



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1228851
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: _____



1228851

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: 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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Messenger Petroleum, Inc.
Well Name	Molitor 'G' 1
Doc ID	1228851

Tops

Name	Top	Datum
Heebner	3351	-1642
Lansing	3568	-1859
Swope	3921	-2212
Hertha	3959	-2250
Mississippian	4204	-2495
Kinderhook	4320	-2611
Viola	4495	-2786
Simpson (smpl top)	4546	-2837
LTD	4551	-2842



DRILL STEM TEST REPORT

Prepared For: **Messenger Petroleum Inc.**

525S. Main St.
Kingman, KS 67068

ATTN: Jon Messenger

Molitor 'G' #1

14-29s-9w Kingman,KS

Start Date: 2014.06.01 @ 14:59:08

End Date: 2014.06.02 @ 01:38:53

Job Ticket #: 54178 DST #: 1

Trilobite Testing, Inc
PO Box 362 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2014.06.05 @ 08:45:43



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Messenger Petroleum Inc.

14-29s-9w Kingman,KS

525S. Main St.
Kingman, KS 67068

Molitor 'G' #1

Job Ticket: 54178

DST#: 1

ATTN: Jon Messenger

Test Start: 2014.06.01 @ 14:59:08

GENERAL INFORMATION:

Formation: **Mississippi**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 18:21:53

Time Test Ended: 01:38:53

Test Type: Conventional Bottom Hole (Initial)

Tester: Matt Smith

Unit No: 53

Interval: 4209.00 ft (KB) To 4230.00 ft (KB) (TVD)

Reference Elevations: 1709.00 ft (KB)

Total Depth: 4230.00 ft (KB) (TVD)

1702.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 7.00 ft

Serial #: 6773 Outside

Press@RunDepth: 151.39 psig @ 4210.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.06.01

End Date:

2014.06.02

Last Calib.:

2014.06.02

Start Time: 14:59:13

End Time:

01:38:53

Time On Btm:

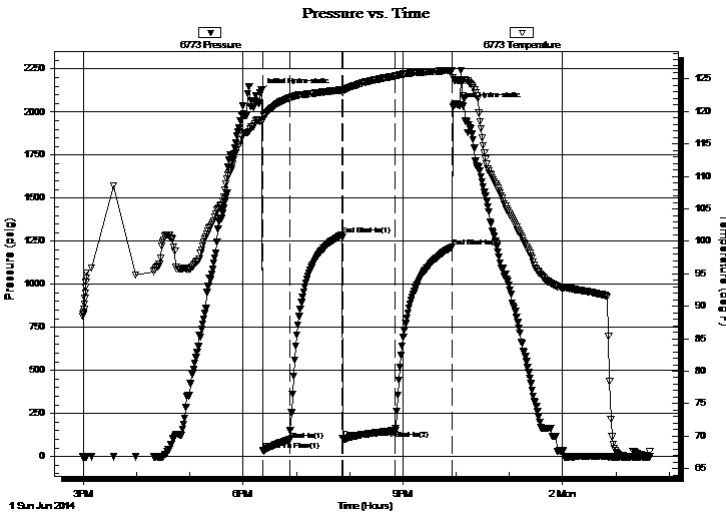
2014.06.01 @ 18:19:23

Time Off Btm:

2014.06.01 @ 21:56:53

TEST COMMENT: IF: Strong blow . B.O.B. in 45 secs,
IS: No blow . 4 mins to bleed off.
FF: Strong blow . B.O.B. in 9 mins.
FS: Weak blow . Surf., - 1/2".

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2110.48	118.49	Initial Hydro-static
3	36.02	118.69	Open To Flow (1)
33	94.57	122.09	Shut-In(1)
93	1288.24	123.32	End Shut-In(1)
93	106.60	123.00	Open To Flow (2)
153	151.39	125.45	Shut-In(2)
217	1217.69	126.33	End Shut-In(2)
218	2029.47	125.25	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
180.00	SOWCM 3%g 10%o 97%w	0.89
30.00	GOMCW 2%o 3%g 20%w 75%w	0.15
31.00	GOMCW 2%o 3%g 20%w 75%w	0.43
62.00	GOWCM 5%g 5%o 20%w 70%w	0.87
0.00	868' G.I.P. 100%g	0.00

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Messenger Petroleum Inc.

14-29s-9w Kingman, KS

525S. Main St.
Kingman, KS 67068

Molitor 'G' #1

Job Ticket: 54178

DST#: 1

ATTN: Jon Messenger

Test Start: 2014.06.01 @ 14:59:08

GENERAL INFORMATION:

Formation: **Mississippi**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 18:21:53

Time Test Ended: 01:38:53

Test Type: Conventional Bottom Hole (Initial)

Tester: Matt Smith

Unit No: 53

Interval: **4209.00 ft (KB) To 4230.00 ft (KB) (TVD)**

Reference Elevations: 1709.00 ft (KB)

Total Depth: 4230.00 ft (KB) (TVD)

1702.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 7.00 ft

Serial #: 6719 Outside

Press@RunDepth: psig @ 4210.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.06.01

End Date:

2014.06.02

Last Calib.:

2014.06.02

Start Time: 14:59:25

End Time:

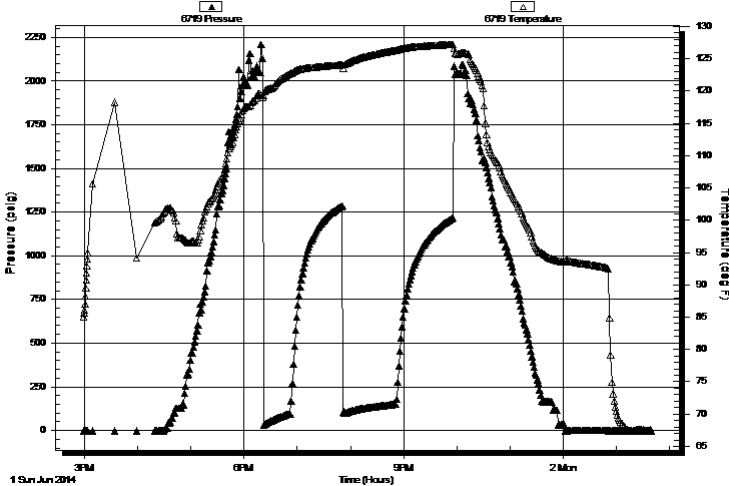
01:38:50

Time On Btm:

Time Off Btm:

TEST COMMENT: IF: Strong blow . B.O.B. in 45 secs,
IS: No blow . 4 mins to bleed off.
FF: Strong blow . B.O.B. in 9 mins.
FS: Weak blow . Surf., - 1/2".

Pressure vs. Time



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

Recovery

Length (ft)	Description	Volume (bbl)
180.00	SOWCM 3%o 10%g 97%w	0.89
30.00	GOMCW 2%o 3%g 20%w 75%w	0.15
31.00	GOMCW 2%o 3%g 20%w 75%w	0.43
62.00	GOWCM 5%g 5%o 20%w 70%w	0.87
0.00	868' G.I.P. 100%g	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Messenger Petroleum Inc.

14-29s-9w Kingman,KS

525S. Main St.
Kingman, KS 67068

Molitor 'G' #1

Job Ticket: 54178

DST#: 1

ATTN: Jon Messenger

Test Start: 2014.06.01 @ 14:59:08

Tool Information

Drill Pipe:	Length: 3992.00 ft	Diameter: 3.80 inches	Volume: 56.00 bbl	Tool Weight:	2400.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer:	22000.00 lb
Drill Collar:	Length: 210.00 ft	Diameter: 2.25 inches	Volume: 1.03 bbl	Weight to Pull Loose:	88000.00 lb
			<u>Total Volume: 57.03 bbl</u>	Tool Chased	0.00 ft
Drill Pipe Above KB:	21.00 ft			String Weight: Initial	82000.00 lb
Depth to Top Packer:	4209.00 ft			Final	86000.00 lb
Depth to Bottom Packer:	ft				
Interval between Packers:	21.00 ft				
Tool Length:	49.00 ft				
Number of Packers:	2	Diameter: 6.75 inches			

Tool Comments:

Tool Description

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			4182.00	
Shut In Tool	5.00			4187.00	
Hydraulic tool	5.00			4192.00	
Jars	5.00			4197.00	
Safety Joint	3.00			4200.00	
Packer	4.00			4204.00	28.00 Bottom Of Top Packer
Packer	5.00			4209.00	
Stubb	1.00			4210.00	
Recorder	0.00	6719	Outside	4210.00	
Recorder	0.00	6773	Outside	4210.00	
Perforations	17.00			4227.00	
Bullnose	3.00			4230.00	21.00 Bottom Packers & Anchor

Total Tool Length: 49.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Messenger Petroleum Inc.

14-29s-9w Kingman,KS

525S. Main St.
Kingman, KS 67068

Molitor 'G' #1

Job Ticket: 54178

DST#: 1

ATTN: Jon Messenger

Test Start: 2014.06.01 @ 14:59:08

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

46000 ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 9.59 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
180.00	SOWCM 3% <i>m</i> 10% <i>o</i> 97% <i>w</i>	0.885
30.00	GOMCW 2% <i>o</i> 3% <i>g</i> 20% <i>m</i> 75% <i>w</i>	0.148
31.00	GOMCW 2% <i>o</i> 3% <i>g</i> 20% <i>m</i> 75% <i>w</i>	0.435
62.00	GOWCM 5% <i>g</i> 5% <i>o</i> 20% <i>w</i> 70% <i>m</i>	0.870
0.00	868' G.I.P. 100% <i>g</i>	0.000

Total Length: 303.00 ft Total Volume: 2.338 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

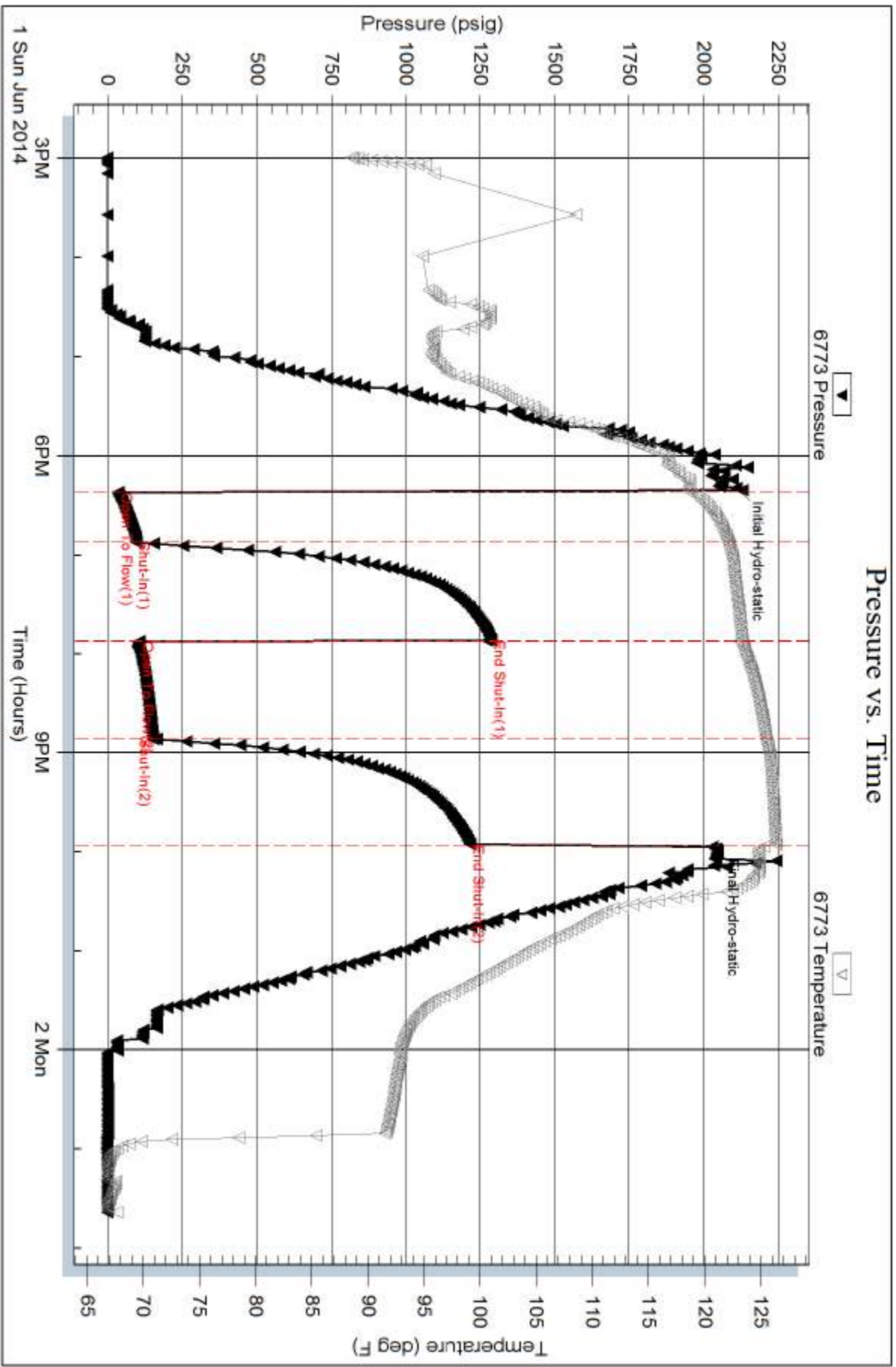
Recovery Comments: RW is .17 @ 68 degrees = 46,000.

Serial #: 6773

Outside Messenger Petroleum Inc.

Molitor G#1

DST Test Number: 1



Trilobite Testing, Inc

Ref. No: 54178

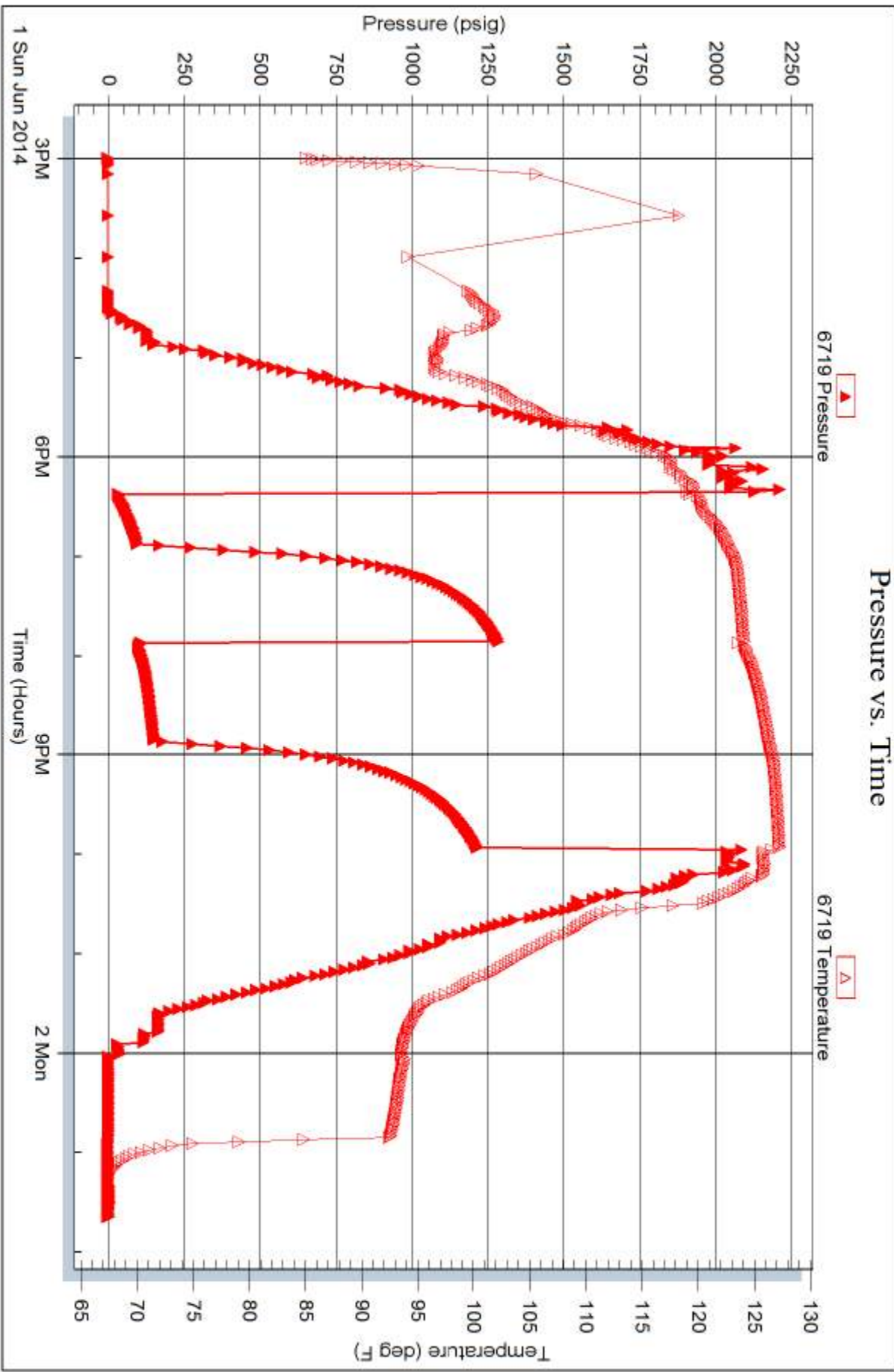
Printed: 2014.06.05 @ 08:45:44

Serial #: 6719

Outside Messenger Petroleum Inc.

Molitor G#1

DST Test Number: 1



Trilobite Testing, Inc

Ref. No: 54178

Printed: 2014.06.05 @ 08:45:44



TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

Test Ticket

NO. 54178

Well Name & No. Molitor 'G' #1 Test No. 1 Date 6/1/14
 Company Messenger Petroleum, Inc. Elevation 1709 KB 1702 GL
 Address 525 S. Main St. Kingman, KS. 67068
 Co. Rep / Geo. Jon Messengee Rig Sterling Rig #4
 Location: Sec. 14 Twp. 29S Rge. 9W Co. Kingman State KS.

Interval Tested 4209 - 4230 Zone Tested Mississippi
 Anchor Length 21' Drill Pipe Run 3992 Mud Wt. 9.4
 Top Packer Depth 4204 Drill Collars Run 210 Vis 52
 Bottom Packer Depth 4209 Wt. Pipe Run 2 WL 9.6
 Total Depth 4230 Chlorides 4,000 ppm System LCM 2nd

Blow Description IF: Strong blow. B.O.B. in 45 secs.
ISI: No blow. 4 mins to bleed off.
FF: Strong blow. B.O.B. in 9 mins.
FSI: Weak blow. Surf., - 1/4" to 1/2".

Rec	Feet of	%gas	%oil	%water	%mud
<u>868'</u>	<u>G.I.P.</u>	<u>100%</u>			
<u>62'</u>	<u>GOWCM</u>	<u>5%</u>	<u>5%</u>	<u>20%</u>	<u>70%</u>
<u>31'</u>	<u>GOMCW</u>	<u>3%</u>	<u>2%</u>	<u>75%</u>	<u>20%</u>
<u>30'</u>	<u>GOMCW</u>	<u>3%</u>	<u>2%</u>	<u>75%</u>	<u>20%</u>
<u>180'</u>	<u>SHOWCM</u>	<u>%gas</u>	<u>10%</u>	<u>87%</u>	<u>3%</u>

Rec Total 303' BHT 126° Gravity N.A. API RW .17 @ 68 ° F Chlorides 46,000 ppm

(A) Initial Hydrostatic 2110 Test 1250 T-On Location 1440
 (B) First Initial Flow 36 Jars 250 T-Started 1459
 (C) First Final Flow 95 Safety Joint 75 T-Open 1821
 (D) Initial Shut-In 1288 Circ Sub _____ T-Pulled 2156
 (E) Second Initial Flow 107 Hourly Standby _____ T-Out 0138
 (F) Second Final Flow 151 Mileage 76.5 117.80 Comments _____
 (G) Final Shut-In 1218 Sampler _____
 (H) Final Hydrostatic 2029 Straddle _____ Ruined Shale Packer _____
 Shale Packer _____ Ruined Packer _____

Initial Open 30 Extra Packer _____ Extra Copies _____
 Initial Shut-In 60 Extra Recorder _____ Sub Total 0
 Final Flow 60 Day Standby _____ Total 1692.80
 Final Shut-In 60 Accessibility _____ MP/DST Disc't _____
 Sub Total 1692.80

Approved By _____ Our Representative Matthew A. Smith

Trilobite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.



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 10400 A

DATE _____ TICKET NO. _____

DATE OF JOB <i>06-03-14</i> DISTRICT <i>Pratt KS</i>		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 <i>Messner Petroleum</i>		LEASE <i>MOLITOR G 1</i>		WELL NO.					
ADDRESS		COUNTY <i>Kingman</i>		STATE <i>KS</i>					
CITY STATE		SERVICE CREW <i>Sullivan, Ewing, Gibson</i>							
AUTHORIZED BY		JOB TYPE: <i>cow 5 1/2</i>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<i>33708-20910</i>	<i>1 hr</i>						<i>6-3-14</i>	<i>PM</i>	<i>9:00</i>
<i>10959-19918</i>	<i>1</i>					ARRIVED AT JOB		<i>AM</i>	<i>10:45</i>
<i>37900</i>						START OPERATION		<i>AM</i>	<i>3:00</i>
						FINISH OPERATION		<i>PM</i>	<i>3:45</i>
						RELEASED		<i>AM</i>	<i>4:30</i>
						MILES FROM STATION TO WELL			<i>30</i>

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
CP 105	AA-2 cmt	SK	125		2,125.00
CP 103	60/40 p02 cmt	SK	75		900.00
CC 102	CellFAKE	lb	32		118.40
CC 111	SALT	lb	573		286.50
CC 112	C7R	lb	36		216.00
CC 115	C-44	lb	89		458.35
CC 129	91A-322	lb	59		442.50
CC 201	Gilsonite	lb	625		418.75
PF 107	LATCH down Plug Baffle 5 1/2	SA	1		400.00
PF 1251	Auto Fill Stone Manif	SA	1		360.00
PF 1651	Turbolizer	SA	6		660.00
C704	CLAY MIX	gal	5		175.00
CC 151	mud flush	gal	500		750.00
C 100	put up no	mi	50		127.50
E 101	Heavy grit	mi	60		420.00
E 113	Bulk cutting	Tm	275		603.90
PE 205	Depth chime	SA	1		2,520.00
PE 240	Blend manuf	SK	200		280.00
PE 501	Casing Swirl	SA	1		200.00
PE 504	put containing	SA	1		250.00
5003	Scale Inhibitor	SA	1		175.00
SUB TOTAL					<i>9,034.00</i>
CHEMICAL / ACID DATA:					
SERVICE & EQUIPMENT					%TAX ON \$
MATERIALS					%TAX ON \$
TOTAL					

SERVICE REPRESENTATIVE <i>Robert Sullivan</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i>
FIELD SERVICE ORDER NO.	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer <i>Messner Petroleum</i>	Lease No.	Date <i>06-03-14</i>
Lease <i>UNITOR 6</i>	Well # <i>1</i>	
Field Order # <i>10400</i>	Station <i>Pratt, KS</i>	Casing # <i>57</i>
		Depth <i>4551</i>
Type Job <i>CW 5 1/2" casing</i>	Formation	Legal Description <i>17-29-2</i>
		County <i>Lincoln</i>
		State <i>KS</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 <i>4551</i>	Depth	From	To	Pre Pad	Max		5 Min.	
Volume <i>107.8</i>	Volume	From	To	Pad	Min		10 Min.	
Max Press <i>3,000</i>	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection <i>5 1/2"</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth <i>4551</i>	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative	Station Manager <i>and out</i>	Treater <i>Robert [Signature]</i>
-------------------------	-----------------------------------	--------------------------------------

Service Units	<i>37900</i>	<i>33708</i>	<i>20920</i>	<i>70927</i>	<i>19918</i>				
Driver Names	<i>Callahan</i>	<i>Spind</i>		<i>Wilson</i>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>10:45</i>					<i>on to 5 1/2" casing</i>
					<i>Run 5 1/2" 1500' casing</i>
					<i>Break circ 1/2 way 30 min circ</i>
<i>1:00</i>					<i>casing on bottom</i>
<i>2:00</i>					<i>hook 1 1/2" circ</i>
<i>3:00</i>			<i>2</i>	<i>25</i>	<i>11 spacers</i>
			<i>12</i>		<i>11 mud wash</i>
			<i>13</i>	<i>4.5</i>	<i>mix 200 lb Senvo and cont 400 gal</i>
			<i>30</i>		<i>mix 125 lb Alite cont</i>
					<i>cont mixed shot down with pump loss</i>
					<i>Release Plug</i>
				<i>6</i>	<i>At Depth</i>
	<i>200</i>		<i>86</i>		<i>Left Plg</i>
	<i>500</i>			<i>3</i>	<i>Slow Rate</i>
<i>3:45</i>	<i>1,700</i>		<i>1085</i>		<i>Plug down</i>
			<i>1</i>	<i>2</i>	<i>Plug out</i>
			<i>1</i>		<i>Plug out</i>
					<i>5003 complete</i>



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 10426 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>5-28-14</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>Messenger Pat</u>		LEASE <u>Molitor "g"</u> WELL NO. <u>1</u>								
ADDRESS		COUNTY <u>Kingman</u> STATE <u>K1</u>								
CITY STATE		SERVICE CREW <u>MATTAI, GIBBS, GIBSON</u>								
AUTHORIZED BY		JOB TYPE: <u>CAW SURFACE PUMP</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>37586</u>	<u>.5</u>						<u>5-28-14</u>			<u>8:30</u>
						ARRIVED AT JOB				<u>1:50</u>
<u>33708/20920</u>	<u>.5</u>					START OPERATION				<u>3:15</u>
						FINISH OPERATION				<u>3:30</u>
<u>19831/19862</u>	<u>.5</u>					RELEASED				<u>4:00</u>
						MILES FROM STATION TO WELL				<u>30</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: X
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<u>CP 103</u>	<u>60/46 POZ</u>	<u>SK</u>	<u>225</u>		<u>2700 01</u>
<u>CC 102</u>	<u>CELLORIAN</u>	<u>lb</u>	<u>57</u>		<u>210 90</u>
<u>CC 109</u>	<u>CALCIUM CHLORIDE</u>	<u>lb</u>	<u>582</u>		<u>611 10</u>
<u>CF 153</u>	<u>WOODEN PLUG 8 1/2</u>	<u>EA</u>	<u>1</u>		<u>160 00</u>
<u>E 100</u>	<u>P.V. Miles</u>	<u>Mi</u>	<u>30</u>		<u>127 50</u>
<u>E 101</u>	<u>HEAVY eq. Miles</u>	<u>Mi</u>	<u>600</u>		<u>420 00</u>
<u>F 113</u>	<u>PROP + BULK DELIVERY</u>	<u>TN</u>	<u>291</u>		<u>640 20</u>
<u>Co 200</u>	<u>DEPTN CHARGE 0-500</u>	<u>HR</u>	<u>1</u>		<u>1,000 00</u>
<u>Co 240</u>	<u>Blend + Mix charge</u>	<u>SK</u>	<u>225</u>		<u>315 00</u>
<u>Co 500</u>	<u>PLUG CONTAINER</u>	<u>Job</u>	<u>1</u>		<u>250 00</u>
<u>S003</u>	<u>Service SUPERVISOR</u>	<u>ea</u>	<u>1</u>		<u>175 00</u>

SUB TOTAL DL5 5,023 37

CHEMICAL / ACID DATA:

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

TOTAL

SERVICE REPRESENTATIVE Mike Mattai

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: X

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer Messinger Petroleum Inc	Lease No.	Date 5-28-14
Lease 100120	Well # 1	
Field Order # 100120	Station 1	Casing 8 7/8
		Depth 2200
Type Job CIPW	Formation KID 225	County Kingman
		State Vt
		Legal Description 14 29-9

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8 7/8	Tubing Size	Shots/Ft		Acid 225 SR 60/40	RATE 27.300	PRESS 22.00	ISIP 11.00	
Depth 2200	Depth	From	To	Pre Pad	Max		5 Min.	
Volume 14.12	Volume	From	To	Pad	Min		10 Min.	
Max Press 500	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth 2200	Packer Depth	From	To	Flush 12.9	Gas Volume		Total Load	

Customer Representative John Messinger	Station Manager J. V. O. Country	Treater Mike Manna
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Service Units 3725	3308	2700	1980	1980				
Driver Names 110000	90000		90000	500	500			

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1:50					CO2 location / setting
2:05					100 8 7/8 22" casing
3:00					setting 22" bottom
3:07					flow in 100/1500 100 8 7/8
3:15	100			4	flow 3 BBL 100
3:17	100		1/80	4	max 225 SR 60/40 100 8 7/8
3:20					2 1/2" plug
3:27	100			5	start acid
3:30	100		11.9		plug down, start in well
					15 BBL slowly to fill
					flow started
					Thank You!
					Mike Manna