



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1229798
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: _____



1229798

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	Joan Deeds 1
Doc ID	1229798

All Electric Logs Run

COMPENSATED DENSITY / NEUTRON LOG
DUAL INDUCTION LOG
MICRO LOG
SONIC LOG

Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	Joan Deeds 1
Doc ID	1229798

Tops

Name	Top	Datum
ANHYDRITE	3067	+333
BASE ANHYDRITE	3102	+298
STOTLER	3920	-520
HEEBNER	4201	-801
LANSING	4257	-857
BASE KANSAS CITY	4517	-1117
PAWNEE	4632	-1232
FORT SCOTT	4696	-1296
CHEROKEE	4722	-1322
MISSISSIPPI	4930	-1530

Date 9-16-14 District Saklay, K1 Ticket No. 64103
 Company Raymond Oil Rig LD
 Lease Tash Woods Well No. 1
 County Shelton State K1
 Location 9-6-37 Field _____
Miscwater to AD 4W, 34 Wmte

CASING DATA. Conductor PTA Squeeze Misc
 Surface Intermediate Production Liner
 Size 8 5/8 Type Nav Weight 24 Collar _____

CEMENT DATA:
 Spacer Type: _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG _____

LEAD: Pump Time _____ hrs. Type Pump 39.00
240901 Excess _____
 Amt. 200 Sks Yield 1.54 ft³/sk Density 1502 PPG _____
 TAIL: Pump Time _____ hrs. Type _____
 Excess _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG _____
 WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbls.

Casing Depths: Top 0637 Bottom 3031

Pump Trucks Used 402- Wayne
 Bulk Equip. 1 - Juan T

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size 12 1/4 T.D. 306 ft. P.B. to _____ ft.

Float Equip: Manufacturer _____
 Shoe: Type _____ Depth _____
 Float: Type _____ Depth _____
 Centralizers: Quantity _____ Plugs Top _____ Btm. _____
 Stage Collars _____
 Special Equip. _____
 Disp. Fluid Type water Amt. 18.35 Bbls. Weight _____ PPG _____
 Mud Type _____ Weight _____ PPG _____

CAPACITY FACTORS:
 Casing: Bbls/Lin. ft. 0637 Lin. ft./Bbl. _____
 Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Annulus: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Perforations: From _____ ft. to _____ ft. Amt. _____

COMPANY REPRESENTATIVE _____ CEMENTER 20 Kane

TIME		PRESSURES PSI		FLUID PUMPED DATA			REMARKS
AM/PM		DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
							Hold safety meeting
							Start water
							Start cement
							merge cement 3 hours 15 min
							stop cement
					30		wash up pump / out
					18.35		place bottles water
							clean and oil circulation
							in cell
							Hold safety meeting

ALLIED OIL & GAS SERVICES, LLC 064103

Federal Tax I.D. # 20-8851475

REMIT TO P.O. BOX 93999

SOUTHLAKE, TEXAS 76092

SERVICE POINT:

Dakota
9-17-14

DATE <u>9-16-14</u>	SEC. <u>9</u>	TWP. <u>6</u>	RANGE <u>37</u>	CALLED OUT	ON LOCATION <u>11:30 pm</u>	JOB START <u>2:00 am</u>	JOB FINISH <u>2:30 am</u>
LEASE <u>Deeds</u>	WELL # <u>1</u>	LOCATION <u>Brewster N to DD</u>			COUNTY <u>Shannon</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)				<u>4W, 5 + W into</u>			

CONTRACTOR L-D Drilling OWNER same

TYPE OF JOB Surface

HOLE SIZE 12 1/4 TD 3061 CEMENT AMOUNT ORDERED 200 SFs cement

CASING SIZE 8 1/8 DEPTH 3631 280 gal

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 151

PERFS.

DISPLACEMENT 19.35 bbl

EQUIPMENT

PUMP TRUCK CEMENTER Roberto Edwards Matthias

422 HELPER Wayne Maghgy

BULK TRUCK DRIVER Juan Tamez (TWS)

891/310

BULK TRUCK DRIVER

REMARKS:

Mix 200 SFs cement
Displace with water
Cement did circulate
in casing

Frank yca

CHARGE TO: Raymond Oil
STREET _____
CITY _____ STATE _____ ZIP _____

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Mr. Raymond Bowen

SIGNATURE Matthias

COMMON 200 SF @ 1.29 2580.00

POZMIX @

GEL 376 # @ .38 143.88

CHLORIDE 564 # @ 1.10 620.40

ASC @

@

@

@

@

@

@

@

HANDLING 216.27 SF @ 2.48 536.35

MILEAGE 28 mi x 60 x 2.25 378.00

TOTAL

SERVICE

DEPTH OF JOB 3031

PUMP TRUCK CHARGE 1512.25

EXTRA FOOTAGE @

MILEAGE MTH 60 @ 7.70 462.00

MANIFOLD @

MTH 60 @ 4.40 264.00

@

(880.63/200) TOTAL 4403.15

PLUG & FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

SALES TAX (If Any) _____

TOTAL CHARGES 8,791.55

DISCOUNT 1,583.10 IF PAID IN 30 DAYS

7,208.45

COPY



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 11200 A

DATE _____ TICKET NO. _____

DATE OF JOB 9-27-14 DISTRICT Pratt		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 Joan Deeds WELL NO. 1							
ADDRESS		COUNTY Sherman STATE Ks							
CITY STATE		SERVICE CREW Mattal, McGraw, Cobb							
AUTHORIZED BY		JOB TYPE: CAW long string							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
77586	1						9-26-14	AM	9:30
						ARRIVED AT JOB	9-27-14	AM	10:00
77686/19905	1					START OPERATION		AM	10:55
						FINISH OPERATION		AM	11:45
19903/73768	1					RELEASED		AM	12:30
						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: *x RRL Wike*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 1001	COMMON CMT	SK	175		2800-
CP 103	60/40 P02	SK	30		360-
CC 111	SALT	lb	790		395-
CC 130	E-51	lb	33		825-
CC 201	9.50015	lb	875		580.25
CF 601	ATCH DOWN Plug + Baffle 5 1/2	PA	1		850-
CF 1251	Auto Fill Float 5000 5 1/2	PA	1		360-
CF 1651	74-001200 5 1/2	PA	8		880-
CF 1901	BASKET 5 1/2	PA	1		290-
CF 2001	CMT SCRATCHER CABLE TYPE 5 1/2	PA	5		375-
CC 151	M40 FLUSH	gal	1,000		1500-
E 100	P.N. M10	M	175		743.75
E 101	HEAVY EB. M10	M	350		2450.00
E 113	PROP + BULK D-11	TN	1698		3734.50
CE 205	Depth charge 4000-5000'	400	1		2520.00
CE 240	Blend + Mix charge	54	205		287.00
CE 504	Plug container	JOB	1		250.00
S 003	SUP-VISU	oz	1		175.00
SUB TOTAL					13,567.05

CHEMICAL / ACID DATA:			

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

TOTAL

SERVICE REPRESENTATIVE **Mike Mattal**

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *x RRL Wike*

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer LD Drilling, inc	Lease No.	Date 9-27-14
Lease Joan Deeds	Well # 1	
Field Order # 11200	Station PRATT	Casing 5 1/2
		Depth 4954.80
Type Job COW long string	Formation	County SHAWNEE
		State KS
		Legal Description 9-65-37W

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
4 1/2				175 SKS	Common	10% salt	5.5 SK gilsonite
Depth	Depth	From	To	Pre Pad	Max		5 Min.
4954.80				270 WCA-1			
Volume	Volume	From	To	Pad	Min		10 Min.
117.9				30 SKS 60/40 P02	220 gal		
Max Press	Max Press	From	To	Frac	Avg		15 Min.
1500							
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load
4944.40							

Customer Representative LD	Station Manager Kevin Gordinay	Treater MIKE MATAI
-----------------------------------	---------------------------------------	---------------------------

Service Units	37586	77686	19905	19903	73768
Driver Names	MATAI	McGRAW		COBB	

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
10:05					On location / Safety meeting
10:50					Hook up to casing
10:53					Centralization on 1, 5, 7, 9, 11, 13, 15, 17
					Scratching on JTs 8 + 12
					Casing on bottom, circulating
10:50					Hook to casing
10:53	250		5	5	Pump 5 BBI water
10:54	250		24	5	Pump 24 BBI mud flush
10:59	250		5	5	Pump 5 BBI water
11:00	200		41	5	Mix 175 SKS common cur
11:09	-		3/4	3	1/2 tub slurry to PIT, wash pump & line
11:11	-		-	-	release plug
11:12	150		-	6	start displacement
11:27	200		85	6	lift pressure
11:30	400		105	2.5	slow rate
11:34	600/1000		117.6		plug down, release & hold
11:40	-		7	-	plug PIT hole
					Circulation through job
					job complete
					Thank You!
					MIKE MATAI, MIKE + COLE



Company _____ Lease & Well No. _____
 Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
 Date _____ Sec. _____ Twp. _____ Range _____ County _____ State _____
 Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft
 Packer Depth _____ ft. Size _____ in. Packer Depth _____ ft. Size _____ in.
 Packer Depth _____ ft. Size _____ in. Packer Depth _____ ft. Size _____ in.
 Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ psi.
 Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ psi.
 Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor _____ Drill Collar Length _____ ft I.D. _____ in.
 Mud Type _____ Viscosity _____ Weight Pipe Length _____ ft I.D. _____ in.
 Weight _____ Water Loss _____ cc. Drill Pipe Length _____ ft I.D. _____ in.
 Chlorides _____ P.P.M. Test Tool Length _____ ft Tool Size _____ in.
 Jars: Make _____ Serial Number _____ Anchor Length _____ ft. Size _____ in.
 Did Well Flow? _____ Reversed Out _____ Surface Choke Size _____ in. Bottom Choke Size _____ in.
 Main Hole Size _____ in. Tool Joint Size _____ in.

Blow: _____

Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____

Remarks _____

Time Set Packer(s) _____ Time Started off Bottom _____ Maximum Temperature _____
 Initial Hydrostatic Pressure.....(A) _____ P.S.I.
 Initial Flow Period.....Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
 Initial Closed In Period.....Minutes _____ (D) _____ P.S.I.
 Final Flow Period.....Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
 Final Closed In Period.....Minutes _____ (G) _____ P.S.I.
 Final Hydrostatic Pressure.....(H) _____ P.S.I.

DIAMOND TESTING

Pressure Survey Report

General Information

Company Name	RAYMOND OIL COMPANY, INC.	Job Number	M709
Well Name	JOAN DEEDS #1	Representative	MIKE COCHRAN
Unique Well ID	DST #1 L/KC 140-180 4371-4450	Well Operator	RAYMOND OIL COMPANY, INC.
Surface Location	SEC 9-6S-37W SHERMAN CO.KS.	Report Date	2014/09/22
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	KIM SHOEMAKER
		Test Unit	NO. 3

Test Information

Test Type	CONVENTIONAL		
Formation	DST #1 L/KC 140-180 4371-4450		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2014/09/22	Start Test Time	09:20:00
Final Test Date	2014/09/22	Final Test Time	17:50:00
		Well Fluid Type	01 Oil
Gauge Name	5448		
Gauge Serial Number			

Test Results

Remarks RECOVERED:
1' SOSMW 2% OIL, 68% WTR, 30% MUD
61' MW 90% WTR, 10% MUD
62' TOTAL FLUID

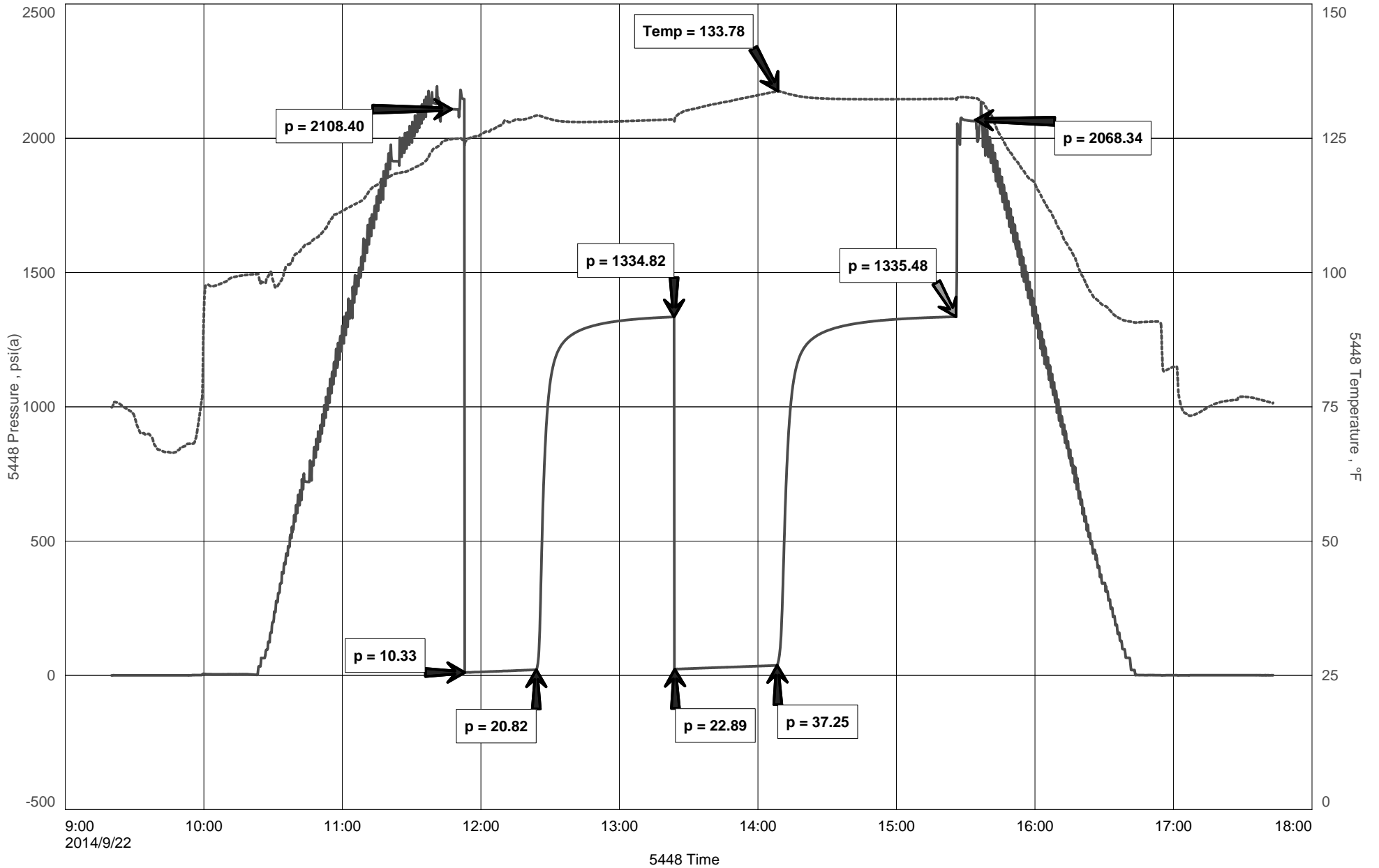
CHLOR: 16,000 PPM
PH: 7.0
RW: .60 @ 77 DEG

TOOL SAMPLE: 88% WTR, 12% MUD W/ A THIN SCUM OF OIL & SOME GASSY BUBBLES

RAYMOND OIL COMPANY, INC.
DST #1 L/KC 140-180 4371-4450
Start Test Date: 2014/09/22
Final Test Date: 2014/09/22

JOAN DEEDS #1
Formation: DST #1 L/KC 140-180 4371-4450
Pool: WILDCAT
Job Number: M709

JOAN DEEDS #1





Company _____ Lease & Well No. _____
 Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
 Date _____ Sec. _____ Twp. _____ Range _____ County _____ State _____
 Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft
 Packer Depth _____ ft. Size _____ in. Packer Depth _____ ft. Size _____ in.
 Packer Depth _____ ft. Size _____ in. Packer Depth _____ ft. Size _____ in.
 Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ psi.
 Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ psi.
 Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor _____ Drill Collar Length _____ ft I.D. _____ in.
 Mud Type _____ Viscosity _____ Weight Pipe Length _____ ft I.D. _____ in.
 Weight _____ Water Loss _____ cc. Drill Pipe Length _____ ft I.D. _____ in.
 Chlorides _____ P.P.M. Test Tool Length _____ ft Tool Size _____ in.
 Jars: Make _____ Serial Number _____ Anchor Length _____ ft. Size _____ in.
 Did Well Flow? _____ Reversed Out _____ Surface Choke Size _____ in. Bottom Choke Size _____ in.
 Main Hole Size _____ in. Tool Joint Size _____ in.

Blow: _____

Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____

Remarks _____

Time Set Packer(s) _____ Time Started off Bottom _____ Maximum Temperature _____
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 Initial Flow Period.....Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
 Initial Closed In Period.....Minutes _____ (D) _____ P.S.I.
 Final Flow Period.....Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
 Final Closed In Period.....Minutes _____ (G) _____ P.S.I.
 Final Hydrostatic Pressure.....(H) _____ P.S.I.

DIAMOND TESTING

Pressure Survey Report

General Information

Company Name	RAYMOND OIL COMPANY, INC.	Job Number	M710
Well Name	JOAN DEEDS #1	Representative	MIKE COCHRAN
Unique Well ID	DST #2 MARM/ALTA "B" 4510-4589	Well Operator	RAYMOND OIL COMPANY, INC.
Surface Location	SEC 9-6S-37W SHERMAN CO.KS.	Report Date	2014/09/23
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	KIM SHOEMAKER
		Test Unit	NO. 3

Test Information

Test Type	CONVENTIONAL		
Formation	DST #2 MARM/ALTA "B" 4510-4589		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2014/09/23	Start Test Time	09:30:00
Final Test Date	2014/09/23	Final Test Time	17:55:00
		Well Fluid Type	01 Oil
Gauge Name	5448		
Gauge Serial Number			

Test Results

Remarks RECOVERED:
175' GIP
10' CO 100% OIL
68' GHOCM 2% GAS, 46% OIL, 52% MUD
78' TOTAL FLUID

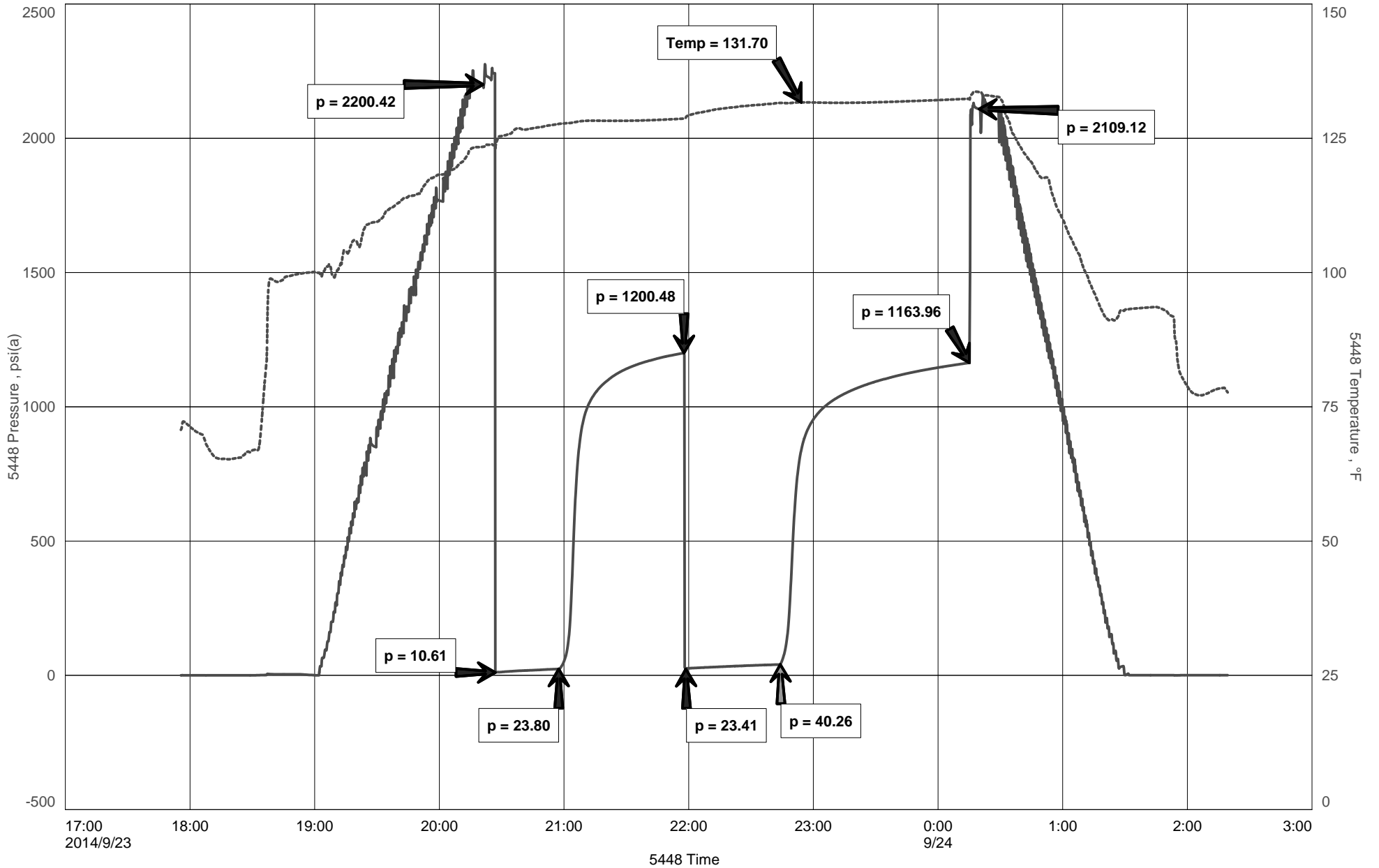
GRAVITY: 37.7 @ 60 DEG

TOOL SAMPLE: 6% GAS, 36% OIL, 58% MUD

RAYMOND OIL COMPANY, INC.
DST #2 MARM/ALTA "B" 4510-4589
Start Test Date: 2014/09/23
Final Test Date: 2014/09/23

JOAN DEEDS #1
Formation: DST #2 MARM/ALTA "B" 4510-4589
Pool: WILDCAT
Job Number: M710

JOAN DEEDS #1





Company _____ Lease & Well No. _____
 Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
 Date _____ Sec. _____ Twp. _____ Range _____ County _____ State _____
 Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft
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 Packer Depth _____ ft. Size _____ in. Packer Depth _____ ft. Size _____ in.
 Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ psi.
 Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ psi.
 Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor _____ Drill Collar Length _____ ft I.D. _____ in.
 Mud Type _____ Viscosity _____ Weight Pipe Length _____ ft I.D. _____ in.
 Weight _____ Water Loss _____ cc. Drill Pipe Length _____ ft I.D. _____ in.
 Chlorides _____ P.P.M. Test Tool Length _____ ft Tool Size _____ in.
 Jars: Make _____ Serial Number _____ Anchor Length _____ ft. Size _____ in.
 Did Well Flow? _____ Reversed Out _____ Surface Choke Size _____ in. Bottom Choke Size _____ in.
 Main Hole Size _____ in. Tool Joint Size _____ in.

Blow: _____

Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____
 Recovered _____ ft. of _____

Remarks _____

Time Set Packer(s) _____ Time Started off Bottom _____ Maximum Temperature _____
 Initial Hydrostatic Pressure.....(A) _____ P.S.I.
 Initial Flow Period.....Minutes _____ (B) _____ P.S.I. to (C) _____ P.S.I.
 Initial Closed In Period.....Minutes _____ (D) _____ P.S.I.
 Final Flow Period.....Minutes _____ (E) _____ P.S.I. to (F) _____ P.S.I.
 Final Closed In Period.....Minutes _____ (G) _____ P.S.I.
 Final Hydrostatic Pressure.....(H) _____ P.S.I.

DIAMOND TESTING

Pressure Survey Report

General Information

Company Name	RAYMOND OIL COMPANY, INC.	Job Number	M711
Well Name	JOAN DEEDS #1	Representative	MIKE COCHRAN
Unique Well ID	DST #3 PAWNEE 4617-4660	Well Operator	RAYMOND OIL COMPANY, INC.
Surface Location	SEC 9-6S-37W SHERMAN CO.KS.	Report Date	2014/09/24
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	KIM SHOEMAKER
		Test Unit	NO. 3

Test Information

Test Type	CONVENTIONAL		
Formation	DST #3 PAWNEE 4617-4660		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2014/09/24	Start Test Time	08:05:00
Final Test Date	2014/09/24	Final Test Time	19:45:00
		Well Fluid Type	01 Oil
Gauge Name	0063		
Gauge Serial Number			

Test Results

Remarks RECOVERED:

445' GIP
15' CO 100% OIL
1175' GMWO 36% GAS, 31% OIL, 22% WTR, 11% MUD
445' G&MCWO 2% GAS, 48% OIL, 48% WTR, 2% MUD
1890' VSOSGW ~100% GASSY WATER W/ A VERY THIN SCUM OF OIL
3525' TOTAL FLUID

GRAVITY: 38.7 @ 60 DEG

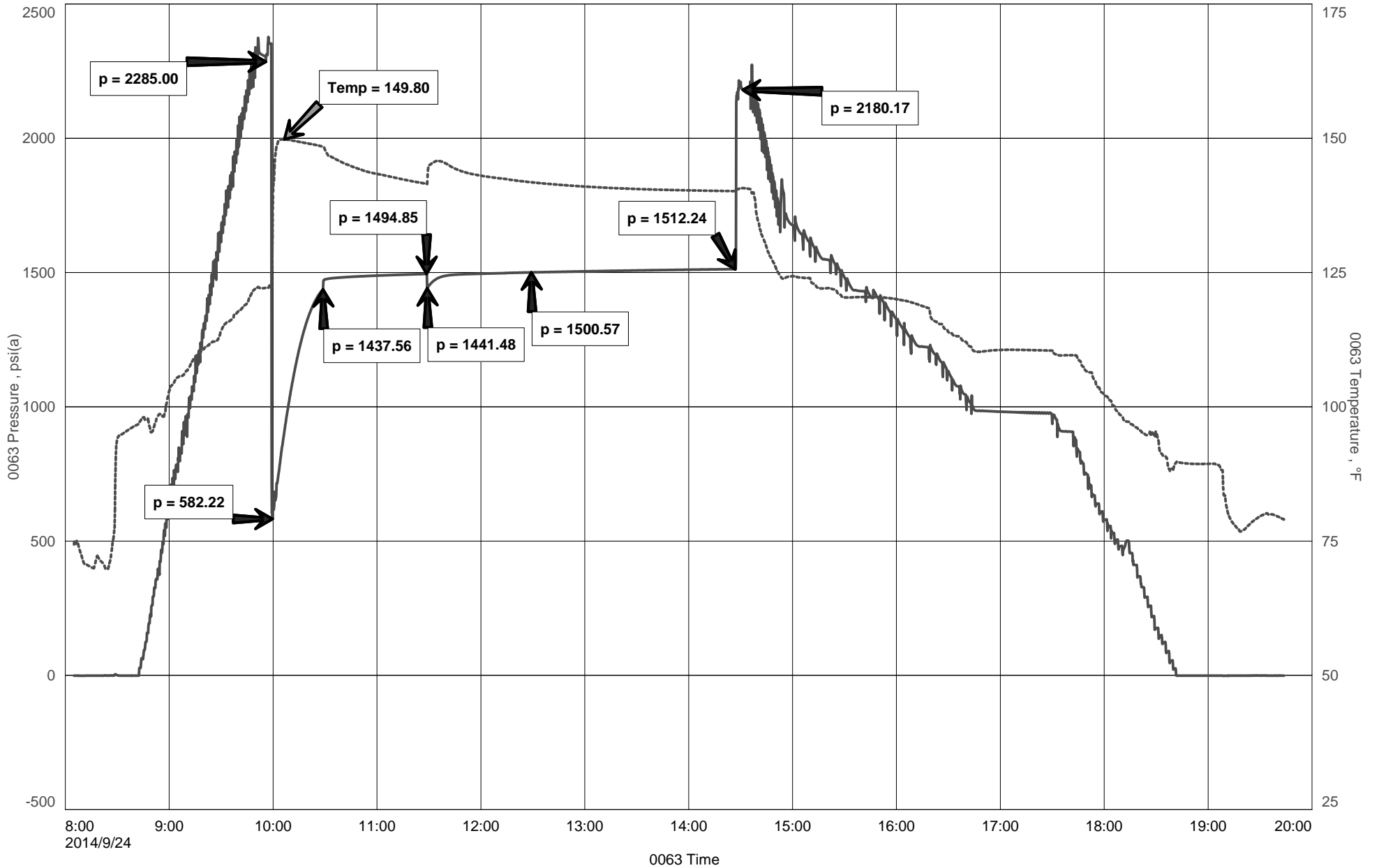
CHLOR: 10,000 PPM
PH: 7.0
RW: .70 @ 69

TOOL SAMPLE: MOSTLY GAS (& SOME WATERY OIL. EST.)

RAYMOND OIL COMPANY, INC.
DST #3 PAWNEE 4617-4660
Start Test Date: 2014/09/24
Final Test Date: 2014/09/24

JOAN DEEDS #1
Formation: DST #3 PAWNEE 4617-4660
Pool: WILDCAT
Job Number: M711

JOAN DEEDS #1





DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: 1JNDDSDST4

TIME ON: 1010
TIME OFF: 1935

Company RAYMOND OIL COMPANY, INC. Lease & Well No. #1 JOAN DEEDS
Contractor L.D.DRILLING, INC. RIG 1 Charge to RAYMOND OIL COMPANY, INC.
Elevation 3400 KB Formation JOHNSON Effective Pay _____ Ft. Ticket No. M712
Date 9/25/2014 Sec. 9 Twp. _____ 6 S Range _____ 37 W County SHERMAN State KANSAS
Test Approved By KIM SHOEMAKER Diamond Representative MIKE COCHRAN

Formation Test No. 4 Interval Tested from 4751 ft. to 4779 ft. Total Depth 4779 ft.
Packer Depth 4746 ft. Size 6 3/4 in. Packer depth NA ft. Size 6 3/4 in.
Packer Depth 4751 ft. Size 6 3/4 in. Packer depth NA ft. Size 6 3/4 in.

Depth of Selective Zone Set _____
Top Recorder Depth (Inside) 4733 ft. Recorder Number 0063 Cap. 5,000 P.S.I.
Bottom Recorder Depth (Outside) 4753 ft. Recorder Number E1150 Cap. 5,000 P.S.I.
Below Straddle Recorder Depth 4776 ft. Recorder Number 6884 Cap. 6,275 P.S.I.

Mud Type CHEM Viscosity 50 Drill Collar Length 0 ft. I.D. 2 1/4 in.
Weight 9.2 Water Loss 11.2 cc. Weight Pipe Length 0 ft. I.D. 2 7/8 in.
Chlorides 4,200 P.P.M. Drill Pipe Length 4719 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number 3 Test Tool Length 32 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NO Reversed Out NO Anchor Length 28 ft. Size 4 1/2-FH in.
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: SSB, BOB 10 MIN (NO BB)
2nd Open: SSB, BOB 13 MIN (NO BB)

Recovered 885 ft. of GMW 99% WTR, 1% MUD W/ SOME GASSY BUBBLES
Recovered 885 ft. of TOTAL FLUID
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____

Remarks: _____
PH: 7.0 RW: .42 @ 72 DEG CHLOR: 20,000 PPM
TOOL SAMPLE: _____

Time Set Packer(s) 12:30 P.M. ^{A.M.} P.M. Time Started Off Bottom 4:15 P.M. ^{A.M.} P.M. Maximum Temperature 152°F

Initial Hydrostatic Pressure..... (A) 2387 P.S.I.
Initial Flow Period..... Minutes 30 (B) 14 P.S.I. to (C) 202 P.S.I.
Initial Closed In Period..... Minutes 60 (D) 1052 P.S.I.
Final Flow Period..... Minutes 45 (E) 197 P.S.I. to (F) 406 P.S.I.
Final Closed In Period..... Minutes 90 (G) 1044 P.S.I.
Final Hydrostatic Pressure..... (H) 2244 P.S.I.

Diamond Testing shall not be liable for damages of any kind to 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 statement or opinion concerning the result 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.

DIAMOND TESTING

Pressure Survey Report

General Information

Company Name	RAYMOND OIL COMPANY, INC.	Job Number	M712
Well Name	#1 JOAN DEEDS	Representative	MIKE COCHRAN
Unique Well ID	DST#4 4751-4779 JOHNSON	Well Operator	RAYMOND OIL COMPANY, INC.
Surface Location	SEC.9-6S-37W SHERMAN CO.KS.	Report Date	2014/09/25
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	KIM SHOEMAKER
		Test Unit	NO. 3

Test Information

Test Type	CONVENTIONAL		
Formation	DST#4 4751-4779 JOHNSON		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2014/09/25	Start Test Time	10:10:00
Final Test Date	2014/09/25	Final Test Time	19:35:00
		Well Fluid Type	01 Oil
Gauge Name	0063		
Gauge Serial Number			

Test Results

Remarks RECOVERED:
885' GMW 99% WTR, 1% MUD W/ SOME GASSY BUBBLES
885' TOTAL FLUID

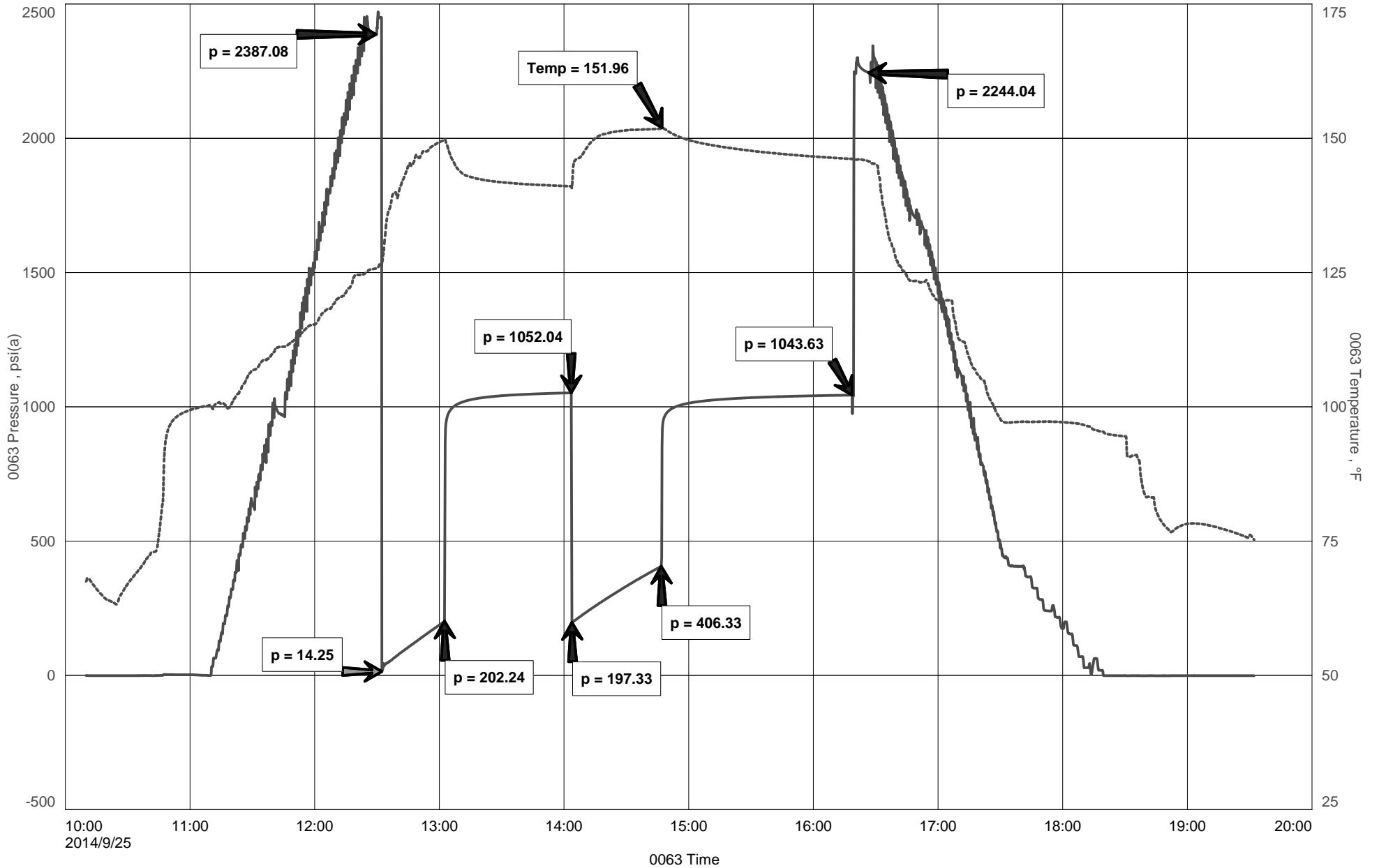
CHLOR: 20,000 PPM
PH:7.0
RW: .42 @ 72 DEG

TOOL SAMPLE: 100% WTR

RAYMOND OIL COMPANY, INC.
DST#4 4751-4779 JOHNSON
Start Test Date: 2014/09/25
Final Test Date: 2014/09/25

#1 JOAN DEEDS
Formation: DST#4 4751-4779 JOHNSON
Pool: WILDCAT
Job Number: M712

#1 JOAN DEEDS



KIM B. SHOEMAKER

CONSULTING GEOLOGIST

316-684-9709 * WICHITA, KS

GEOLOGIST'S REPORT

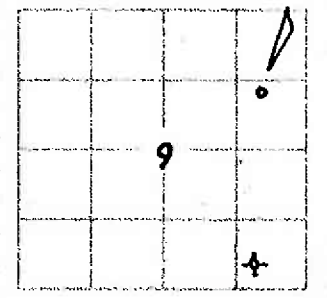
DRILLING TIME AND SAMPLE LOG

COMPANY RAYMOND OIL COMPANY, INC.
 LEASE # 1 JOAN DEEDS
 FIELD WILDCAT
 LOCATION 1582' FNL # 787' EEL
 SEC 9 T19SP 6s RGE 37w
 COUNTY SHERMAN STATE KANSAS
 CONTRACTOR L.D. DRILLING, INC.
 SPUD 9-16-14 COMP 9-27-14
 RTD 5030 LTD 5030
 MUD UP 3637 TYPE MUD CHEMICAL

ELEVATIONS
 KB 3400
 DF _____
 GI 3395
 Measurements Are All From 3400 KB
 CASING
 SURFACE 8 5/8" @ 303'
 PRODUCTION 5 1/2" @
 ELECTRICAL SURVEYS
 DUAL IND., N-DENS, MICRO, SONIC.

SAMPLES SAVED FROM 3800 TO 5030
 DRILLING TIME KEPT FROM 3800 TO 5030
 SAMPLES EXAMINED FROM 3800 TO 5030
 GEOLOGICAL SUPERVISION FROM 4100 TO 5030
 GEOLOGIST ON WELL KIM B. SHOEMAKER

FORMATION TOPS	LOG	SAMPLES
ANHYDRITE	3067+333	3072+328
B/ANH.	3102+298	3102+298
STOTLER	3920-520	3922-522
HEEBNER	4201-801	4206-806
LANSING	4257-857	4257-857
B/KC	4517-1117	4514-1114
PAWNEE	4632-1232	4633-1233
FORT SCOT	4696-1296	4695-1295
CHEROKEE	4722-1322	4723-1323
MISSISSIPPI	4930-1530	4930-1530



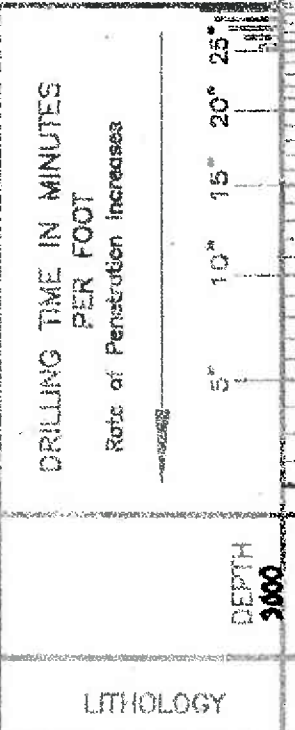
REMARKS

API: 15-181-20599

9-16-14 SPUD
 9-17 @ 306'
 9-18 @ 1764'
 9-19 @ 2800'
 9-20 @ 3606'
 9-21 @ 4150'
 9-22 @ 4450'
 9-23 @ 4589'
 9-24 @ 4660'
 9-25 @ 4779'
 9-26 @ 4938'
 9-27 @ 5030'

LEGEND

- Anhydrite
- Salt
- Sandstone
- Shale
- Carb sh
- Limestone
- Coal Lime
- Chert
- Dolomite



SAMPLE DESCRIPTIONS

REMARKS

ANHYDRITE 3072+328

B/ANH. 3102+298

3100

B/ANK 3102+298

3100

3200

3800

3900

Samples are tagged

Sh. Rd Silty

Sh. Silty. L. Sdy

Ls. T. Silty. Dm.

Sh. L.

Ls. T. Silty. Silty

Sh. Rd.

Ls. wt. Silty. Silty

Sh. Rd.

Sh. G.

STOTLER 3922-522

Ls. wt. Silty. Silty. Silty

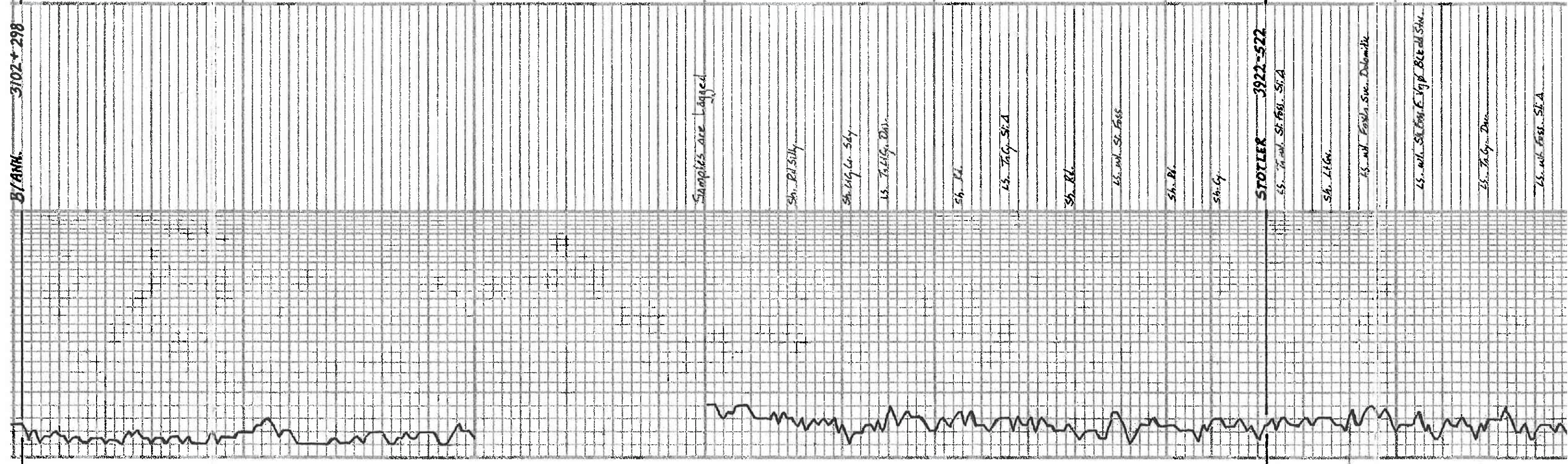
Sh. L. G.

Ls. wt. Fossil. Silty. Dolomite

Ls. wt. Silty. Silty. E. Silty. Blue Silty

Ls. T. Silty. Dm.

Ls. wt. Fossil. Silty



4000

4100

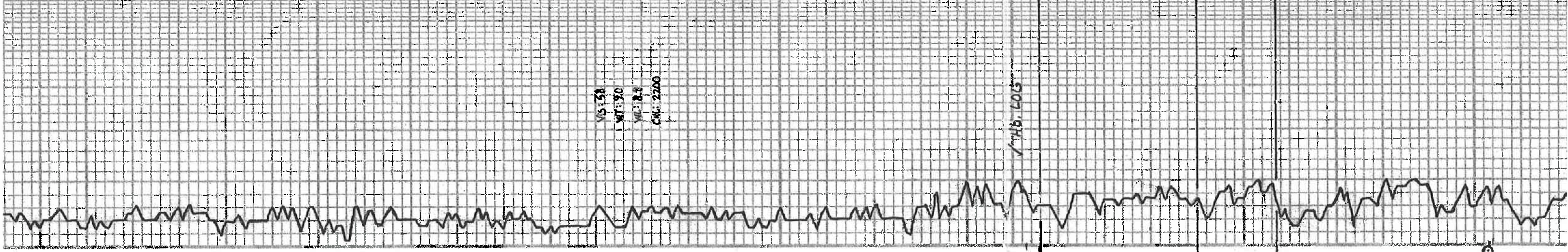
4200

4300

Sh. DEly
 ls. w/ Si. Foss.
 ls. clay w/ sh. Foss. sil. chly. w/ BLU. odd SM.
 ls. m. gy. sil. Foss. T. 22 2000 sh.
 Sh. PL.
 ls. w/ Foss. Calcite.
 ls. w/ VSI. Foss. SGA
 ls. T. SIA
 ls. w/ Si. Foss. Sil. chly.
 Sh. BLK.
 Sh. clay. Silty. Sgy.
 ls. w/ Si. Foss. w/ dd. sil. sh.
 Sh. clay.
 ls. T. gy. SIA
 Sh. gy.
 ls. T. 200 Foss. SIA
 ls. clay. 50 Foss. Sil. chly.
 Sh. BLK. HEENER 4206-806
 ls. w/ Si. Foss.
 Sh. clay. Silty.
 Sh. PL. Sgy.
 TORONTO
 A. M. T. gy. Foss.
 ls. w/ Si. Foss. Sil. chly.
 Sh. BLK.
 LANSING 4257-857
 ls. w/ Sh. Foss. F. T. Long P. No. 1000
 Soil. BLK. Foss. gy.
 Sgy. sh. L. G.
 Sh. PL.
 ls. w/ L. G. 50 Foss. Sil. F. P. V. 10
 BLK. hard. SW. T. P. (Chy. 200) No. 1000.
 Sh. PL. Purple
 ls. gy. Sil. Foss. Sil. chly.
 ls. BLK. Foss. Suc.

NS 158
 197130
 197130
 2200

✓ HB. L05

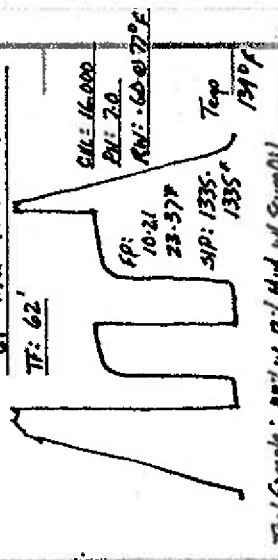


ls. Gy. Dol.
Sh. L. Blue
ls. Tan. Silty. P. V. G. BL. K. G. S.
ls. Tan. Silty. (Red. H. G.) No. 0.02
ls. Tan. Silty. Foss. Sh. A

MUNCIE CREEK 4372-972

Sh. BL
ls. Bl. USE Foss
Sh. Silty. Silty
ls. Tan. Silty. Sh. Chilly

DST (1) 4371-9950
15' OPEN: Blow built to 2 1/4"
2' OPEN: " " 2 1/2"
30' CO-45-75
Rec. 1' 1500 MAX. (21' Oil, 68' W. 33' M.)
6' MW (907' W. 107' M.)



Tool Sample: 88' W. R. 1' Mid of Sound 11

ls. Tan. Silty. P. V. G. BL. K. G. S.
Sh. BL

ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

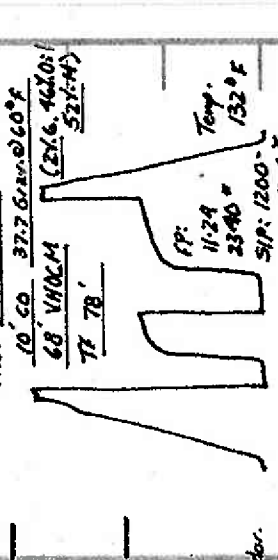
ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

ls. Tan. Silty. Foss. Sh. A. P. V. G. S.
No. 0.02

BIRC 4519-1114

Sh. Blue-Grey

DST (2) 4510-1589
15' OPEN: Blow built to 6 1/4"
2' OPEN: " " 1 1/2"
30' CO-45-90
Rec. 175' G.L.P.



Tool Sample: 67' G. 36% Oil 587' Oil

ls. Tan. Silty. Foss. Sh. Chilly

ls. Gy. Silty. Foss.

Sh. Gy. Silty

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

ls. Tan. Silty. Foss. Sh. A

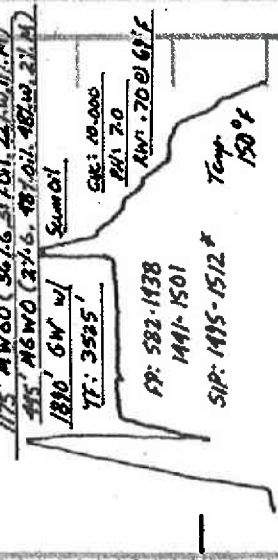
ls. Tan. Silty. Foss. Sh. A

ALLAMONT 'B' 4579-1179

Sh. Blue-Grey

VIS: 49
WT: 9.2
MC: 8.8
CIP: 3000

DST (3) 4617-4660
15' OPEN: Bottom bucket 38 min Sec.
2' OPEN: " " 1 1/2 min
30' CO-45-120
Rec. 115' G.L.P. 15' CO 38.7 GPM @ 60' P
115' MW 60 (36) G. 31' OI, 23' W. 11' M
45' MW 60 (37) G. 48' OI, 48' W. 21' M



Tool Sample: Mostly Gas w/ water oil.

ls. Tan. Silty. Foss. Sh. Chilly

ls. Tan. Silty. Foss. Sh. Chilly

ls. Tan. Silty. Foss. Sh. Chilly

ls. Tan. Silty. Foss. Sh. Chilly

4400

4500

4600

WT: 93
MC: 112
CUL: 4200

Alg. fosi.

Sh. Glsy.

LS. wt. Sh. Foss. Sh. A

Alg. fosi.

SA BL

FORT SCOT 4685-1295

LS. Foss. Sh. Foss. Sh. CAly.

4700

LS. Dregy. YSH. Fall

CHEROKEE 1723-1323
Sh. BL. Carb.

LS. Sh. Bl. Foss. Sh. A

LS. Lly. VSH. Foss. Sh. CAly.

DST (4)

DST (4) 4751-4779

150 PSI: Bottom bucket 10 min.
30-60-45-90

BS: None
OS: 13"

Sh. Glsy. Dregy.

LS. Sh. Foss. Sh. A

Sh. Glsy. Dregy. Sh. Foss. Sh. A

Sh. Glsy. Dregy. Sh. Foss. Sh. A

Sh. Glsy. Dregy. Sh. Foss. Sh. A

WT: 51
MC: 112
CUL: 3800

Sh. Glsy. Dregy.

4800

Sh. Purple. Shy.

Sh. Glsy. Dregy. Sh. Foss. Sh. A

Sh. Yellow. blue. Shy.

Shy. Sh. Yellow. Rd. Purple

LS. Foss. Sh. A

Sh. Blue-Gy. Shy.

Sh. Gy. Dregy.

Sh. Bl. Blue. Purple

LS. wt. Foss.

MISSISSIPPI 4930-1530

Dol. Bl. Foss. Sh. A

Dol. Bl. Foss. Sh. A

Sh. Glsy.

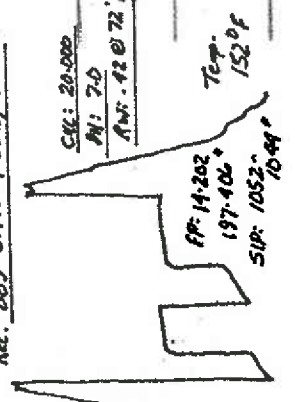
WT: 51
MC: 103
CUL: 4500

Dol. Gy. Dregy. Foss. Sh. A

LS. Gy.

Dol. Glsy. Shy.

Dol. G. Foss. Sh. A



Total Sample: 1002.4

4900

5000

RTD 5090-1630

VIS: 51
WT: 945
WV: 10.8
CAL: 1500

Sh. G. - 06/1/1

Sh. G. Blue - Purple

Δ wt. Fast.

Sh. G. LA
MISSISSIPPI 4930-1530

Dol. G. Ex. In. Suc.

Dol. G. Ex. In. w/ To. G. In.

Sh. G. G.

Dol. G. - 06/1/1 - Ex. In. w/ Dol. G. - Ind.

Δ G.

Dol. G. G. - Silty.

Dol. G. Ex. In. Dns.

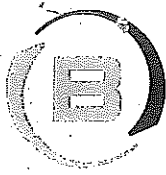
Dol. G. G. - V. Ex. In.

Δ wt. Fast.

Δ Δ

Δ Δ

Δ Δ



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 10746 A

DATE _____ TICKET NO. _____

DATE OF JOB: 10-15-11	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: L.D. DRILLING INC.		LEASE: JOHN DEERE		WELL NO. 1						
ADDRESS:		COUNTY: STELLMAN STATE: KS.								
CITY:		STATE:								
AUTHORIZED BY:		SERVICE CREW: K.G. MCCLAN, COLE								
		JOB TYPE: CIVIL - SQUEEZE								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
19901		19959	3				10/15			1000
		73768	3							1000
77686	7									1030
19905	7									1330
										1400
										765

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
07100C	COMMON CEMENT	SK	25		
07100C	COMMON CEMENT	SK	50		
07179	401-322	LB	12		
07105	0-411	LB	6		
P700	20/40 SUEK SAND	CUYD	2		
E100	HAZARD MITIGATION PICKUP	MI	175		
E101	HEAVY EQUIPMENT HAULAGE	MI	350		
E113	BULK DELIVERY	TON	621		
02205	DEPTH CHARGES 4001-5000'	EA	1		
02240	HAZARDOUS WASTE HANDLING CHARGE	SK	75		
02500	SQUEEZE MINERAL OIL	EA	1		
5103	SEMI-TRAILER SUPERVISOR	EA	1		

CHEMICAL / ACID DATA:			

SUB TOTAL			
SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL			
NET PRICE		7639.05	

SERVICE REPRESENTATIVE: [Signature]	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: L.D. DRILLING BY: KEVIN [Signature]
FIELD SERVICE ORDER NO.:	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer LD DRILLING	Lease No.	Date 10-15-14
Lease JUAN DE LOS RIOS	Well # 1	
Field Order # 10146	Station PRATT, KS.	Casing 3 1/2
Type Job CIUV - SQUEEZE	Depth	County SHERMAN
	Formation	State KS
		Legal Description 9-6-37

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 3 1/2	Tubing Size 2 7/8	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth	Depth	From 4536	To 4540	Pre Pad	Max			5 Min.
Volume 1.9	Volume 2.8	From 4640	To 4641	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 4880	Packer Depth 4455	From	To	Flush	Gas Volume			Total Load

Customer Representative JAKE	Station Manager KEVIN	Treater COOLEY
--	---------------------------------	--------------------------

Service Units 19907	77686-19905	19959-73768
Driver Names WG	McGILVER	COLE

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1000					ON LOCATION
1030		500	20	2 1/2	CIRC. SCALE OFF RBP SET RBP - 4880'
1100		1500	3	1	PSI TEST RBP - 1500# HELD
1115		300	25	2 1/2	SPOT SAND ON RBP - 100# WHAT FOIL SAND TO FALL SET PKR - 4455'
1200	500		4	2	LOAN ANN. SPOT CEMENT INT. RATE TBC - 0 AT 1400'
1230	500		15 +9 24	2	MIX 25 SR COMMON 1/2% FLA 322 MIX 50 SR COMMON PUMP 9 669 # H ₂ O - 1.8 KSI STOP CLOSE BYPASS ON PKR BLEW OUT STRIPPER HEAD RUBBER
	DEAD	0	9	1	START ISIP DOWN TBC
	"	500	9 1/2	1	LEADERS - TOOK 1/2 bbl.
	"	500	13	1	CEMENT ON TOP PERF
	"	600	18	1	COMMON ON TOP PERF
	"	800	25	1/2	25 bbl OUT - STOP SPALLING 65 SR COM DUP PAKS
1315	"	800	26	1/2	NEVER GOT ABOVE 800# RELEASE PSI - HELD

