |                          |      |                          |     |                          |     |                          |                     |  |
| EQUIPMENT#    | HRS           | EQUIPMENT# | HRS  | EQUIPMENT#   | HRS                                 | TRUCK CALLED               | 4 8-14 4:00 PM           |      |                          |     |                          |     |                          |                     |  |
| 34726         | 8             |            |      |              |                                     | ARRIVED AT JOB             | 9:00 AM                  |      |                          |     |                          |     |                          |                     |  |
| 27462         | 8             |            |      |              |                                     | START OPERATION            | 3:00 PM                  |      |                          |     |                          |     |                          |                     |  |
| 14355         | 8             |            |      |              |                                     | FINISH OPERATION           | 4:00 PM                  |      |                          |     |                          |     |                          |                     |  |
| 37725         | 8             |            |      |              |                                     | RELEASED                   | 5:00 PM                  |      |                          |     |                          |     |                          |                     |  |
| 30464         | 8             |            |      |              |                                     | MILES FROM STATION TO WELL | 30 mi                    |      |                          |     |                          |     |                          |                     |  |
| 37847         | 8             |            |      |              |                                     |                            |                          |      |                          |     |                          |     |                          |                     |  |

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 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 |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| CU101               | A-Con                                 | sk   | 335      | 13 95      | 4673 25   |
| CU110               | Premium Plus                          | sk   | 245      | 12 23      | 2996 35   |
| CU109               | Calcium Chloride                      | lb   | 1407     | 79         | 1111 53   |
| CU102               | Ceufake                               | lb   | 146      | 2 78       | 405 88    |
| CU130               | CS                                    | lb   | 63       | 18 7       | 1181 25   |
| CF253               | 8 5/8 Shoe                            | ea   | 1        |            | 285 00    |
| CF453               | Insert                                |      | 1        |            | 210 50    |
| CF4405              | Centralizer                           |      | 17       | 108 25     | 1848 75   |
| CF105               | Plug                                  |      | 1        |            | 168 75    |
| CF4109              | Stop Collar                           |      | 1        |            | 75 00     |
| CF4556              | Basket                                |      | 1        |            | 787 50    |
| E101                | Heavy Equipment Mileage               | mi   | 90       | 5 25       | 472 50    |
| CE40                | Blending Mixes Service                | sk   | 580      | 1 05       | 609 00    |
| E113                | Proprietary Bulk Delivery             | ton  | 819      | 1 20       | 982 80    |
| CE202               | Pump Depth 1001 2000                  | 4hr  | 1        |            | 1125 00   |
| CE504               | Plug Container                        | ea   | 1        |            | 187 50    |
| E100                | Unit Mileage                          | mi   | 30       | 3 19       | 95 70     |
| S003                | Service Supervisor                    | ea   | 1        |            | 131 25    |
| SUB TOTAL           |                                       |      |          |            | 17347 96  |

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

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

P -1180377  
D 020177  
E 3023  
T 0102

|                        |                    |   |                    |
|------------------------|--------------------|---|--------------------|
| SERVICE REPRESENTATIVE | <i>[Signature]</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.

# Cement Report

|                  |                   |                 |                         |                 |                                  |                    |    |
|------------------|-------------------|-----------------|-------------------------|-----------------|----------------------------------|--------------------|----|
| Customer         | Orca USA          |                 | Lease No.               | Date            |                                  | 4-8-14             |    |
| Lease            | EM Watkins A      |                 | Well #                  | Service Receipt |                                  | 05693              |    |
| Casing           | Depth             | County          | Haskell                 |                 | State                            |                    | KS |
| Job Type         | 242-85/8" Surface |                 | Legal Description       |                 | 6-29-32                          |                    |    |
| <b>Pipe Data</b> |                   |                 | <b>Perforating Data</b> |                 |                                  | <b>Cement Data</b> |    |
| Casing size      | 85/8" 24"         |                 | Shots/Ft                |                 |                                  | Lead 335 st        |    |
| Depth            | TD - 1818'        |                 | From                    | To              |                                  | A Cen              |    |
| Volume           | Disp - 113.5 bbl  |                 | From                    | To              |                                  | Tail in 245 st     |    |
| Max Press        | 1500 #            |                 | From                    | To              |                                  | Class C            |    |
| Well Connection  | TP - 1823'        |                 | Annulus Vol.            | From            | To                               |                    |    |
| Plug Depth       | ST - 42'          |                 | Packer Depth            | From            | To                               |                    |    |
| Time             | Casing Pressure   | Tubing Pressure | Bbls. Pumped            | Rate            | Service Log                      |                    |    |
| 9:00             |                   |                 |                         |                 | on loc-site assessment           |                    |    |
| 9:30             |                   |                 |                         |                 | spot trucks rig up               |                    |    |
| 10:00            |                   |                 |                         |                 | start csg + f.e.                 |                    |    |
| 2:00             |                   |                 |                         |                 | csg on bit                       |                    |    |
| 2:20             |                   |                 |                         |                 | break circ, safety meeting       |                    |    |
| 2:30             |                   |                 |                         |                 | pressure test 2000 #             |                    |    |
| 2:35             | 200               |                 | 143                     | 5               | mix & pump 335 slt ACON @ 12.1 # |                    |    |
| 2:45             | 200               |                 | 58.5                    | 5               | tail 245 st Prem. Plus @ 14.8 #  |                    |    |
| 3:00             | 0                 |                 | 0                       | 5               | drop plug, disp csg              |                    |    |
| 3:20             | 750               |                 | 100                     | 2               | slow rate                        |                    |    |
| 3:22             | 1150              |                 | 113                     | 0               | land plug, circ cut              |                    |    |
| 3:30             | 1500              |                 |                         |                 | test csg @ 1500 # - 30 min       |                    |    |
| Service Units    | 34726             | 27462           | 14355                   | 3735            | 30464                            | 3784               |    |
| Driver Names     | A Owen            | E Mudge         | S Clout                 | D Curday        |                                  |                    |    |

C. Wylie  
Customer Representative

J. Bennett  
Station Manager

A. Owen  
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 04631 A

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

| DATE OF JOB <u>4-11-14</u> DISTRICT <u>1717</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>Oxy USA</u>                         |          | LEASE <u>EM Watkins "A" #1</u> WELL NO.  |          |   |          |                            |                |    |             |
| ADDRESS   |          | COUNTY <u>Haskell</u>  |          | STATE <u>KS</u>                           |          |                            |                |    |             |
| CITY  |          | STATE  |          | SERVICE CREW <u>I Chavez, Sam, Daniel</u> |          |                            |                |    |             |
| AUTHORIZED BY <u>Sam Beath IRB</u>              |          | JOB TYPE: <u>242 MTA</u>   |          |   |          |                            |                |    |             |
| EQUIPMENT#                                      | HRS      | EQUIPMENT#   | HRS      | EQUIPMENT#                                | HRS      | TRUCK CALLED               | DATE           | AM | TIME        |
|   |          |  |          |   |          |                            | <u>4-11-14</u> |    | <u>1200</u> |
| <u>78938</u>                                    | <u>9</u> | <u>70897</u>   | <u>9</u> | <u>30463</u>                              | <u>9</u> | ARRIVED AT JOB             | <u>4-11-14</u> | AM | <u>200</u>  |
|   |          | <u>19570</u>   | <u>1</u> | <u>19566</u>                              | <u>1</u> | START OPERATION            | <u>4-11-14</u> | AM | <u>230</u>  |
|   |          |  |          |   |          | FINISH OPERATION           | <u>4-11-14</u> | AM | <u>945</u>  |
|   |          |  |          |   |          | RELEASED                   | <u>4-11-14</u> | AM | <u>1030</u> |
|   |          |  |          |   |          | MILES FROM STATION TO WELL |                |    | <u>30</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: X Martin Aeri Salinas  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

| ITEM/PRICE REF. NO. | MATERIAL, EQUIPMENT AND SERVICES USED       | UNIT        | QUANTITY    | UNIT PRICE   | \$ AMOUNT      |
|---------------------|---|-------------|-------------|--------------|----------------|
| <u>ML110</u>        | <u>Premium Plus Cement</u>                  | <u>SK</u>   | <u>235</u>  | <u>12.23</u> | <u>2874.05</u> |
| <u>CC109</u>        | <u>Calcium Chloride</u>                     | <u>lb</u>   | <u>4722</u> | <u>79</u>    | <u>349.18</u>  |
| <u>E101</u>         | <u>Heavy Equipment Mileage</u>              | <u>mi</u>   | <u>60</u>   | <u>5.25</u>  | <u>315.00</u>  |
| <u>EE240</u>        | <u>Blending &amp; Mixing Service Charge</u> | <u>SK</u>   | <u>235</u>  | <u>1.05</u>  | <u>246.75</u>  |
| <u>E113</u>         | <u>Bank Wellway Charge</u>                  | <u>FM</u>   | <u>332</u>  | <u>1.20</u>  | <u>398.40</u>  |
| <u>CE202</u>        | <u>Depth Charge</u>                         | <u>4hrs</u> | <u>1</u>    |              | <u>1125.00</u> |
| <u>E100</u>         | <u>Drilling Mileage</u>                     | <u>mi</u>   | <u>30</u>   | <u>3.19</u>  | <u>95.70</u>   |
| <u>5003</u>         | <u>Service Suspenders</u>                   | <u>EA</u>   | <u>1</u>    |              | <u>131.25</u>  |
|                     | <u>Lib. Cap.</u>                            |             |             |              |                |
|                     | <u>EM Watkins A-1</u>                       |             |             |              |                |
|                     | <u>0102</u>                                 |             | <u>3023</u> |              |                |
|                     | <u>1180377</u>                              |             |             |              |                |
|                     | <u>Martin Salinas</u>                       |             |             |              |                |
|                     | <u>Martin Aeri Salinas</u>                  |             |             |              |                |

SUB TOTAL 5532.38

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

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

SERVICE REPRESENTATIVE I Chavez

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

FIELD SERVICE ORDER NO.





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

### Cement Report

| Customer <i>Oxy USA</i>  |                   | Lease No.             |                         | Date <i>4-11-11</i>              |                                      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
|--|-------------------|-----------------------|-------------------------|----------------------------------|--------------------------------------|------|-----------------|-----------------|--------------|------|-------------|-------------|--|--|--|--|---------------------------|-------------|--|--|--|--|--------------------------------|-------------|--|-------------|----------|----------|----------------------|-------------|--|------------|----------|----------|---------------------------|-------------|--|------------|-----------|----------|----------------------------------|-------------|--|------------|-----------|----------|------------------------|-------------|--|-------------|----------|----------|--------------------------------------|-------------|--|------------|-----------|----------|---------------------------------|-------------|--|------------|----------|----------|-----------------|-------------|--|-----------|------------|----------|------------------------|-------------|--|-----------|----------|----------|--------------------------------|-------------|--|-----------|----------|----------|-----------------|--|--|--|--|--|--------------------------|-------------|--|--|--|--|---------------------|
| Lease <i>EM Watkins "A"</i>  |                   | Well # <i>1</i>       |                         | Service Receipt <i>41631</i>     |                                      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Casing <i>4 1/2 DP</i>   | Depth <i>1892</i> | County <i>Haskell</i> |                         | State <i>KS</i>                  |                                      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Job Type <i>242-RTA</i>  |                   | Formation             |                         | Legal Description <i>6-29-32</i> |                                      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <b>Pipe Data</b>   |                   |                       | <b>Perforating Data</b> |                                  | <b>Cement Data</b>                   |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Casing size <i>8 5/8</i>   |                   | Tubing Size           |                         | <b>Lead</b>                      |                                      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Depth <i>1892</i>  |                   | Depth                 |                         | From                             | To                                   |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Volume <i>21015</i>  |                   | Volume                |                         | From                             | To                                   |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Max Press <i>1000</i>  |                   | Max Press             |                         | From                             | To                                   |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Well Connection <i>4 1/2</i>   |                   | Annulus Vol.          |                         | From                             | To                                   |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Plug Depth <i>1892</i>   |                   | Packer Depth          |                         | From                             | To                                   |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <table border="1"> <thead> <tr> <th>Time</th> <th>Casing Pressure</th> <th>Tubing Pressure</th> <th>Bbls. Pumped</th> <th>Rate</th> <th>Service Log</th> </tr> </thead> <tbody> <tr> <td><i>1300</i></td> <td></td> <td></td> <td></td> <td></td> <td><i>Arrive On Location</i></td> </tr> <tr> <td><i>1400</i></td> <td></td> <td></td> <td></td> <td></td> <td><i>Safety Meeting - Rig Up</i></td> </tr> <tr> <td><i>1420</i></td> <td></td> <td><i>1200</i></td> <td><i>1</i></td> <td><i>1</i></td> <td><i>Pressure Test</i></td> </tr> <tr> <td><i>1425</i></td> <td></td> <td><i>300</i></td> <td><i>4</i></td> <td><i>4</i></td> <td><i>Pump Water Spacers</i></td> </tr> <tr> <td><i>1430</i></td> <td></td> <td><i>300</i></td> <td><i>30</i></td> <td><i>4</i></td> <td><i>Pump out @ 14.8 # @ 1892'</i></td> </tr> <tr> <td><i>1445</i></td> <td></td> <td><i>300</i></td> <td><i>20</i></td> <td><i>4</i></td> <td><i>Displace w/ Mud</i></td> </tr> <tr> <td><i>1845</i></td> <td></td> <td><i>1000</i></td> <td><i>1</i></td> <td><i>1</i></td> <td><i>Pump Water Pressure Test - OK</i></td> </tr> <tr> <td><i>1900</i></td> <td></td> <td><i>250</i></td> <td><i>12</i></td> <td><i>4</i></td> <td><i>Pump out @ 14.8 # @ 868'</i></td> </tr> <tr> <td><i>1910</i></td> <td></td> <td><i>200</i></td> <td><i>6</i></td> <td><i>2</i></td> <td><i>Displace</i></td> </tr> <tr> <td><i>2000</i></td> <td></td> <td><i>50</i></td> <td><i>9.5</i></td> <td><i>2</i></td> <td><i>Plug Mouse Hole</i></td> </tr> <tr> <td><i>2025</i></td> <td></td> <td><i>25</i></td> <td><i>5</i></td> <td><i>2</i></td> <td><i>Pump out @ 14.8 # @ 60'</i></td> </tr> <tr> <td><i>2035</i></td> <td></td> <td><i>25</i></td> <td><i>2</i></td> <td><i>1</i></td> <td><i>Displace</i></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td><i>Cement To Surface</i></td> </tr> <tr> <td><i>2200</i></td> <td></td> <td></td> <td></td> <td></td> <td><i>Job Complete</i></td> </tr> </tbody> </table> |                   |                       |                         |                                  |                                      | Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log | <i>1300</i> |  |  |  |  | <i>Arrive On Location</i> | <i>1400</i> |  |  |  |  | <i>Safety Meeting - Rig Up</i> | <i>1420</i> |  | <i>1200</i> | <i>1</i> | <i>1</i> | <i>Pressure Test</i> | <i>1425</i> |  | <i>300</i> | <i>4</i> | <i>4</i> | <i>Pump Water Spacers</i> | <i>1430</i> |  | <i>300</i> | <i>30</i> | <i>4</i> | <i>Pump out @ 14.8 # @ 1892'</i> | <i>1445</i> |  | <i>300</i> | <i>20</i> | <i>4</i> | <i>Displace w/ Mud</i> | <i>1845</i> |  | <i>1000</i> | <i>1</i> | <i>1</i> | <i>Pump Water Pressure Test - OK</i> | <i>1900</i> |  | <i>250</i> | <i>12</i> | <i>4</i> | <i>Pump out @ 14.8 # @ 868'</i> | <i>1910</i> |  | <i>200</i> | <i>6</i> | <i>2</i> | <i>Displace</i> | <i>2000</i> |  | <i>50</i> | <i>9.5</i> | <i>2</i> | <i>Plug Mouse Hole</i> | <i>2025</i> |  | <i>25</i> | <i>5</i> | <i>2</i> | <i>Pump out @ 14.8 # @ 60'</i> | <i>2035</i> |  | <i>25</i> | <i>2</i> | <i>1</i> | <i>Displace</i> |  |  |  |  |  | <i>Cement To Surface</i> | <i>2200</i> |  |  |  |  | <i>Job Complete</i> |
| Time   | Casing Pressure   | Tubing Pressure       | Bbls. Pumped            | Rate                             | Service Log                          |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>1300</i>  |                   |                       |                         |                                  | <i>Arrive On Location</i>            |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>1400</i>  |                   |                       |                         |                                  | <i>Safety Meeting - Rig Up</i>       |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>1420</i>  |                   | <i>1200</i>           | <i>1</i>                | <i>1</i>                         | <i>Pressure Test</i>                 |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>1425</i>  |                   | <i>300</i>            | <i>4</i>                | <i>4</i>                         | <i>Pump Water Spacers</i>            |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>1430</i>  |                   | <i>300</i>            | <i>30</i>               | <i>4</i>                         | <i>Pump out @ 14.8 # @ 1892'</i>     |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>1445</i>  |                   | <i>300</i>            | <i>20</i>               | <i>4</i>                         | <i>Displace w/ Mud</i>               |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>1845</i>  |                   | <i>1000</i>           | <i>1</i>                | <i>1</i>                         | <i>Pump Water Pressure Test - OK</i> |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>1900</i>  |                   | <i>250</i>            | <i>12</i>               | <i>4</i>                         | <i>Pump out @ 14.8 # @ 868'</i>      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>1910</i>  |                   | <i>200</i>            | <i>6</i>                | <i>2</i>                         | <i>Displace</i>                      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>2000</i>  |                   | <i>50</i>             | <i>9.5</i>              | <i>2</i>                         | <i>Plug Mouse Hole</i>               |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>2025</i>  |                   | <i>25</i>             | <i>5</i>                | <i>2</i>                         | <i>Pump out @ 14.8 # @ 60'</i>       |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>2035</i>  |                   | <i>25</i>             | <i>2</i>                | <i>1</i>                         | <i>Displace</i>                      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
|  |                   |                       |                         |                                  | <i>Cement To Surface</i>             |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| <i>2200</i>  |                   |                       |                         |                                  | <i>Job Complete</i>                  |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Service Units <i>78938</i>   |                   | <i>70897-1950</i>     |                         | <i>30165-19500</i>               |                                      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |
| Driver Names <i>Izzy</i>   |                   | <i>Sam</i>            |                         | <i>Daniel</i>                    |                                      |      |                 |                 |              |      |             |             |  |  |  |  |                           |             |  |  |  |  |                                |             |  |             |          |          |                      |             |  |            |          |          |                           |             |  |            |           |          |                                  |             |  |            |           |          |                        |             |  |             |          |          |                                      |             |  |            |           |          |                                 |             |  |            |          |          |                 |             |  |           |            |          |                        |             |  |           |          |          |                                |             |  |           |          |          |                 |  |  |  |  |  |                          |             |  |  |  |  |                     |

*Cal*

Customer Representative

*Sony Bennett*

Station Manager

*Izzy Chavez*

Cementer