



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 11143 A

DATE _____ TICKET NO. 1718 111421A

DATE OF JOB: <u>9-19-14</u>	DISTRICT: <u>Pratt</u>	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:			
CUSTOMER: <u>FG HOLL</u>		LEASE: <u>Kyfold</u>		1-19		WELL NO.				
ADDRESS:		COUNTY: <u>BUTLER</u>		STATE: <u>KS</u>						
CITY:		STATE:		SERVICE CREW:						
AUTHORIZED BY:		JOB TYPE: <u>CONV LONGSTING</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
						ARRIVED AT JOB				
						START OPERATION				
						FINISH OPERATION				
						RELEASED				
						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
E 104	Pickup Mileage	Mi	65		
E 101	Heavy Mileage	Mi	130		
E 113	Bulk Delivery	Tm	611		
CE 204	North Charge	4hr	1		
CE 290	Mix Job Charge	sh	205		
CE 501	Casing Support	sh	1		
CE 504	Fluid Con Tainer	DB	1		
S 003	Supervisor	hr	1		

CHEMICAL / ACID DATA:			

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

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

Customer F.G HOLL CO. LLC	Lease No.	Date
Lease Kyfeld	Well # 1-19	9-19-14
Field Order # 11142	Station Pratt	Casing 5 1/2
		Depth
Type Job CAW LONG STRING	Formation	County Barton
		State KS
		Legal Description 19-19-14

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
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 Adam	Station Manager Kevin	Treater JOE
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Service Units	27463	70959	19918	28443
Driver Names	JOSH	TOM	JOE	

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
0730					ON LOC / safety meeting
					Run JTS of 5 1/2 csg
					Con. on 2 - Thru - 9
					Baskets on 4 - 6 - 13
0700					Start Running csg
					csg on Bottom Circ. with Big
1040					Hookup to Pump TRS TO START JOB
1046			5	4	H2O spacer
			024	4	Mix super flush
			5	4	H2O spacer
			006	5	Mix 25 sk scavenger cement
			33	5	Mix 130 sk AA2 cement @ 15 ft
					shut down clear pump & lines
				6	Start H2O DISP.
			064	6	List PST
			50	4	Slow Rate
1130			84		Plug Down
					Plug RTI + MH
					JOB COMPLETE
					Thank you Joe