



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1223009
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: _____

1223009

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
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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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. _____	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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: _____ _____
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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 11022 A

16-5s-32w

DATE _____ TICKET NO. _____

DATE OF JOB: 8-1-2014	DISTRICT: Pratt, ks	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: LD Drilling, Inc.		LEASE: Decker		WELL NO.: 1-16					
ADDRESS:		COUNTY: Rgwilings		STATE: 1-16					
CITY:		STATE:		SERVICE CREW: Dgrin, Dst E., Asron					
AUTHORIZED BY:		JOB TYPE: CNW 4 1/2 Longstring							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
27283	1						7-31	PM	4:00
33708	1						7-31	AM	11:00
20920	1						8-1	AM	2:00
19960	1						8-1	AM	3:00
21010	1						8-1	AM	4:00
						MILES FROM STATION TO WELL	240		

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: *Michael A. Berry*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP100C	Common Cement	SK	200		3,200 00
CP100C	Common Cement	SK	30		480 00
CC111	S91+	Lb	929		464 50
CC130	C-51	Lb	44		1,106 00
CC201	Gilsonite	Lb	1155		773 85
CF606	Latch Down Plug & Baffle, 4 1/2" (Blue)	Eq	1		370 00
CF1250	Auto Fill Float Shoe 4 1/2" (Blue)	Eq	1		330 00
CF1650	Turbolizer, 4 1/2" (Blue)	Eq	6		510 00
CF1900	4 1/2" Basket (Blue)	Eq	1		270 00
C704	Clymer KCL Substitute	Gal	4		140 00
CC151	Mud Flush	Gal	1,000		1,500 00
E100	Unit Mileage Charge - Pickup	mi	190		807 50
E101	Heavy Equipment Mileage	mi	380		2,660 00
E113	Bulk Delivery	Tol/m	2062		4,535 30
GE205	Depn Charge, 4001' - 5000'	4hrs	1		2,520 00
GE240	Blending & Mixing Service Charge	SK	230		322 00
GE504	Plug Container Utilization Charge	Job	1		250 00
S003	Service Supervisor, first & his onloc.	Eq	1		175 00
SUB TOTAL					15,510

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE: *Kevin Klenke*
THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *Michael A. Berry*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____

Customer LD Drilling Inc.	Lease No.	Date 8-1-2014	
Lease Decker	Well # 1-16		
Field Order # 11022	Station Prstt, 1cs	Casing 4 1/2	Depth 4527
Type Job CNU / 4 1/2 Long string	Formation TD-4540	County Rewlings	State KS
		Legal Description 16-5s-32w	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
4 1/2				Pre Pad	Max		5 Min.
Depth 4527	Depth	From	To	Pad	Min		10 Min.
Volume 71 bbls	Volume	From	To	Frac	Avg		15 Min.
Max Press	Max Press	From	To		HHP Used		Annulus Pressure
Well Connection	Annulus Vol.	From	To	Flush	Gas Volume		Total Load
Plug Depth 4514	Packer Depth	From	To				

Customer Representative	Station Manager Kevin Gordley	Treater Darin Frnich
Service Units	27283 33708 20920 19960 21010	
Driver Names	Darin Prst E Prst E Darin Darin	

7-31 Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
11:00pm					on location / safety meeting
					Run 113 Jts 4 1/2 casing, set at 4527'
					200sf commencement 1090 sst, .2% wcb-1
					51b 1st Gilsonite
8-1-2014					
2:00pm	100		24	3 1/2	pump 24 bbls mud flush
	100		5	3 1/2	5 bbls water
	200		44	5	mud 200sf cement
					wash pump & lines
					Release plug
	100		0	5	stgr displacement
	300		50	5	lift pressure
	200		60	2 1/2	slow rate
	1,000		70	2 1/2	dump plug
					Flush
					plug rest hole
					wash up
3:00					Job complete / Darin & crew
					Thank You!!!

TD 4538

L. D. DRILLING, INC.

7 SW 26th Avenue
GREAT BEND, KS 67530

Customer LD Drilling INC Order _____

Lease DECKER 1-16 Date _____

Description of Pipe 4 1/2 NEW

Amount Set @ 4527.73 PBTD = 4514.32

Jts.	Ft.	Ins.	Ft.	Ins.	Ft.	Ins.	Ft.	Ins.	Ft.	Ins.
1	42	82	42	82	42	84	42	82		
2	38	10	42	83	42	86	42	86		
3	42	54	42	83	42	84	41	60		
4	42	85	42	81	42	86	42	84		
5	42	80	38	63	42	84	39	05		
6	41	24	42	86	42	83	39	24		
7	42	30	42	86	39	18	42	84		
8	42	82	42	86	42	85	39	25		
9	42	26	42	86	39	11	42	83		
10	42	50	38	57	42	85	41	66		
11	42	80	38	52	42	46	39	22		
12	42	18	42	86	39	06	42	83		
13	42	49	42	87	42	46	42	84		
14	42	81	42	84	40	81	42	85		
15	38	68	38	58	42	85	39	16	out	
16	42	82	42	85	39	15	42	86		
17	42	81	42	85	42	85	42	63		
18	42	22	42	83	42	83	38	52	out	
19	39	43	39	34	39	35	42	87		
20	42	81	42	85	41	82	42	83		
21	41	80	38	67	42	83	42	83	out	
22	40	55	38	55	42	82				
23	42	85	42	84	39	29	13	38	Shoe JT	
24	38	68	38	63	42	53	6	58	Landing JT	
25	42	84	39	08	42	84				
26	42	85	42	83	38	61			4648	23
27	42	74	42	84	42	86			- 42	83
28	39	56	42	86	42	84			4605	40
29	42	85	42	83	42	31			- 38	52
30	42	84	39	05	41	50			4566	88
Total	1256	84	1243	90	1253	13	894	39	4527	72

TOTAL PIECES 113 LENGTH _____ FEET 4648 INCHES 23

RECEIVED BY _____ TALLIED BY _____



BASIC ENERGY SERVICES

PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1717 04747 A

DATE _____ TICKET NO. _____

DATE OF JOB: 8/7/14	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: LD Drilling, INC.		LEASE: Decker 1-16				WELL NO.:				
ADDRESS:		COUNTY: Rawlins				STATE: KS				
CITY:		SERVICE CREW: Tommy, Santiago								
AUTHORIZED BY: Tuce		JOB TYPE: ZUCS								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
174939	5									4:20
361719919	5									9:00
143553725	5									10:00
										2:00
										2:30
						MILES FROM STATION TO WELL	190			

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

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

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL100	Premium/Common	SK	150		2400 00
P700	20-40 mesh sand	Cwt	2		62 00
E100	Pickup Mileage	Mi	190		807 50
E101	Heavy Equip Mileage	Mi	360		2660 00
E113	Bulk Delivery Charge	Tm	1331.5		2946 90
CE205	Depth Charge 4001-5000'	Yar	1		2520 00
CE240	Blending/Mixing Charge	SK	150		210 00
CE500	Cement Service Manifold	EA	-1		430 00
5003	Service Supervisor	EA	1		175 00
SUB TOTAL					8953.86

CHEMICAL / ACID DATA:			

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)

FIELD SERVICE ORDER NO.



BASIC
ENERGY SERVICES
Liberal, Kansas

Cement Report

Customer <u>LD Drilling, TNC</u>	Lease No.	Date <u>8/7/14</u>
Lease <u>Decker</u>	Well # <u>1-16</u>	Service Receipt
Casing <u>4 1/2</u>	Depth	County <u>Rowling</u> State <u>KS</u>
Job Type <u>SQ</u>	Formation	Legal Description <u>16-5-32</u>

Pipe Data		Perforating Data		Cement Data
Casing size <u>4 1/2</u>	Tubing Size <u>2 3/4</u>	Shots/Ft		Lead <u>150 SX</u>
Depth <u>4324</u>	Depth <u>4216</u>	From <u>4287</u>	To <u>4290</u>	# @ <u>15.6#</u>
Volume <u>1.7</u>	Volume <u>16.3</u>	From <u>4322</u>	To <u>4324</u>	Tail in
Max Press	Max Press <u>2500</u>	From	To	
Well Connection <u>Swage</u>	Annulus Vol.	From	To	
Plug Depth	Packer Depth	From	To	

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
09:05					on loc, safety mtg, R.O.
10:00	2000	2000			test RBP, swab tubing
10:43					spot sand
11:27	500		19		Load B.S.
11:39	500	350	13	2.5	inj Rate
11:58	500	0	0	1.9	start mixing 150 SX @ 15.6#
12:22	500	0	31.5	0	Finished mixing, washup
12:29	500	0	0	graw	start displacement
12:44	500	2600	8 1/4		Locked up
12:49	1000	0	0	1.8	Rev out
13:10			20		shut down
13:20	600		30	2.5	wash through perf's & wash sand off RBP
14:00					Job Complete

Service Units	<u>178939</u>	<u>3611719919</u>	<u>1435537723</u>
Driver Names	<u>C. Hinz</u>	<u>T. Marcellus</u>	<u>S. Chavez</u>

Jerry Bennett Station Manager Chast Hill Cementer