Confidentiality Requested: Yes No

## KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1210872

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:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
GG GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	Multiple Stage Cementing Collar Used?
Cathodic Other (Core, Expl., etc.):	
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR     Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
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	1210872
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	
INCTRUCTIONS: Chave important tang of formations panetrated	Datail all carea Bapart all fir	and control of drill atoms toots giving interval tootod, time tool

**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 (Attach Additional Sheets)		Yes No		-	on (Top), Depth ar		Sample	
Samples Sent to Geolog	gical Survey	Yes No	Nam	e		Тор	Datum	
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No						
List All E. Logs Run:								
		CASING Report all strings set-o	RECORD Ne		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:	Depth	Trace of Ocean ant	III On also I land		Turne and D			

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing				
Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

No	(If No, skip questions 2 and 3)
No	(If No, skip question 3)

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					A	Depth		
TUBING RECORD:	Siz	ze:	Set At:		Packer	At:	Liner Ru		No	
Date of First, Resumed	I Product	ion, SWD or ENHR	l.	Producing N	lethod:	oing	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bbl	S.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
	_	_		Onen Hole				Commingled	PRODUCTION INT	ERVAL:
	Vented Sold Used on Lease Open Hole Perf. Unully C (If vented, Submit ACO-18.) Other (Specify)				ACO-5)	(Submit ACO-4)				

Form	ACO1 - Well Completion
Operator	Messenger Petroleum, Inc.
Well Name	Anna 1
Doc ID	1210872

# Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
surface	12.25	8.625	24	336		225	
production	7.875	5.5	15.50	4551	AA-2		"MPI Blend"



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

# FIELD SERVICE TICKET 1718 10094 A

the second second				DATE TICKET NO						
JOB 03-06-14 DISTRICT PRATT					WELL OLD PROD INJ WDW CUSTOMER WELL WELL					
CUSTOMER DIESSENGER Pot					LEASE ANNA / WELL NO.					
ADDRESS					COUNTY KINDMAN STATE KS					
CITY STATE					SERVICE CREW Salling, Shaves Kaisen					
AUTHORIZED BY					JOB TYPE: CNW Str Lowiston					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQL	IIPMENT#	HRS	TRUCK CALLED			
19/10-19/10	45	1/2					ARRIVED AT JOB			
37900	7.7						START OPERATION			
				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			FINISH OPERATION			
							RELEASED PM 12:30			
	Network				and the second		MILES FROM STATION TO WELL 30			

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 SERVICE	S USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
00 100	AA-7 CMT	and the second second	sk	100		
CP 103	60/40 102 cart		sk	25		
CC 102	Cell FAK C		16	25		
cc 111	SALT		16	457		
Cella	CFR		16	29		
CC 115	C-444		16	21	Carlo Maria	
cci29	744- 522		16	47.		
80201	adsoute		16	498		
CF LOT	LATCH down Pluga PAPPING 547	, the second of the	51	1		
CF 1251	Auto Jell Horas thee		51	1		
CF 1651	Turbolin		54	5		
C 704	CLAY MAX	9	AL	E.		
CC 151	mun -Aluch		AL	500		
al an			Contract			
		(Storage )	Sec. 1			
	- And - Contract - Con					
			1.19			1. S. A. S.
			a de servicio			
СНЕ	EMICAL / ACID DATA:				SUB TOTAL	
		SERVICE & EQUIPME		0/ TAN	( ON \$	
		MATERIALS			(ON \$	
					TOTAL	
				11	ANK	
				1	fins	
SERVICE REPRESENTATIV		ATERIAL AND SERVIC		ба // ) ВҮ:	alley,	2
FIELD SERVICE	DRDER NO.	(W	ELL OV	VNER OPERAT	OR CONTRACTOR OR	AGENT)



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

#### FIELD SERVICE TICKET

1718 10005 A

				DATE TICKET NO. 10094							
DATE OF JOB 03-06	14 DI	STRICT PRATT		NEW OLD PROD INJ WDW CUSTOMER WELL WELL PROD INJ WDW							
CUSTOMER Mes	sewge	R Pt		LEASE ANNA / WELL NO.							
ADDRESS				COUNTY KINI MAIN STATE KS							
CITY		STATE .		SERVICE CREWS allow GARDER KEISCA							
AUTHORIZED BY				JOB TYPE: COW St. Low St. P.							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CALLED DATE AM TIME				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			al statistic	Maria and Samuel		ARRIVED AT JOB				
							START OPERATION AM				
				<u>an an a</u>			FINISH OPERATION				
							RELEASED PM				
				(P88)		CONTRACT.	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	
\$ 100	Pickup m		mi	30	8-00 - 10 - 10 - 10 - 10 - 10 - 10 - 10		
\$ 101	GROW Scient		n	60		State State	
E 113	Butte Deland		Tin	239			a rest
CE 205	Depth Hour Sides		64	1	Part Manager P.		
CE 240	Plander - my 4 4		sk	175			
CE 501	CAR, Same Andal		SA	1	and the state	an star	
PE 504	Phillowtones		51	1			
5003	Steven Judmin		54	1			i line e
				and the second			
						and the state	
		and a second					1421
$\sim 10^{-10}$ $\sim 10^{-10}$							
			in the second				142.0
					SUB TOTAL		
CHE	EMICAL / ACID DATA:	-				9.241	45
	· · · · · · · · · · · · · · · · · · ·	SERVICE & EQUI	PMENT		ON \$		
		MATERIALS		%TAX	ON \$		
				1.	hack TOTAL		
				I de maria			
SERVICE REPRESENTATIV	E Robert Lilles	THE ABOVE MATERIAL AND SER ORDERED BY CUSTOMER AND F		бву: УЛ	lace	. Material Marine Country	
FIELD SERVICE	1111		(WELL O	WNER OPERATO	OR CONTRACTOR OR	AGENT)	

# BASIC energy services, L.R.

# TREATMENT REPORT

Customer					Lease No.						Date								
Lease	N	Well # /					1,	•	1 14										
Field Order #		Casing				Depth	h County					State							
Type Job		Formation					Legal Description												
PIPE	TING	NG DATA FLUID USED					TREATMENT RESUME												
Casing Size	Tubing Size	e Shots/Ft			Acid			RA			RATE	TE PRESS ISIP							
Depth	Depth	From		То	То		Pre Pad			Мах				5 Min.					
Volume	Volume	From				Pad	Pad			Min			10 Min.						
Max Press	Max Press	From				Frac	rac			Avg			15 Min.						
Well Connection	n Annulus Vol	l. From	- <b>i i</b>			ō		HHP Use		ed			Annulus Pressure						
Plug Depth	Packer Dep	th From		То	Flush				Gas Volume				Total Load						
Customer Repr	esentative				Station Manager					1	Tre	ater	here is a	,					
Service Units	112	and the second sec	- N.,	7	111		$^{1}$ $\mathcal{C}$ $\mathcal{A}$												
Driver Names	11/28	() x. e	10		- Ëx	17	7				_								
Time	Casing Pressure	Tubing Pressure	Bbls	s. Pum	Pumped Rate			Service Log											
1.1									al.										
								P	M	4 1	1 - Carlo and a construction of the constructi								
102 1								and the second s											
<u></u>								Hick of Care											
111	Jacob I.							14 320 1											
				11					A the plant of the second s										
						4.1			and the hold of the second										
· ·				14	(														
<u>}</u>								<u> </u>	/	<u> </u>	<u> </u>	,		;	/				
<del>/</del> +							/	<u>11</u>	(	<u>95 -</u>									
_/				<u></u> .			/												
/							s.[-	<u>/ + 14</u> - 7 +	; [	·									
	500 			,			<i>Y</i> '	<u>. 155</u> 74	$w_{ij} f^{ij}$	<u>/</u>									
1140 1	f de la composition de la comp																		
·				2				<u>111</u> 111		<u>7 - 7</u>	1								
				7				111	مر		· · ·	200	1.5		<u>.</u>				
<u> </u>										<u></u>	1 1		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	eneral and a second					
10044					0612	Dro	H KC C	710/	1 061	2 . /60	0) 67	0 100			672-5383				

Taylor Printing, Inc. 620-672-3656