



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1229619
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
-----------------------------------	-----------------	---

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: _____

1229619

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> _____	PRODUCTION INTERVAL: _____ _____
--	---	---

Form	ACO1 - Well Completion
Operator	Jones Oil, LLC
Well Name	Miller 1
Doc ID	1229619

All Electric Logs Run

dual induction
micro
sonic
porosity

Form	ACO1 - Well Completion
Operator	Jones Oil, LLC
Well Name	Miller 1
Doc ID	1229619

Tops

Name	Top	Datum
Heeb	3353	-1445
douglas	3390	-1482
BL	3490	-1582
KC	3506	-1598
BKC	3745	-1837
viola	3864	-1956
Simp	3902	-1994
ARB	3958	-2050



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Jones Oil, LLC.

13-23s-14w Stafford Co., Ks.

112 N. Gray
St. John, Ks. 67576

Miller #1

Job Ticket: 54147

DST#: 2

ATTN: Keaton Jones

Test Start: 2014.09.13 @ 22:36:08

GENERAL INFORMATION:

Formation: **Lansing ' H'**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 01:25:38

Time Test Ended: 06:37:38

Test Type: Conventional Bottom Hole (Reset)

Tester: Matt Smith

Unit No: 53

Interval: 3622.00 ft (KB) To 3640.00 ft (KB) (TVD)

Reference Elevations: 1908.00 ft (KB)

Total Depth: 3640.00 ft (KB) (TVD)

1903.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

Serial #: 6773 Inside

Press @ RunDepth: 83.54 psig @ 3623.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.09.13

End Date:

2014.09.14

Last Calib.: 2014.09.14

Start Time: 22:36:13

End Time:

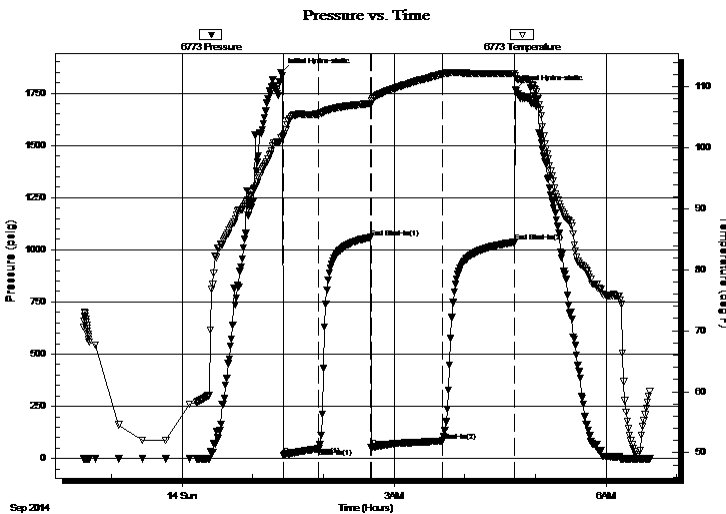
06:37:37

Time On Btm: 2014.09.14 @ 01:23:53

Time Off Btm: 2014.09.14 @ 04:42:53

TEST COMMENT: IF: Weak blow . Surf., - 3".
IS: No blow .
FF: Weak blow . Surf., - 3".
FS: No blow .

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1849.74	101.62	Initial Hydro-static
2	16.56	101.80	Open To Flow (1)
32	47.56	105.60	Shut-In(1)
76	1059.14	107.29	End Shut-In(1)
77	52.15	107.23	Open To Flow (2)
137	83.54	112.10	Shut-In(2)
199	1036.01	112.20	End Shut-In(2)
199	1766.60	111.91	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
60.00	MCW 10% m 90% w	0.30
60.00	SOMCW 10% m 90% w	0.30
20.00	SOMCW 15% m 85% w	0.25
0.00	RW .33 @ 49 = 32000 chlorides	0.00

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Jones Oil, LLC.

13-23s-14w Stafford Co., Ks.

112 N. Gray
St. John, Ks. 67576

Miller #1

Job Ticket: 54147

DST#: 2

ATTN: Keaton Jones

Test Start: 2014.09.13 @ 22:36:08

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:

32000 ppm

Viscosity: 60.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.79 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 6000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
60.00	MCW 10%m 90%w	0.295
60.00	SOMCW 10%m 90%w	0.295
20.00	SOMCW 15%m 85%w	0.253
0.00	RW .33 @ 49 = 32000 chlorides	0.000

Total Length: 140.00 ft

Total Volume: 0.843 bbl

Num Fluid Samples: 0

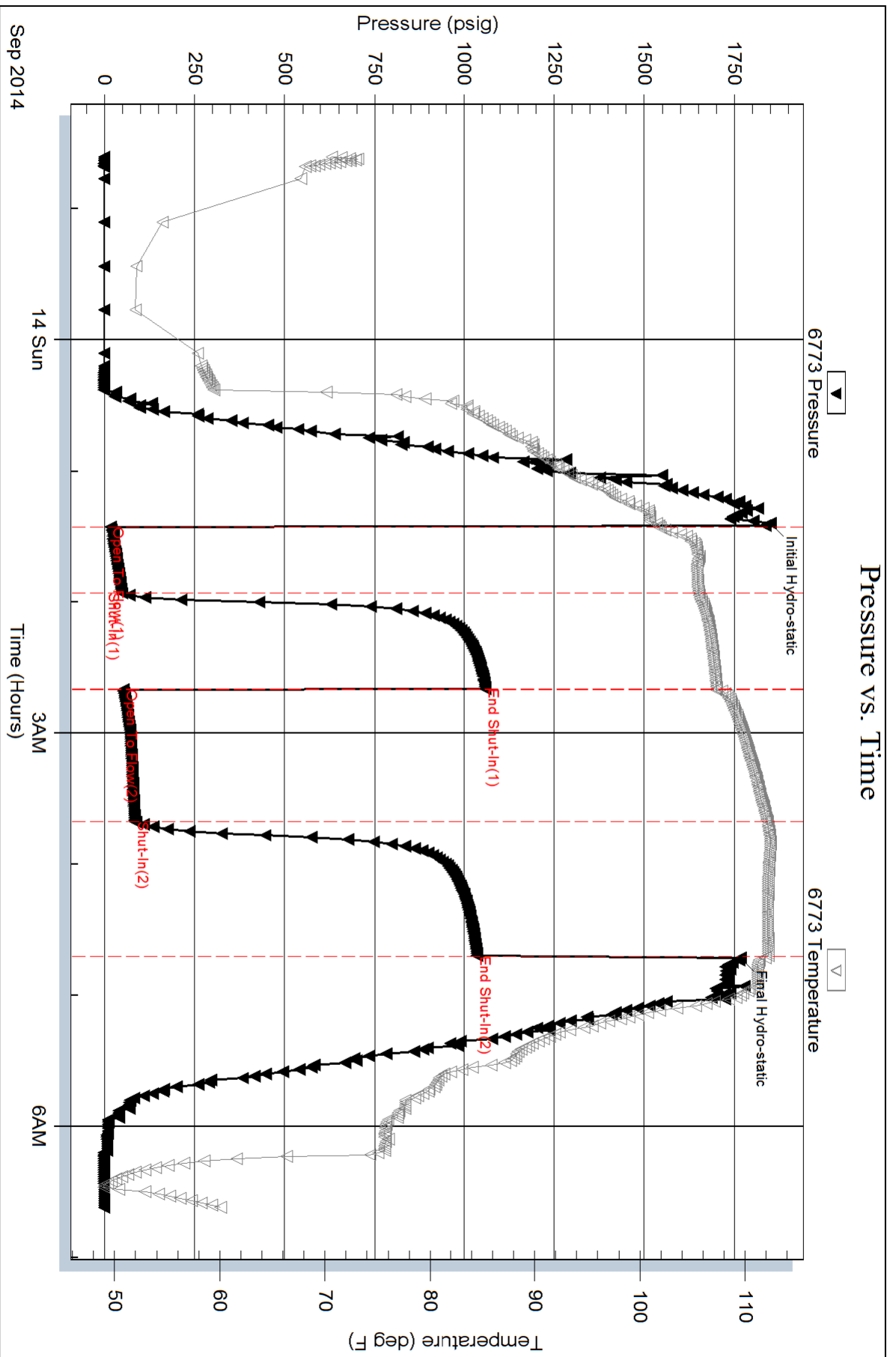
Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments: RW is .33 @ 49 degrees = 32,000 chlorides.





TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Jones Oil, LLC.

13-23s-14w Stafford Co., Ks.

112 N. Gray
St. John, Ks. 67576

Miller #1

Job Ticket: 54148

DST#: 3

ATTN: Keaton Jones

Test Start: 2014.09.14 @ 16:05:09

GENERAL INFORMATION:

Formation: **Lansing ' J&K '**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 18:23:54

Time Test Ended: 00:14:09

Test Type: Conventional Bottom Hole (Reset)

Tester: Matt Smith

Unit No: 53

Interval: 3660.00 ft (KB) To 3703.00 ft (KB) (TVD)

Reference Elevations: 1908.00 ft (KB)

Total Depth: 3703.00 ft (KB) (TVD)

1903.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

Serial #: 6773 Inside

Press @ Run Depth: 93.19 psig @ 3661.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.09.14

End Date:

2014.09.15

Last Calib.: 2014.09.15

Start Time: 16:05:14

End Time:

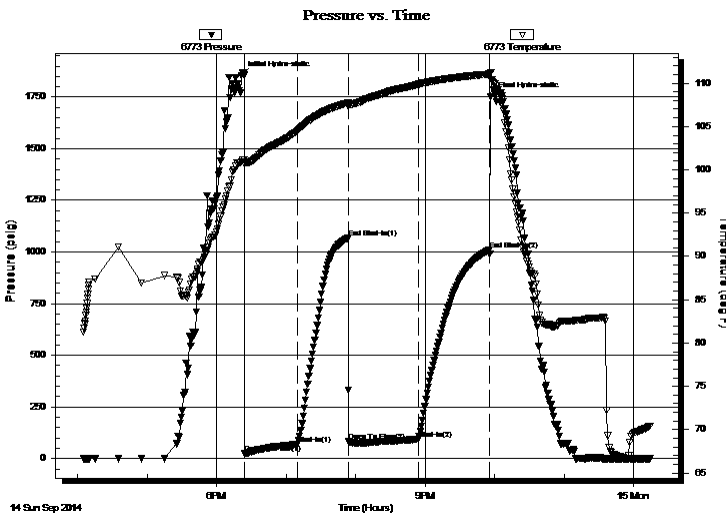
00:14:08

Time On Btm: 2014.09.14 @ 18:21:39

Time Off Btm: 2014.09.14 @ 21:56:39

TEST COMMENT: IF: Strong blow . B.O.B. in 39 mins.
IS: Weak blow . Surf., - 1/4". Dead in 40 mins.
FF: Strong blow . B.O.B. in 43 1/2 mins.
FS: Weak blow . Surf., - 1/8". In 11 mins.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1852.87	100.92	Initial Hydro-static
3	22.97	100.64	Open To Flow (1)
48	68.52	104.53	Shut-In(1)
92	1067.84	107.70	End Shut-In(1)
93	82.02	107.54	Open To Flow (2)
153	93.19	109.86	Shut-In(2)
214	1010.51	111.05	End Shut-In(2)
215	1752.41	111.25	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
60.00	GOMCW 2%g 28%o 25%m 45%w	0.30
60.00	GOWCM 3%g 17%o 30%w 50%m	0.30
45.00	WOCM 10%w 45%o 45%m	0.60
0.00	305' G.I.P. 100%g	0.00
0.00	RW .21 @ 67 = 38000 chlorides	0.00

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Jones Oil, LLC.

13-23s-14w Stafford Co., Ks.

112 N. Gray
St. John, Ks. 67576

Miller #1

Job Ticket: 54148

DST#: 3

ATTN: Keaton Jones

Test Start: 2014.09.14 @ 16:05:09

Mud and Cushion Information

Mud Type: Gel Chem
Mud Weight: 9.00 lb/gal
Viscosity: 52.00 sec/qt
Water Loss: 9.59 in³
Resistivity: ohm.m
Salinity: 8000.00 ppm
Filter Cake: 0.20 inches

Cushion Type:
Cushion Length: ft
Cushion Volume: bbl
Gas Cushion Type:
Gas Cushion Pressure: psig

Oil API: deg API
Water Salinity: 38000 ppm

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
60.00	GOMCW 2%g 28%o 25%m 45%w	0.295
60.00	GOWCM 3%g 17%o 30%w 50%m	0.295
45.00	WOCM 10%w 45%o 45%m	0.604
0.00	305' G.I.P. 100%g	0.000
0.00	RW .21 @ 67 = 38000 chlorides	0.000

Total Length: 165.00 ft Total Volume: 1.194 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #: none

Laboratory Name: Laboratory Location:

Recovery Comments: RW is .21 @ 67 degrees = 38000 chlorides.

Serial #: 6773

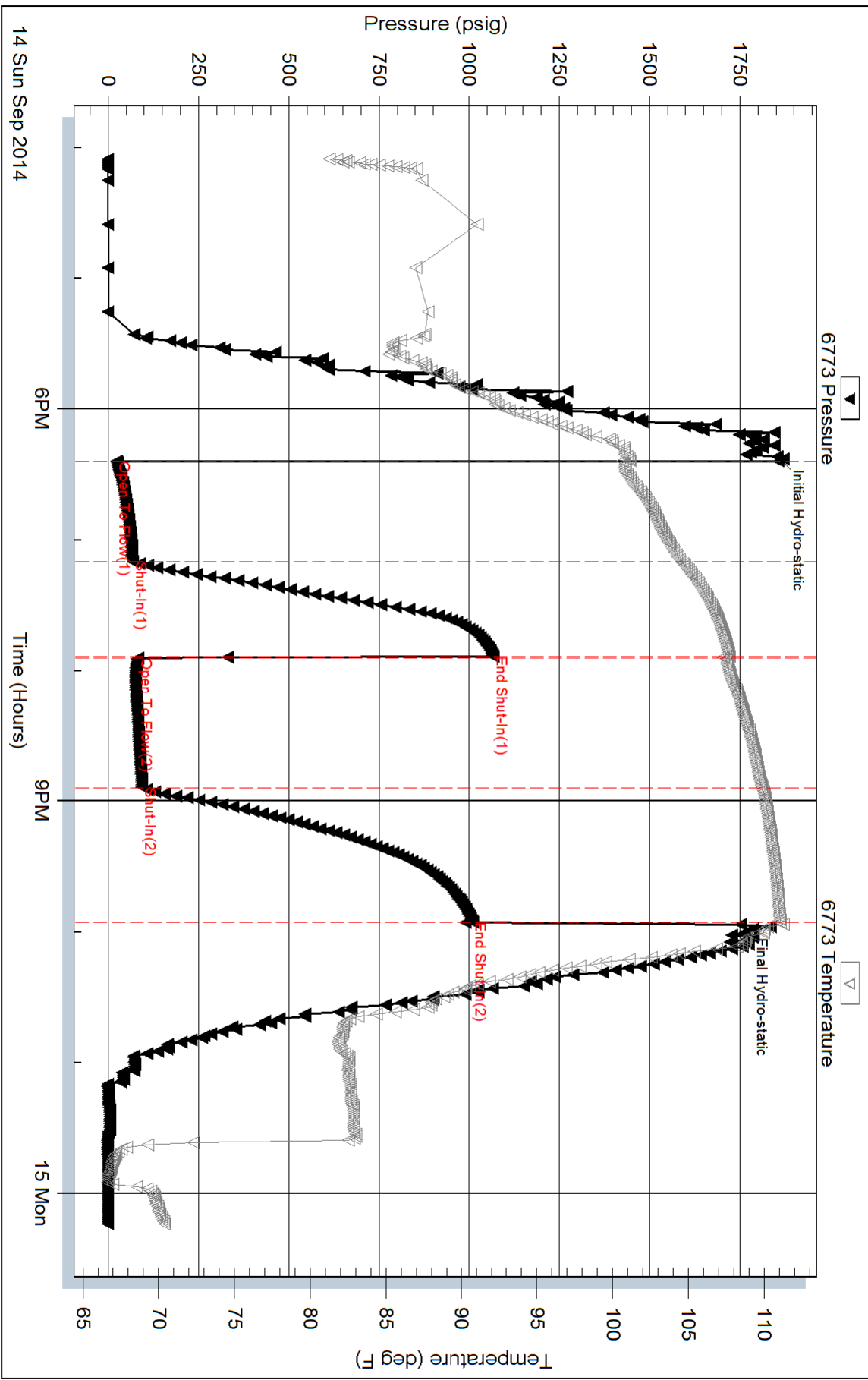
Inside

Jones Oil, LLC.

Miller #1

DST Test Number: 3

Pressure vs. Time



Trilobite Testing, Inc

Ref. No: 54148

Printed: 2014.09.15 @ 02:15:15



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Jones Oil, LLC.

13-23s-14w Stafford Co., Ks.

112 N. Gray
St. John, Ks. 67576

Miller #1

Job Ticket: 54149

DST#: 4

ATTN: Keaton Jones

Test Start: 2014.09.15 @ 16:56:48

GENERAL INFORMATION:

Formation: **Viola**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 20:28:18

Time Test Ended: 00:20:48

Test Type: Conventional Bottom Hole (Reset)

Tester: Matt Smith

Unit No: 53

Interval: 3865.00 ft (KB) To 3903.00 ft (KB) (TVD)

Reference Elevations: 1908.00 ft (KB)

Total Depth: 3540.00 ft (KB) (TVD)

1903.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

Serial #: 6773 Inside

Press @ Run Depth: 27.90 psig @ 3866.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.09.15 End Date: 2014.09.16

Last Calib.: 2014.09.16

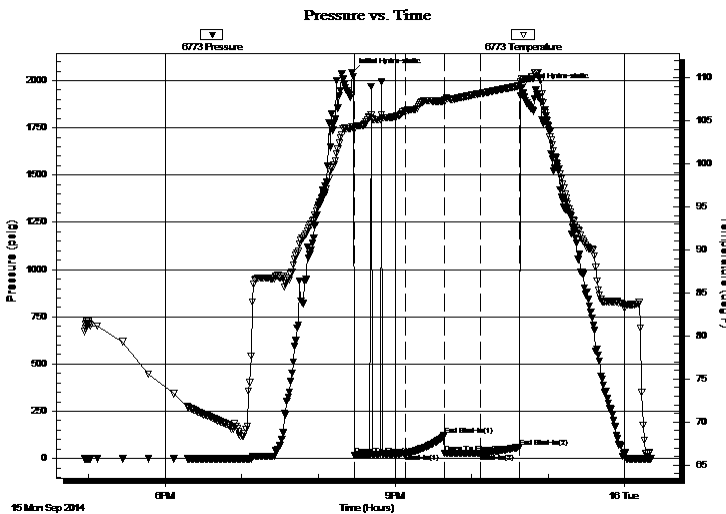
Start Time: 16:56:53 End Time: 00:20:47

Time On Btm: 2014.09.15 @ 20:26:18

Time Off Btm: 2014.09.15 @ 22:39:18

TEST COMMENT: IF: Weak blow . Surf., - 1/4". Slid 1.5'. Flushed twice.
IS: No blow .
FF: Weak blow . Surf., -1/4". Dying back to 1/8".
FS: No blow .

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2043.15	104.27	Initial Hydro-static
2	18.27	104.01	Open To Flow (1)
42	26.44	106.14	Shut-In(1)
73	121.38	107.32	End Shut-In(1)
73	27.01	107.30	Open To Flow (2)
101	27.90	108.17	Shut-In(2)
132	60.77	109.05	End Shut-In(2)
133	1963.63	109.86	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	GOCM 1%g 1%o 98%m	0.05

Gas Rates

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

* Recovery from multiple tests



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Jones Oil, LLC.

13-23s-14w Stafford Co., Ks.

112 N. Gray
St. John, Ks. 67576

Miller #1

Job Ticket: 54149

DST#: 4

ATTN: Keaton Jones

Test Start: 2014.09.15 @ 16:56:48

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:

7000 ppm

Viscosity: 54.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 9.19 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 7000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
10.00	GOCM 1%g 1%o 98%m	0.049

Total Length: 10.00 ft Total Volume: 0.049 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

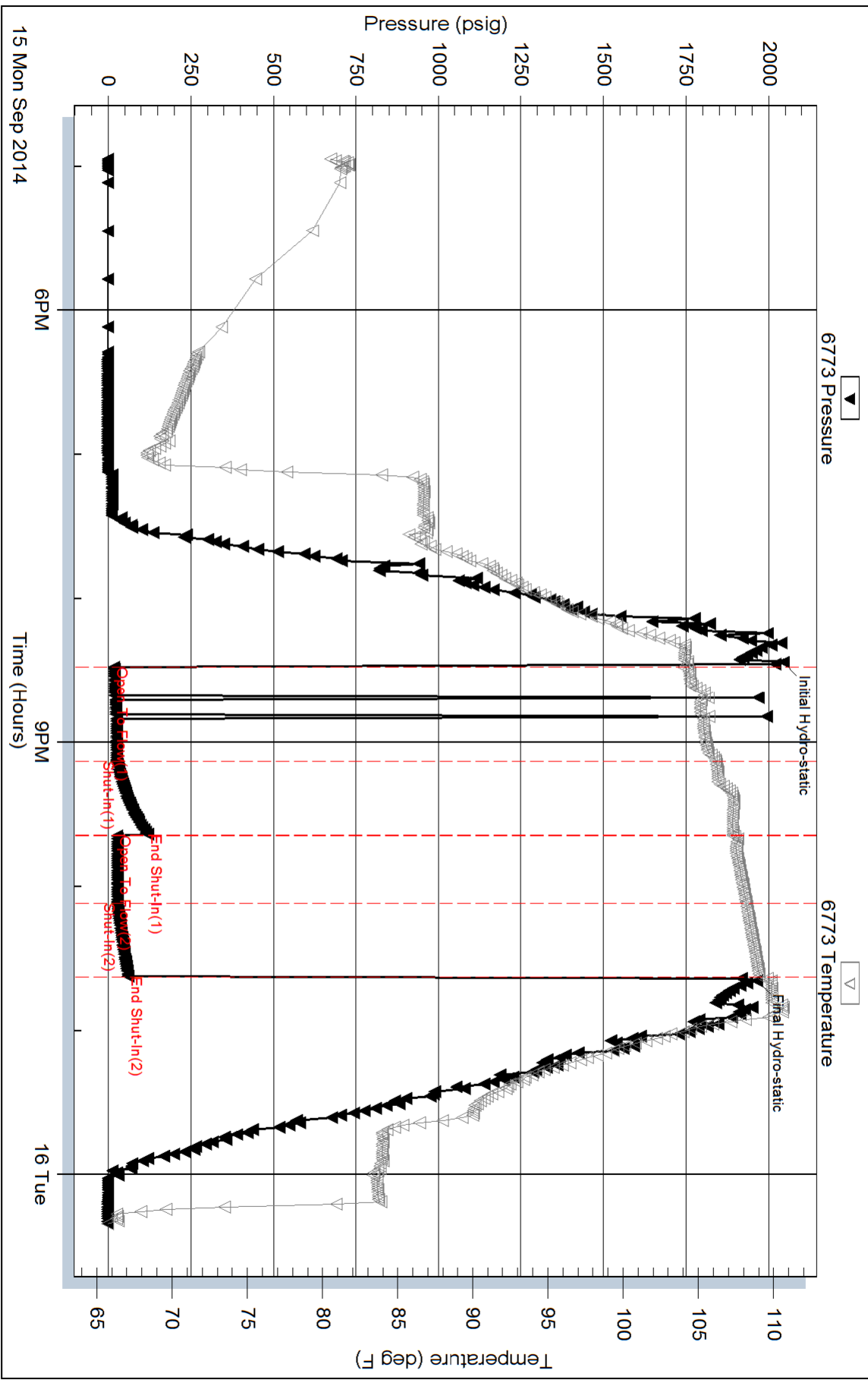
Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Jones Oil, LLC.

13-23s-14w Stafford Co., Ks.

112 N. Gray
St. John, Ks. 67576

Miller #1

Job Ticket: 54150

DST#: 5

ATTN: Keaton Jones

Test Start: 2014.09.16 @ 10:05:42

GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 12:46:42

Time Test Ended: 18:38:42

Test Type: Conventional Bottom Hole (Reset)

Tester: Matt Smith

Unit No: 53

Interval: 3954.00 ft (KB) To 3963.00 ft (KB) (TVD)

Reference Elevations: 1908.00 ft (KB)

Total Depth: 3963.00 ft (KB) (TVD)

1903.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

Serial #: 6773 Inside

Press@RunDepth: 99.99 psig @ 3955.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.09.16

End Date:

2014.09.16

Last Calib.:

2014.09.16

Start Time: 10:05:47

End Time:

18:38:42

Time On Btm:

2014.09.16 @ 12:45:12

Time Off Btm:

2014.09.16 @ 16:23:12

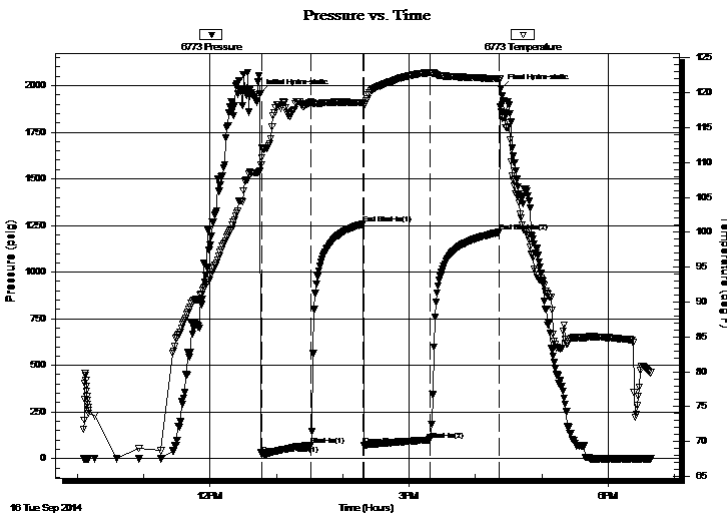
TEST COMMENT: IF: Fair blow . Surf., - 5 1/2".

IS: No blow .

FF: Fair blow . Surf., - 6 1/4".

FS: No blow .

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1955.62	108.73	Initial Hydro-static
2	21.89	110.65	Open To Flow (1)
46	70.08	118.64	Shut-In(1)
94	1258.17	118.54	End Shut-In(1)
95	72.63	118.27	Open To Flow (2)
154	99.99	122.91	Shut-In(2)
216	1214.06	121.97	End Shut-In(2)
218	1982.99	117.29	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
60.00	GOMCW 1%g 12%o 12%m 75%w	0.30
60.00	OMCW 15%o 15%m 70%w	0.30
31.00	GOMCW 1%g 14%o 30%m 55%w	0.41
31.00	CO 100%o	0.43
5.00	CO 100%o	0.07

Gas Rates

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

* Recovery from multiple tests



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Jones Oil, LLC.

13-23s-14w Stafford Co., Ks.

112 N. Gray
St. John, Ks. 67576

Miller #1

Job Ticket: 54150

DST#: 5

ATTN: Keaton Jones

Test Start: 2014.09.16 @ 10:05:42

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

30 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

10500 ppm

Viscosity: 66.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 10.19 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 7000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
60.00	GOMCW 1%g 12%o 12%m 75%w	0.295
60.00	OMCW 15%o 15%m 70%w	0.295
31.00	GOMCW 1%g 14%o 30%m 55%w	0.408
31.00	CO 100%o	0.435
5.00	CO 100%o	0.070

Total Length: 187.00 ft Total Volume: 1.503 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

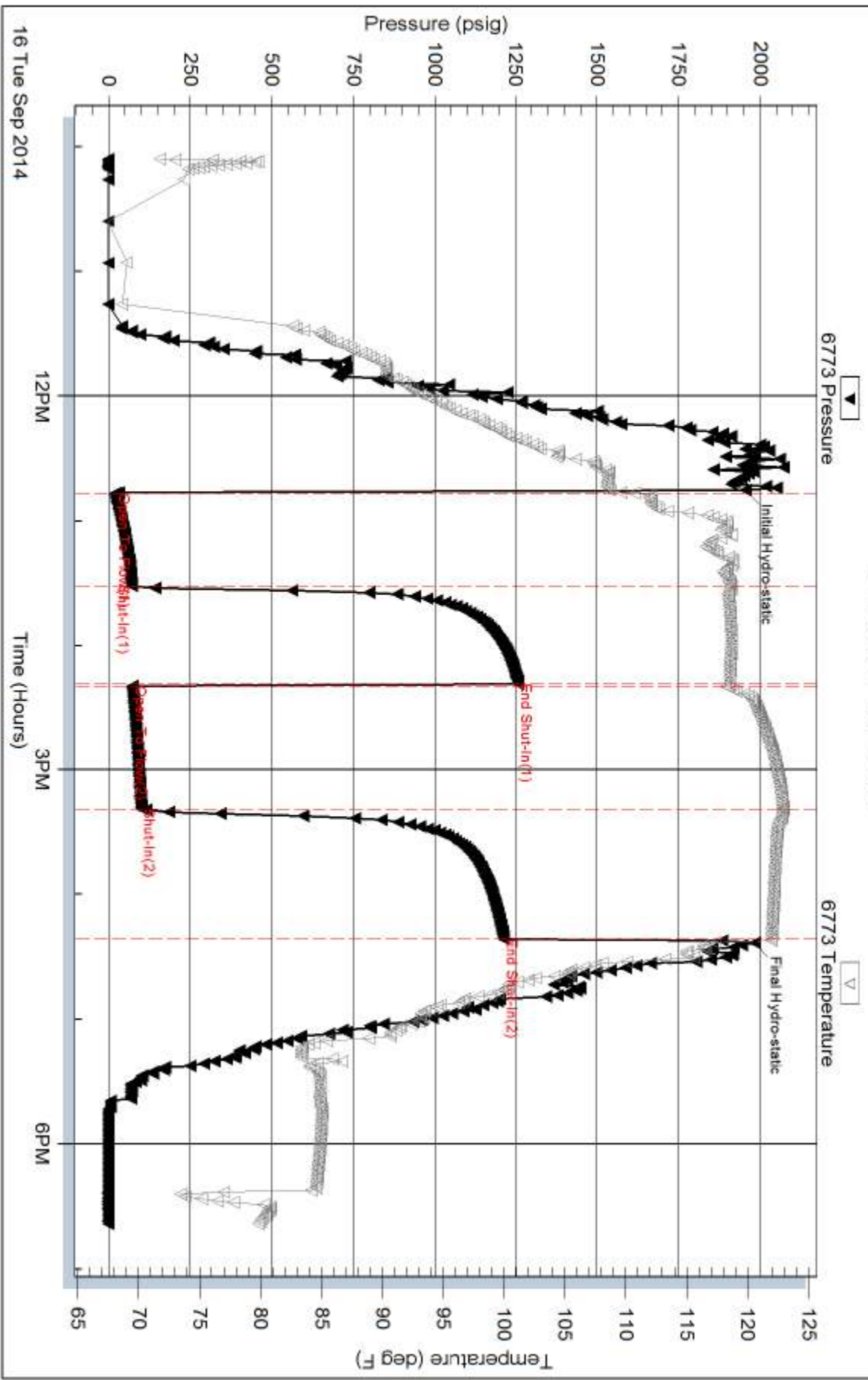
Laboratory Name:

Laboratory Location:

Recovery Comments: Gravity 32.2 @ 88 degrees. Corrected 30 @ 60 degrees.

RW .50 @ 83 degrees = 10,500 chlorides

Pressure vs. Time



1718 11132 A



10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

13-23-14

DATE _____ TICKET NO. _____

DATE OF JOB 9-9-14		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 Steve Jones				LEASE Miller				1 WELL NO.	
ADDRESS				COUNTY Stafford				STATE KS	
CITY				STATE				SERVICE CREW Mike Riley Joe	
AUTHORIZED BY				JOB TYPE: CNW Surface					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
77686-19905	45 min						9-9-14	AM	5:15
19959-73768	45 min							PM	7:15
28443								AM	11:15
								PM	12:00
								AM	13:00
								PM	
						MILES FROM STATION TO WELL	30		

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
CP 101	A-con Blend common	SK	175		3,150 00
CP 100c	Common cement	SK	175		2,800 00
CC 102	cell of lake	lb	88		325 60
CC 109	Calcium chloride	lb	825		866 25
CF 105	TOP Rubber Plug	eq	1		225 00
E 100	Pickup miLeage	mi	30		137 50
E 101	Heavy miLeage	mi	60		420 00
E 113	BULK delivery	TM	495		1,089 00
CE 201	Depth Charge	4hr	1		1,200 00
CE 240	Mixing charge	SK	350		490 00
CE 504	Plug container	JOB	1		250 00
S 003	supervisor	eq	1		175 00

SUB TOTAL 8,561 17

CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE *[Signature]*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *[Signature]*
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

0040767306
FIELD SERVICE TICKET

1718 11322 A

13-23-14

DATE _____ TICKET NO. _____

DATE OF JOB: 9-17-14	DISTRICT: _____	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: Steve Jones	LEASE: Miller						WELL NO.: 1		
ADDRESS: _____	COUNTY: Stafford	STATE: K3							
CITY: _____	STATE: _____	SERVICE CREW: Scott, Josh, Mike							
AUTHORIZED BY: Steve Jones	JOB TYPE: 5 1/2 Long string								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM PM	TIME
36870	.75					ARRIVED AT JOB	9-17-14	AM	3:00
27463	.75					START OPERATION	9-17-14	AM	10:05
70959 19918	.75					FINISH OPERATION	9-17-14	AM	10:50
						RELEASED	9-17-14	AM	11:30
MILES FROM STATION TO WELL									

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

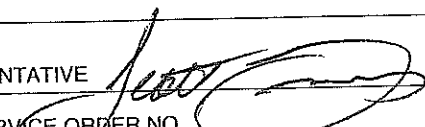
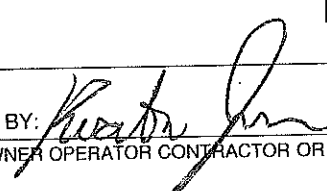
The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. 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: 
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP105	AA2 cement	SK	175		2975 00
CP103	60/40 POZ	SK	30		360 00
CC102	Celloflake	lb	51		148 70
CC105	C-41P	lb	33		132 00
CC111	SAH	lb	868		434 00
CC112	Cement Friction Reducer	lb	50		300 00
CC115	C-44	lb	165		849 75
CC129	FIA 322	lb	83		672 50
CC201	Gilsonite	lb	875		586 75
CF607	Batch Down Plug + Baffle 5 1/2	EA	1		400 00
CF1251	Auto Fill Float shoe 5 1/2	EA	1		360 00
CF1651	Turbolizers 5 1/2	EA	6		660 00
CF1901	Basket 5 1/2	EA	2		580 00
E100	Light Mileage pickup	MI	30		127 50
E101	Heavy Equipment Mileage	MI	60		420 00
E113	Drop & Bulk Delivery	TM	287		630 30
CE200	Blending & Mixing Charge	SK	205		287 00
CE501	Casing Sealant Rental	cu	1		200 00
CE205	Depth Charge 4001'-5000'	4hr	1		2520 00
SUB-TOTAL					

CHEMICAL / ACID DATA:			

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 <i>Steve Jones</i>		Lease No.		Date	
Lease <i>Miller</i>		Well # <i>1</i>		<i>9-17-14</i>	
Field Order # <i>11322A</i>	Station <i>Pratt</i>	Casing <i>5 1/2</i>	Depth <i>4034</i>	County <i>Stafford</i>	State <i>KS</i>
Type Job <i>5 1/2 Long string cna</i>			Formation	Legal Description <i>13 23 14</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
<i>5 1/2</i>				Pre Pad		Max		5 Min.
Depth <i>4034</i>	Depth	From	To	Pad		Min		10 Min.
Volume <i>96</i>	Volume	From	To	Frac		Avg		15 Min.
Max Press <i>2000</i>	Max Press	From	To			HHP Used		Annulus Pressure
Well Connection <i>5 1/2</i>	Annulus Vol.	From	To	Flush		Gas Volume		Total Load
Plug Depth	Packer Depth	From	To					

Customer Representative <i>Steve Jones</i>	Station Manager <i>Kevin Gordley</i>	Treater <i>Scott Graves</i>
--	--------------------------------------	-----------------------------

Service Units	<i>88470</i>	<i>27463</i>	<i>70454</i>	<i>19914</i>					
Driver Names	<i>Scott</i>	<i>Mike</i>	<i>Josh</i>						

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>3:00</i>					<i>On Location Safety meeting Rig up</i>
<i>2:00</i>					<i>Run Float Equipment</i>
<i>9:00</i>					<i>Circulate well 1 hour</i>
<i>10:05</i>	<i>0</i>		<i>5</i>	<i>4</i>	<i>pump spacer 1120</i>
<i>10:06</i>	<i>150</i>		<i>12</i>	<i>4</i>	<i>pump 500 gallons Super flush</i>
<i>10:09</i>	<i>150</i>		<i>5</i>	<i>5</i>	<i>pump spacer 1120</i>
<i>10:16</i>	<i>200</i>			<i>5.5</i>	<i>Start mixing 175 sacks AA2 cement</i>
<i>10:18</i>	<i>0</i>		<i>44</i>		<i>Finished Mixing cement</i>
<i>10:19</i>					<i>Wash pump & lines</i>
<i>10:20</i>					<i>Drop plug</i>
<i>10:21</i>	<i>150</i>			<i>6.2</i>	<i>Start Displacement</i>
<i>10:34</i>	<i>400</i>		<i>68</i>	<i>6</i>	<i>lift pressure</i>
<i>10:37</i>	<i>700</i>		<i>18</i>	<i>3.5</i>	<i>Reduce Rate</i>
<i>10:40</i>	<i>700</i>		<i>12</i>		<i>Plug landed</i>
<i>10:41</i>	<i>1500</i>				<i>Pressure up set plug</i>
<i>10:43</i>	<i>0</i>				<i>Release pressure NO Returns</i>
<i>10:50</i>					<i>Plug Rat hole 30 sacks 60/100 P02</i>