



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1215627
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
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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: _____

1215627

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> _____	PRODUCTION INTERVAL: _____ _____
--	--	---

Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Blevins A SWD 1
Doc ID	1215627

All Electric Logs Run

Geologist Log
Compensated Neutron PEL Density Micro Log
Composite Log
Phased Induction Shallow Focus Log
Sonic Cement Bond Log
Borehole Volume Caliper Log

Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Blevins A SWD 1
Doc ID	1215627

Tops

Name	Top	Datum
Kansas City	4372	-2960
Swope	4538	-3126
Mississippian	4810	-3398
Kinderhook SH	5054	-3642
Chattanooga SH	5134	-3722
Misener SD	5156	-3744
Maquoketa Dol	5168	-3756
Viola	5224	-3812
Base of Viola	5318	-3906
Lower Simpson SD	5471	-4059
Arbuckle	5522	-4110
Total Depth	6283	



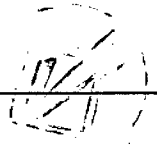
PAGE	CUST NO	INVOICE DATE
1 of 1	1000719	06/19/2014
INVOICE NUMBER		
1718 - 91520030		

Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

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

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
40734633	19843		Net - 30 days	07/19/2014	
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 06/18/2014 to 06/18/2014					
0040734633					
171810755A Cement-New Well Casing/Pi 06/18/2014					
Cement 8 5/8 Surface					
<div style="text-align: center; border: 1px solid black; padding: 5px; transform: rotate(-15deg);"> RECEIVED JUL 08 2014 9121 BC </div>					
A-Con Blend Common		200.00	EA	11.70	2,340.00 T
Common Cement		200.00	EA	10.40	2,080.00 T
Celloflake		100.00	EA	2.41	240.50 T
Calcium Chloride		940.00	EA	0.68	641.55 T
"Top Rubber Cmt Plug, 8 5/8""		1.00	EA	146.25	146.25
Centralizer 8 5/8 x 12 1/4		3.00	EA	94.25	282.75
Flapper Type Insrt Float Valve 8 5/8"(BI		1.00	EA	182.00	182.00
"Unit Mileage Chg (PU, cars one way)"		50.00	MI	2.76	138.13
Heavy Equipment Mileage		100.00	MI	4.55	455.00
"Proppant & Bulk Del. Chgs., per ton mil		940.00	EA	1.43	1,344.20
Depth Charge; 501'-1000'		1.00	EA	780.00	780.00
Blending & Mixing Service Charge		400.00	BAG	0.91	364.00
"Service Supervisor, first 8 hrs on loc.		1.00	EA	113.75	113.75
Plug Container Util. Chg.		1.00	EA	162.50	162.50

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	9,270.63
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	379.10
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	9,649.73
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		





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 10755 A

DATE _____ TICKET NO. _____

DATE OF JOB 6-18-14 DISTRICT _____		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 Chieftain Oil		LEASE Blevins ASWD		WELL NO. 1					
ADDRESS _____		COUNTY Barber		STATE KS					
CITY _____ STATE _____		SERVICE CREW JOE, ED, ARROW							
AUTHORIZED BY _____		JOB TYPE: CNW Surface							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
19889-19843	50 min						6-17-14	PM	1000
19959-73768	50 min					ARRIVED AT JOB	6-18-14	AM	0030
28443						START OPERATION		AM	510
						FINISH OPERATION		AM	600
						RELEASED		AM	700
						MILES FROM STATION TO WELL			50

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

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

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 101	A-CON	SK	200		3600 00
CP 100C	Common cement	SK	200		3200 00
CL 102	Celloflake	lb	100		370 00
CL 109	Calcium Chloride	lb	940		987 00
CF 105	TOP Rubber Plug 8 5/8	EG	1		225 00
CF 1453	Flapper Insert 8 5/8	EG	1		280 00
CF 1773	Centriflizer 8 5/8	EG	3		435 00
E 100	Pickup mileage	mi	50		212 50
E 101	Heavy mileage	mi	100		700 00
E 113	Bulk Delivery	TM	940		2,068 00
CE 201	Depth Charge	4hr	1		1,200 00
CE 240	Mixing Charge	SK	400		560 00
CE 504	Plug Container	TOB	1		250 00
S 003	SUPERVISOR	EG	1		175 00

CHEMICAL / ACID DATA:			

SUB TOTAL		102	9270.63
SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL			

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

Customer Chieftain Oil	Lease No.	Date 6-18-14
Lease Bolevins A SWD	Well # 1	
Field Order # 10755	Station Pratt	Casing 8 5/8
		Depth
Type Job CNW SURFACE	Formation	County Barber
		State KS
		Legal Description 25-34-11

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

Customer Representative Jim	Station Manager Kevin	Treater JOE
------------------------------------	------------------------------	--------------------

Service Units	19889	19847	19959	73768	28443				
Driver Names	ED	Aaron			JOE				

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
0030					ON LOC / safety meeting
					Run 24 JTS OF 8 5/8 CSG 24 #
					cen. on JTS 1-12-23
0330					START Running CSG
445					CSG ON BOTTOM / Break Circ with Pig
510					Hook TO Pump TO START JOB
510	100		5	5	H2O SPACE
			87	5	MIX 200 SK A-CON @ 12 #
			42	5	MIX 200 SK COMMON @ 15.6 #
			0	0	SHUT DOWN Release Plug
	100		0	4	START H2O DISP.
			52	4	12 BBL cement TO PIT
600	800		62	0	Plug Down
					CIRC 12 BBL TO PIT
					JOB COMPLETE
					Thank you
					JOE



PAGE	CUST NO	INVOICE DATE
1 of 1	1000719	06/18/2014
INVOICE NUMBER		
1718 - 91519355		

Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

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

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40734416	20920		Net - 30 days	07/18/2014

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 06/17/2014 to 06/17/2014				
0040734416				
171810671A Cement-New Well Casing/Pi 06/17/2014				
Cement 13 3/8 Conductor				
60/40 POZ	350.00	EA	7.80	2,729.68
Celloflake	88.00	EA	2.40	211.62
Calcium Chloride	903.00	EA	0.68	616.23
"Unit Mileage Chg (PU, cars one way)"	50.00	MI	2.76	138.11
Heavy Equipment Mileage	100.00	MI	4.55	454.95
"Proppant & Bulk Del. Chgs., per ton mil	753.00	EA	1.43	1,076.67
Depth Charge; 0-500'	1.00	EA	649.93	649.93
Blending & Mixing Service Charge	350.00	BAG	0.91	318.46
"Service Supervisor, first 8 hrs on loc.	1.00	EA	113.74	113.74

JUL 09 2014
 9121 BC

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	6,309.39
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	254.36
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	6,563.75
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		





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 <u>17 July 2014</u> DISTRICT <u>Pratt, KS</u>		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:	
CUSTOMER <u>Chiefton Oil Co., Inc</u>		LEASE <u>Blevins # SWD</u> WELL NO. <u>1</u>	
ADDRESS		COUNTY <u>Barber</u> STATE <u>KS</u>	
CITY STATE		SERVICE CREW <u>Dgr. J., P. E., D. S. L.</u>	
AUTHORIZED BY		JOB TYPE: <u>CNW/ CONDUCTOR</u>	

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
<u>27283</u>	<u>1/4</u>						<u>1.16</u>	<u>AM</u>	<u>10:30</u>
<u>53708</u>	<u>3/4</u>						<u>1.17</u>	<u>AM</u>	<u>1:50</u>
<u>30530</u>	<u>3/4</u>						<u>6.17</u>	<u>AM</u>	<u>3:00</u>
<u>30959</u>	<u>3/4</u>						<u>6.17</u>	<u>AM</u>	<u>3:00</u>
<u>19918</u>	<u>1/4</u>						<u>1.17</u>	<u>AM</u>	<u>4:30</u>
						MILES FROM STATION TO WELL	<u>54</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: [Signature]
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<u>CP103</u>	<u>60/40 P02</u>	<u>SK</u>	<u>350</u>		<u>4,200.00</u>
<u>CP102</u>	<u>Cellulose</u>	<u>Lb</u>	<u>88</u>		<u>3.75</u>
<u>CC109</u>	<u>Calcium Chloride</u>	<u>Lb</u>	<u>903</u>		<u>9.48</u>
<u>E100</u>	<u>Unit + Mixture Chassis - P. Group</u>	<u>mi</u>	<u>50</u>		<u>2.10</u>
<u>E101</u>	<u>Heavy Equipment + Mixture</u>	<u>mi</u>	<u>100</u>		<u>7.00</u>
<u>E113</u>	<u>Basic Delivery</u>	<u>mi</u>	<u>153</u>		<u>1,155.00</u>
<u>CE100</u>	<u>Depth Chassis; 0-500'</u>	<u>Yr</u>	<u>1</u>		<u>1,000.00</u>
<u>CE110</u>	<u>Blending & Mixing Service Chassis</u>	<u>SK</u>	<u>350</u>		<u>4.50</u>
<u>3003</u>	<u>Service Supervisor, first 8 hrs on rd</u>	<u>1 S</u>	<u>1</u>		<u>17.00</u>

CHEMICAL / ACID DATA:			

SUB TOTAL		<u>1,309.35</u>
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. _____

Customer: <i>Chelton Oil Co.</i>	Lease No.	Date: <i>6-17-2014</i>
Lease: <i>Blevins A SWD</i>	Well #: <i>1</i>	
Field Order #: <i>10671</i>	Station: <i>Postville, KS</i>	Casing: <i>13 3/8</i>
		Depth: <i>301</i>
		County: <i>Barber</i>
		State: <i>KS</i>
Type Job: <i>CNW-CONDUCTOR</i>	Formation: <i>TD 315</i>	Legal Description: <i>25-34-11</i>

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size: <i>13 3/8</i>	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
Depth: <i>301</i>	Depth	From	To	Pre Pad	Max		5 Min.
Volume: <i>45</i>	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth: <i>281</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative: <i>Jim</i>	Station Manager: <i>Kevin Goreley</i>	Treater: <i>Darin Franklin</i>
-------------------------------------	---------------------------------------	--------------------------------

Service Units	<i>27283</i>	<i>33708</i>	<i>20920</i>	<i>70959</i>	<i>19918</i>				
Driver Names	<i>Darin</i>	<i>PS+E</i>	<i>PS+E</i>	<i>DSIE</i>	<i>DSIE</i>				

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>12:30 PM</i>					<i>On location / SSPeq meeting</i>
<i>3:00</i>	<i>200</i>		<i>3</i>	<i>5</i>	<i>Pump 3 bbls water shed</i>
	<i>200</i>		<i>75</i>	<i>5</i>	<i>mix 350 sy 60/40 P02</i>
	<i>200</i>		<i>414</i>	<i>5</i>	<i>Displace 414 bbls</i>
<i>3:45</i>					<i>Shut in</i>
					<i>Cement die circuit 10 bbls</i>
					<i>Job complete / Darin & Crew</i>
					<i>Thank you!!!</i>



PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1000719	1718	07/08/2014
INVOICE NUMBER			
91535693			

Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

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

JOB #	EQUIPMENT #	PURCHASE ORDER NO.		TERMS	DUE DATE
40741175	30920			Net - 30 days	08/07/2014
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 07/03/2014 to 07/03/2014					
0040741175					
171810894A Cement-New Well Casing/Pi 07/03/2014					
Cement 5 1/2" Longstring					
AA2 Cement		325.00	EA	11.22	3,646.50 T
C-41P		62.00	EA	2.64	163.68 T
Salt		1,612.00	EA	0.33	531.96 T
C-44		306.00	EA	3.40	1,040.09 T
FLA-322		245.00	EA	4.95	1,212.75 T
Mud Flush		500.00	EA	0.99	495.00 T
Gilsonite		1,625.00	EA	0.44	718.58 T
"Latch Down Plug & Baffle, 5 1/2"" (Blu		1.00	EA	264.00	264.00
"Cmt. Shoe Packer Type, 5 1/2"" (Red)"		1.00	EA	2,442.00	2,442.00
"Turbolizer, 5 1/2"" (Blue)"		7.00	EA	72.60	508.20
"5 1/2"" Basket (Blue)"		2.00	EA	191.40	382.80
"Unit Mileage Chg (PU, cars one way)"		50.00	MI	2.81	140.25
Heavy Equipment Mileage		100.00	MI	4.62	462.00
"Proppant & Bulk Del. Chgs., per ton mil		765.00	EA	1.45	1,110.78
Depth Charge; 5001-6000'		1.00	EA	1,900.80	1,900.80
Blending & Mixing Service Charge		325.00	BAG	0.92	300.30
Plug Container Util. Chg.		1.00	EA	165.00	165.00
"Service Supervisor, first 8 hrs on loc.		1.00	EA	115.50	115.50

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	15,600.19
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	558.31
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	16,158.50
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



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 <u>07-03-14</u> DISTRICT <u>P. 27 MS</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>Whitaker Oil</u>		LEASE <u>854125 J. SWD</u>		WELL NO. <u>1</u>						
ADDRESS		COUNTY <u>Baker</u>		STATE <u>MS</u>						
CITY		STATE		SERVICE CREW <u>Scott ...</u>						
AUTHORIZED BY		JOB TYPE: <u>Prod</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>3729-201</u>	<u>1</u>									
<u>37-73718</u>	<u>1</u>									
<u>37200</u>										
						ARRIVED AT JOB				
						START OPERATION				<u>1:00</u>
						FINISH OPERATION				<u>2:00</u>
						RELEASED				<u>2:45</u>
						MILES FROM STATION TO WELL				<u>50</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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<u>105</u>	<u>100 2 cont</u>	<u>50</u>	<u>50</u>		<u>850</u>
<u>105</u>	<u>100 cont</u>	<u>775</u>	<u>775</u>		<u>2,925</u>
<u>105</u>	<u>100</u>	<u>50</u>	<u>50</u>		<u>950</u>
<u>105</u>	<u>C-41</u>	<u>16</u>	<u>7.2</u>		<u>273</u>
<u>111</u>	<u>SALT</u>	<u>16</u>	<u>16.2</u>		<u>868</u>
<u>112</u>	<u>C-41</u>	<u>16</u>	<u>306</u>		<u>1,572</u>
<u>112</u>	<u>3/4" 32</u>	<u>16</u>	<u>245</u>		<u>1,437</u>
<u>112</u>	<u>1/2" 32</u>	<u>16</u>	<u>16.75</u>		<u>1,078</u>
<u>607</u>	<u>1/2" 32</u>	<u>50</u>	<u>1</u>		<u>400</u>
<u>1001</u>	<u>Cou. Breaker Shim</u>	<u>50</u>	<u>1</u>		<u>700</u>
<u>1001</u>	<u>Truck Shim</u>	<u>50</u>	<u>7</u>		<u>770</u>
<u>1001</u>	<u>Truck Shim</u>	<u>2</u>	<u>2</u>		<u>380</u>
<u>1001</u>	<u>Truck Shim</u>	<u>100</u>	<u>500</u>		<u>750</u>
<u>100</u>	<u>100</u>	<u>100</u>	<u>50</u>		<u>912</u>
<u>101</u>	<u>100</u>	<u>100</u>	<u>100</u>		<u>700</u>
<u>112</u>	<u>100</u>	<u>200</u>	<u>765</u>		<u>1,192</u>
<u>112</u>	<u>100</u>	<u>50</u>	<u>1</u>		<u>200</u>
<u>112</u>	<u>100</u>	<u>16</u>	<u>305</u>		<u>488</u>
<u>112</u>	<u>100</u>	<u>1</u>	<u>1</u>		<u>250</u>
SUB TOTAL					<u>1770</u>

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		<u>19,600</u>

SERVICE REPRESENTATIVE <u>[Signature]</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.	

Customer <i>CHIEFTAIN OIL</i>	Lease No.	Date <i>07-03-14</i>	
Lease <i>BLEVING A SWD</i>	Well # <i>1</i>		
Field Order # <i>10894</i>	Station <i>PRATT</i>	Casing # <i>52</i>	Depth <i>7512'</i>
Type Job <i>CNW 5 1/2 LONGSTUD</i>	Formation	County <i>BARBER</i>	State <i>KS</i>
		Legal Description <i>25-34-11</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>5 1/2</i>								
Depth	Depth	From	To	Pre Pad	Max		5 Min.	
<i>5412</i>								
Volume	Volume	From	To	Pad	Min		10 Min.	
<i>128</i>								
Max Press	Max Press	From	To	Frac	Avg		15 Min.	
<i>2,000</i>								
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
<i>P.O.</i>								
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load	
<i>5510'</i>								

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Sullivan</i>
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Service Units	<i>37900</i>	<i>33708</i>	<i>27920</i>	<i>19959</i>	<i>73768</i>				
Driver Names	<i>Sullivan</i>	<i>Scott</i>		<i>Gibson</i>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
					<i>on loc</i>
					<i>RUN 128 STS 5 1/2 15.5 CSP.</i>
					<i>PACKER SHOE, BASKET 4, 12, COT 5, 8, 10, 13, 15, 17, 18</i>
<i>11:30</i>					<i>CASING ON BOTTOM</i>
<i>11:40</i>					<i>Break in w/ Dig</i>
<i>11:45</i>					<i>shut down DROP BALL</i>
<i>12:05</i>	<i>1,200</i>				<i>at packer shoe Resume circ.</i>
<i>1:00</i>			<i>12</i>	<i>3.5</i>	<i>at mud hole</i>
			<i>5</i>		<i>SPACER H²⁰</i>
			<i>24</i>	<i>5</i>	<i>Mix 50sk Scavenger @ 12 PPG.</i>
			<i>57</i>		<i>Mix 225sk AD-2 @ 15 PPG.</i>
					<i>cont mix & shut down wash line, pump.</i>
					<i>Release Plug</i>
				<i>6</i>	<i>at Dis.</i>
	<i>350</i>				<i>lit + Ps.</i>
	<i>950</i>			<i>4</i>	<i>Slow Rate</i>
<i>2:00</i>	<i>2,000</i>		<i>128</i>		<i>Plug down</i>
			<i>7-5</i>		<i>Plug R/W 30sk N/W 20sk</i>
					<i>JOB COMPLETE</i>

THANK YOU