



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1226754  
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: \_\_\_\_\_



1226754

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	ELLIOTT D 1
Doc ID	1226754

All Electric Logs Run

MICROLOG
DUAL SPACED NEUTRON SPECTRAL DENSITY LOG
ANNULAR HOLE VOLUME PLOT
ARRAY COMPENSATED TRUE RESISTIVITY LOG
BOREHOLE COMPENSATED SONIC ARRAY LOG

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	ELLIOTT D 1
Doc ID	1226754

Tops

Name	Top	Datum
HEEBNER	4096	
TORONTO	4118	
LANSING	4178	
KANSAS CITY	4597	
MARMATON	4739	
PAWNEE	4846	
CHEROKEE	4883	
ATOKA	5122	
MORROW	5168	
CHESTER	5280	
ST GENEVIEVE	5432	



**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 05838 A

AFE# 034180

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

DATE OF JOB <b>6-4-14</b> DISTRICT <b>1717</b>		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 <b>Merit Energy</b>		LEASE <b>Elliot "D"</b> #1		WELL NO.		
ADDRESS		COUNTY <b>Haskell</b>		STATE <b>KS</b>		
CITY STATE		SERVICE CREW <b>J. Chance, Sam, Sergio</b>				
AUTHORIZED BY <b>Sergio Benta</b>		JOB TYPE: <b>242 8 3/4 Surface</b>				
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <b>6-4-14</b> DATE AM - TIME <b>400</b>
<b>78938</b>	<b>14</b>	<b>70897 -</b>	<b>14</b>	<b>44355</b>	<b>14</b>	ARRIVED AT JOB <b>6-4-14</b> AM - TIME <b>630</b>
		<b>19570 -</b>	<b>1</b>	<b>37725</b>	<b>1</b>	START OPERATION <b>6-4-14</b> AM - TIME <b>730</b>
<b>J27808 -</b>	<b>14</b>					FINISH OPERATION <b>6-4-14</b> AM - TIME <b>910</b>
<b>J37724</b>	<b>1</b>					RELEASED <b>6-4-14</b> AM - TIME <b>1015</b>
						MILES FROM STATION TO WELL <b>45</b>

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 [Signature]*  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL101	✓ A-Con Blend	SK	340		6314 00
CL110	✓ Premium Plus Comet	SK	245		3293 50
CC109	✓ Calcium Chloride	16	1422		1493 10
CC102	✓ GellaFlake	16	147		543 90
CC130	✓ G-51	16	64		1600 00
CF253	✓ Guide Shoe	EA	1		380 00
CF1453	✓ Insert Float Valve	EA	1		280 00
CF4405	✓ Centralizer 8 3/8	EA	14		2036 00
CF4109	✓ Stop Collar	EA	1		100 00
CF105	✓ Rubber Plug	EA	1		225 00
CC165	Stoploss Polymer	16	840		5040 00
CC166	Stoploss LCM	16	320		1680 00
E101	Heavy Equipment Mileage	mi	135		945 00
CE2401	Blending + Mix Charge	SK	585		819 00
E113	Bulk Delivery Charge	Tm	1240		2727 45
CE202	Depth Charge	4hrs	1		1500 00
CE504	Plug Container Charge	job	1		250 00
E100	Pickup Mileage	mi	45		191 25
S003	Service Supervisor	EA	1		175 00
SUB TOTAL					<b>24222 90</b>

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE <i>J. Chance</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>X [Signature]</i>
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.





# Cement Report

Customer <i>Merit Energy</i>	Lease No.	Date <i>6-4-14</i>
Lease <i>Elliot D*</i>	Well # <i>1</i>	Service Receipt <i>05838</i>
Casing <i>8 5/8</i>	Depth <i>1710</i>	County <i>Haskell</i>
Job Type <i>2412 Surface</i>	Formation	Legal Description <i>10-28-33</i>
State <i>KS</i>		

Pipe Data		Perforating Data		Cement Data
Casing size <i>8 5/8</i>	Tubing Size	Shots/Ft		Lead <i>34051K A-Com</i>
Depth <i>1710</i>	Depth <i>3540'</i>	From	To	<i>2.4773-5K</i>
Volume <i>106.3</i>	Volume	From	To	<i>14.0 Gal-5K 12.1#</i>
Max Press <i>1800</i>	Max Press	From	To	Tail in <i>24551K Class C</i>
Well Connection <i>8 5/8</i>	Annulus Vol.	From	To	<i>1.3477-5K</i>
Plug Depth <i>1670</i>	Packer Depth	From	To	<i>6.3 Gal-5K 14.9#</i>

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>700</i>					<i>Arrive On Location</i>
<i>800</i>					<i>Safety Meets - Rig Up</i>
<i>700</i>					<i>Rig Running Casing</i>
<i>1800</i>					<i>Circulate w/ Rig</i>
<i>1900</i>					<i>Hook Up TO BE'S</i>
<i>1940</i>	<i>2000</i>		<i>1</i>	<i>1</i>	<i>Pressure Test</i>
<i>1945</i>	<i>425</i>		<i>145</i>	<i>5</i>	<i>Pump Lead amt @ 12.1#</i>
<i>2015</i>	<i>400</i>		<i>58</i>	<i>5</i>	<i>Pump Tail amt @ 14.8#</i>
<i>2030</i>					<i>Drop Mog - Work Up</i>
<i>2035</i>	<i>400</i>		<i>96</i>	<i>5</i>	<i>Displace</i>
<i>2055</i>	<i>700</i>		<i>10</i>	<i>2</i>	<i>Slow Down</i>
<i>2100</i>					<i>Float Held</i>
					<i>Cement TO Surface</i>
<i>2200</i>					<i>Job Complete</i>

Service Units	<i>78438</i>	<i>70897-1950</i>	<i>27808-37724</i>	<i>14355-37725</i>
Driver Names	<i>FZDY</i>	<i>Sam</i>	<i>Sam</i>	<i>Santjo</i>

*Early*

*Sam Bentt*

*FZDY*



**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 05841 A

AFE# 034180

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

DATE OF JOB <u>6-8-14</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>Merit Energy</u>		LEASE <u>Elliot "D" #1</u> WELL NO.							
ADDRESS		COUNTY <u>Haskell</u> STATE <u>KS</u>							
CITY STATE		SERVICE CREW <u>J. Chavez, Sam, David</u>							
AUTHORIZED BY <u>Jay Best JAB</u>		JOB TYPE: <u>242 5 1/2 Long String</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>78938</u>	<u>9</u>	<u>70897-</u>	<u>9</u>	<u>27808 -</u>	<u>9</u>	<u>ARRIVED AT JOB</u>	<u>6-8-14</u>	<u>AM</u>	<u>1200</u>
		<u>19570 -</u>	<u>1</u>	<u>37724</u>	<u>1</u>	<u>START OPERATION</u>	<u>6-8-14</u>	<u>AM</u>	<u>820</u>
						<u>FINISH OPERATION</u>	<u>6-8-14</u>	<u>AM</u>	<u>930</u>
						<u>RELEASED</u>	<u>6-8-14</u>	<u>AM</u>	<u>1030</u>
						<u>MILES FROM STATION TO WELL</u>	<u>65</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
CL104	✓ 50150 P02	SK	285		3135 00
CC113	✓ Gypsum	16	1200		900 00
CC111	✓ Salt	16	1753		876 50
CC103	✓ G-15	16	144		1900 00
CC105	✓ C-41A	16	60		240 00
CC201	✓ Azibonite	16	1425		954 75
CF251	✓ Guide Shoe	EA	1		250 00
CF1451	✓ Insert Float Valve	EA	1		215 00
CF4452	✓ Centralizer 5 1/2	EA	25		1875 00
CF4105	✓ Stop Collar	EA	1		94 00
CF103	✓ Rubber Plug	EA	1		105 00
CC155	✓ Super Flush II	SK	500		765 00
E101	Heavy Equipment Mileage	mi	130		910 00
CE240	Blending & Mixing Charge	SK	285		399 00
E113	Bulk Delivery Charge	TON	780		1716 00
CE206	Depth Charge	4hrs	1		2880 00
CE504	Plus Container Charge	job	1		250 00
E100	Pickup Mileage	mi	65		276 25
S053	Service Supervisor	EA	1		175 00

SUB TOTAL 13579 88

CHEMICAL / ACID DATA:			

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

*Good Job!*

SERVICE REPRESENTATIVE <u>[Signature]</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>[Signature]</u>
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.







Conservation Division  
266 N. Main St., Ste. 220  
Wichita, KS 67202-1513



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair  
Jay Scott Emler, Commissioner  
Pat Apple, Commissioner

Sam Brownback, Governor

October 15, 2014

IDANIA MEDINA  
Merit Energy Company, LLC  
13727 NOEL RD STE 1200  
DALLAS, TX 75240

Re: ACO-1  
API 15-081-22065-00-00  
ELLIOTT D 1  
SW/4 Sec.10-28S-33W  
Haskell County, Kansas

Dear IDANIA MEDINA:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 06/02/2014 and the ACO-1 was received on October 08, 2014 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department