



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1234131
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: _____



1234131

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: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	KORIEL UNIT 2-22
Doc ID	1234131

Tops

Name	Top	Datum
ANHYDRITE	870	+1055
BASE ANHYDRITE	888	+1037
TOPEKA	2877	-952
HEEBNER	3115	-1190
BROWN LIME	3188	-1263
LANSING	3198	-1273
BASE KANSAS CITY	3402	-1477
ARBUCKLE	3449	-1529



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: Koriel Unit 2-22 Dst 1

TIME ON: 09:45
TIME OFF: 15:35

Company LD Drilling Inc Lease & Well No. Koriel Unit 2-22
Contractor Petromark Drilling Rig 2 Charge to LD Drilling Inc
Elevation 1925 KB Formation L/KC "H-K" Effective Pay _____ Ft. Ticket No. RR111
Date Oct/30/2014 Sec. 22 Twp. 18 S Range 14 W County Barton State KANSAS
Test Approved By Kim Shoemaker Diamond Representative RICKY RAY

Formation Test No. 1 Interval Tested from 3317 ft. to 3397 ft. Total Depth 3397 ft.
Packer Depth 3312 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth 3317 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____
Top Recorder Depth (Inside) 3299 ft. Recorder Number 0062 Cap. 5000 P.S.I.
Bottom Recorder Depth (Outside) 3385 ft. Recorder Number 5954 Cap. 5000 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEM Viscosity 55 Drill Collar Length 123 ft. I.D. 2 1/4 in.
Weight 9.2 Water Loss 8 cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides 8300 P.P.M. Drill Pipe Length 3162 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number 8 Test Tool Length 32 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NA Reversed Out NA Anchor Length 80A (18P) 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: WSB " Built to 1/4 inch blow in 30 mins NOBB
2nd Open: NO BLOW NOBB

Recovered <u>2</u> ft. of <u>M</u> <u>100 % M</u>	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Remarks: <u>Tool Sample: 100% M</u>	Insurance
	Total

Time Set Packer(s) 11:47 AM A.M. P.M. Time Started Off Bottom 1:47 PM A.M. P.M. Maximum Temperature 104

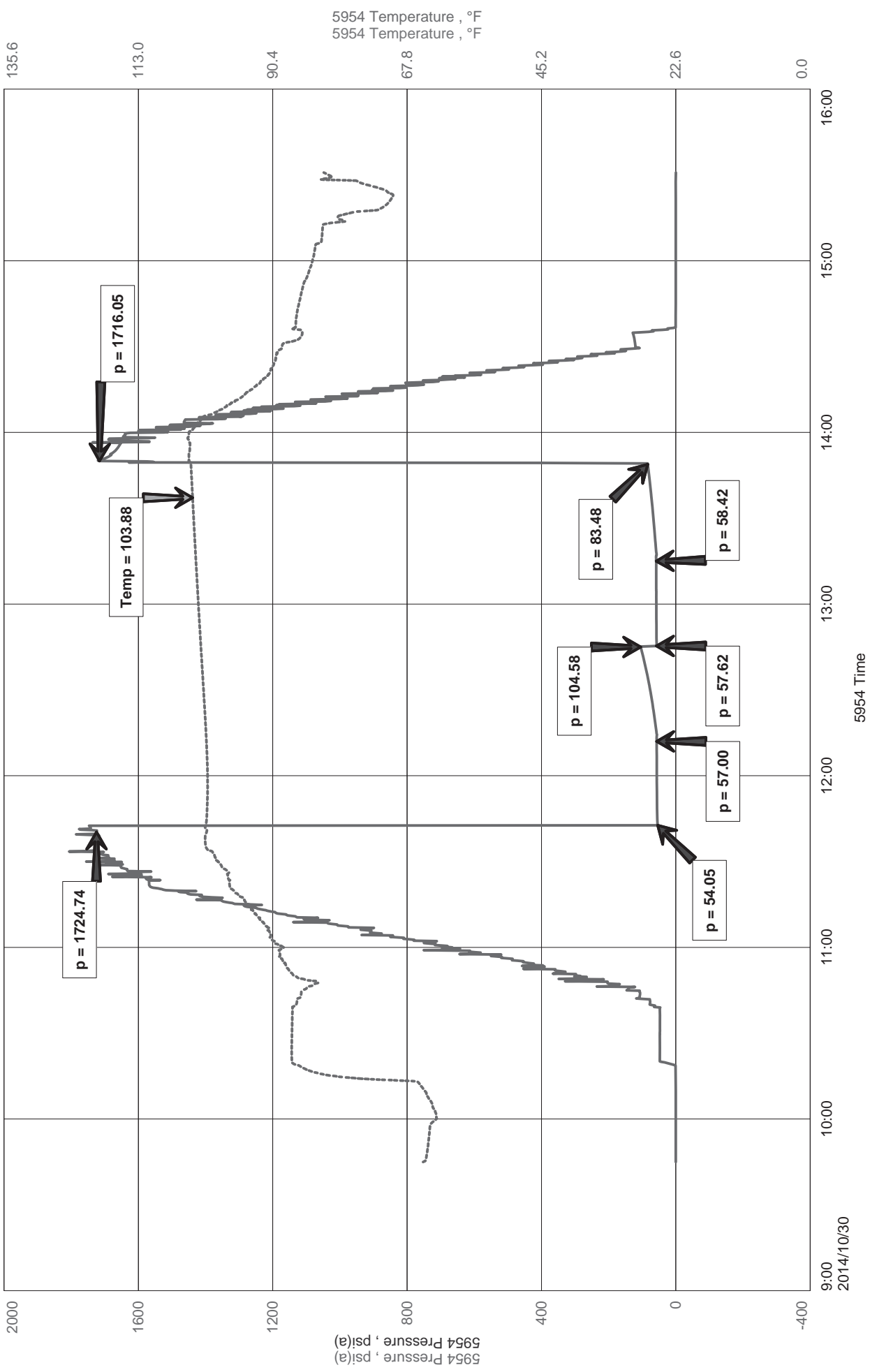
Initial Hydrostatic Pressure..... (A) 1724 P.S.I.
Initial Flow Period..... Minutes 30 (B) 54 P.S.I. to (C) 57 P.S.I.
Initial Closed In Period..... Minutes 30 (D) 105 P.S.I.
Final Flow Period..... Minutes 30 (E) 58 P.S.I. to (F) 58 P.S.I.
Final Closed In Period..... Minutes 30 (G) 83 P.S.I.
Final Hydrostatic Pressure..... (H) 1716 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.

L.D Drilling Inc
Dst1 L/KC "H-K" (3317-3397)
Start Test Date: 2014/10/30
Final Test Date: 2014/10/30

Koriel Unit 2-22
Formation: Dst1 L/KC "H-K" (3317-3397)
Pool: Infield
Job Number: RR111

Koriel Unit 2-22





Diamond Testing LLC
 P.O. Box 157
 HoisingtonKS 67544

Ricky Ray - Tester
 (620) 617-7261

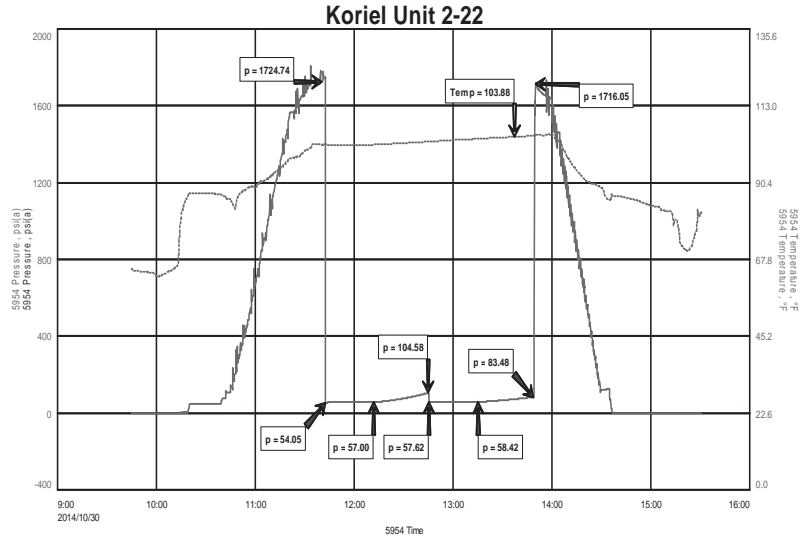
Wellsite Report

General Information

Company Name	L.D Drilling Inc
Contact	L.D Davis
Well Operator	L.D Drilling Inc
Well Name	Koriel Unit 2-22
Surface Location	Sec: 22-18-14w (Barton County)
Field	Laud West
Well Type	Vertical
Pool	Infield
Test Purpose (AEUB)	Initial Test
Qualified By	Kim Shoemaker
Gauge Name	5954

Test Information

Job Number	RR111
Test Type	Drill Stem Test
Well Fluid Type	01 Oil
Formation	Dst1 L/KC "H-K" (3317-3397)
Start Test Date	2014/10/30 YYYY/MM/DD
Start Test Time	09:45:00 HH:mm:ss
Final Test Date	2014/10/30 YYYY/MM/DD
Final Test Time	15:35:00 HH:mm:ss



Test Results

Recovery:

5' M 100% M

Tool Sample: 100% M



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: Koriel Unit 2-22 Dst 2

TIME ON: 00:51
TIME OFF: 08:11

Company LD Drilling Inc Lease & Well No. Koriel Unit 2-22
Contractor Petromark Drilling Rig 2 Charge to LD Drilling Inc
Elevation 1925 KB Formation _____ Arbuckle Effective Pay _____ Ft. Ticket No. RR112
Date Oct/31/2014 Sec. 22 Twp. _____ 18 S Range _____ 14 W County _____ Barton State KANSAS
Test Approved By Kim Shoemaker Diamond Representative _____ RICKY RAY

Formation Test No. 2 Interval Tested from 3400 ft. to 3457 ft. Total Depth 3457 ft.
Packer Depth 3395 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth 3400 ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.

Depth of Selective Zone Set _____
Top Recorder Depth (Inside) 3382 ft. Recorder Number 0062 Cap. 5000 P.S.I.
Bottom Recorder Depth (Outside) 3436 ft. Recorder Number 5954 Cap. 5000 P.S.I.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type CHEM Viscosity 55 Drill Collar Length 123 ft. I.D. 2 1/4 in.
Weight 9.2 Water Loss 8 cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.
Chlorides 8300 P.P.M. Drill Pipe Length 3162 ft. I.D. 3 1/2 in.
Jars: Make STERLING Serial Number 8 Test Tool Length 32 ft. Tool Size 3 1/2-IF in.
Did Well Flow? NA Reversed Out NA Anchor Length 57A(25P) 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: 1/4" Blow (Built to 2 1/4 inches in 30 mins) NOBB
2nd Open: NO BLOW (Built to 1 inch in 45 mins) NOBB

Recovered 65 ft. of M 100 % M
Recovered 62 ft. of SLWM 60% W 40% M
Recovered 127 ft. of Total Fluid

Recovered _____ ft. of _____	Price Job
Recovered _____ ft. of _____	Other Charges
Recovered _____ ft. of _____	Insurance
Remarks: <u>Tool Sample: 60% W 40% M</u>	Total

Time Set Packer(s) 3:00 AM A.M. P.M. Time Started Off Bottom 6:00Am A.M. P.M. Maximum Temperature 105

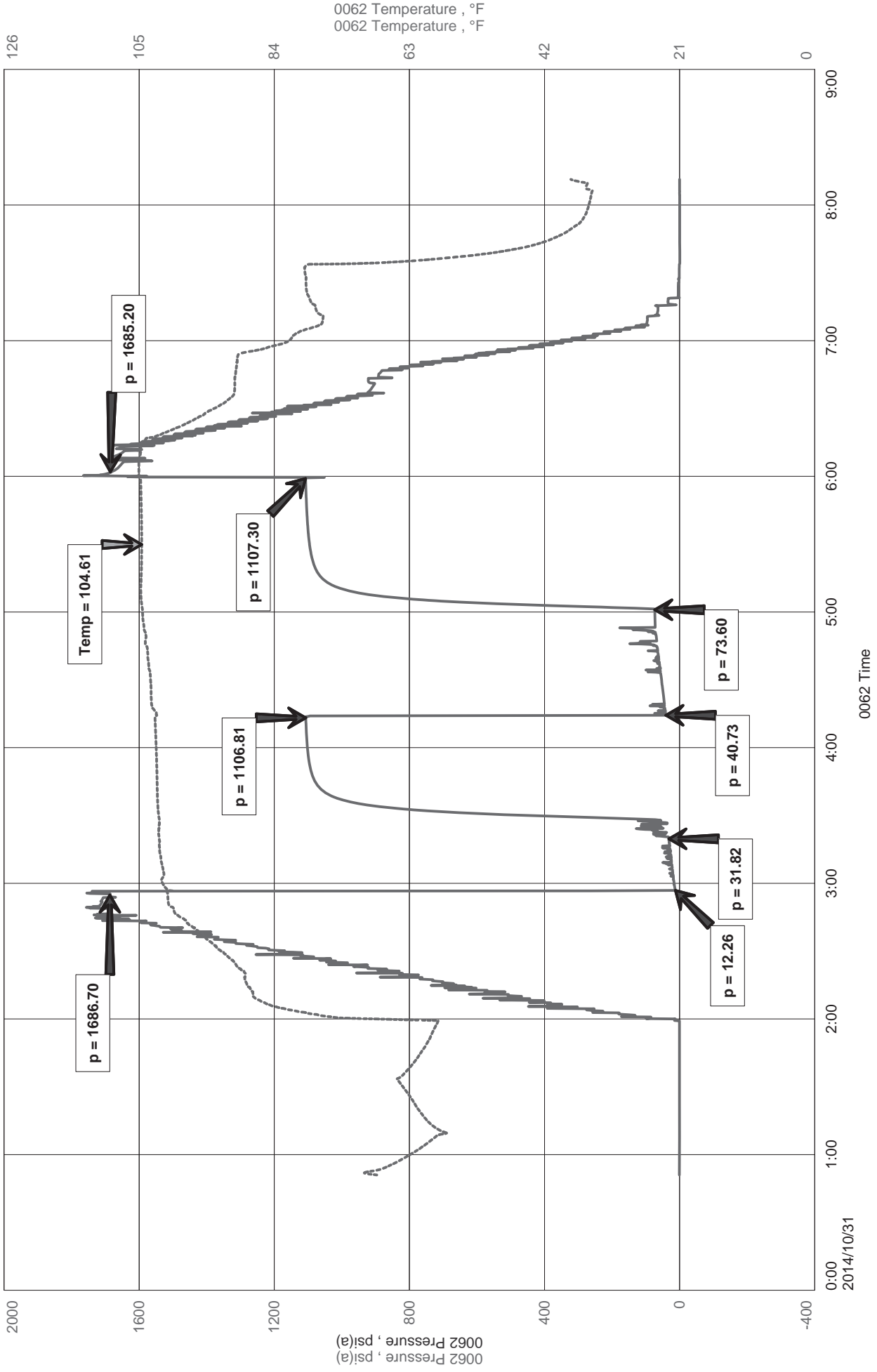
Initial Hydrostatic Pressure..... (A) 1687 P.S.I.
Initial Flow Period..... Minutes 30 (B) 12 P.S.I. to (C) 32 P.S.I.
Initial Closed In Period..... Minutes 45 (D) 1107 P.S.I.
Final Flow Period..... Minutes 45 (E) 41 P.S.I. to (F) 74 P.S.I.
Final Closed In Period..... Minutes 60 (G) 1107 P.S.I.
Final Hydrostatic Pressure..... (H) 1685 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.

L.D Drilling Inc
 Dst 2 Arbuckle (3400-3457)
 Start Test Date: 2014/10/31
 Final Test Date: 2014/10/31

Koriel Unit 2-22
 Formation: Dst 2 Arbuckle (3400-3457)
 Pool: Infield
 Job Number: RR112

Koriel Unit 2-22





Diamond Testing LLC

P.O. Box 157

HoisingtonKS 67544

Ricky Ray - Tester

(620) 617-7261

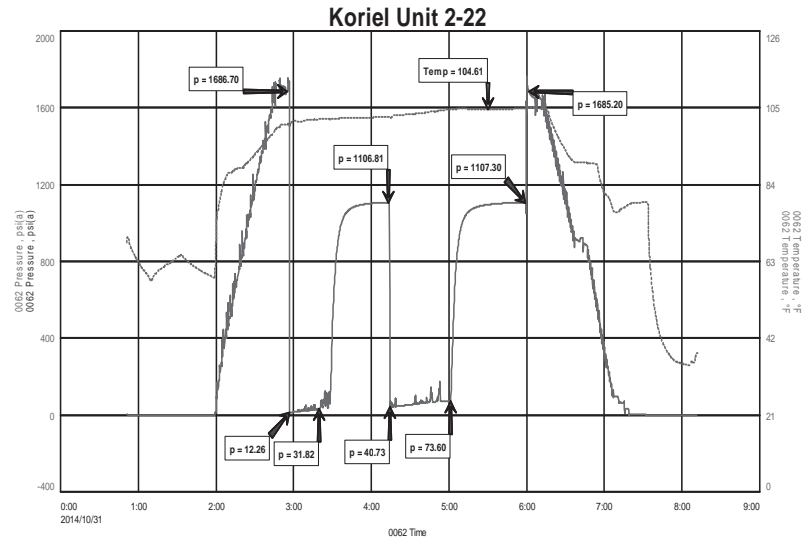
Wellsite Report

General Information

Company Name	L.D Drilling Inc
Contact	L.D Davis
Well Operator	L.D Drilling
Well Name	Koriel Unit 2-22
Surface Location	Sec: 22-18s-14w (Barton County)
Field	Laud West
Well Type	Vertical
Pool	Infield
Test Purpose (AEUB)	Initial Test
Qualified By	Kim Shoemaker
Gauge Name	0062

Test Information

Job Number	RR112
Test Type	Drill Stem Test
Well Fluid Type	01 Oil
Formation	Dst 2 Arbuckle (3400-3457)
Start Test Date	2014/10/31 YYYY/MM/DD
Start Test Time	00:51:00 HH:mm:ss
Final Test Date	2014/10/31 YYYY/MM/DD
Final Test Time	08:11:00 HH:mm:ss



Test Results

Recovery

65'	M	100% M	
62'	SLWM	60% W	40% M
127'	Total Fluid		

Tool Sample: 60 %W 40% M

KIM B. SHOEMAKER
 CONSULTING GEOLOGIST
 316-684-9709 * WICHITA, KS

GEOLOGIST'S REPORT
 DRILLING TIME AND SAMPLE LOG

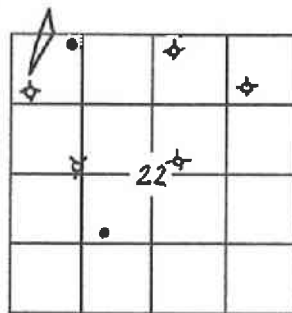
COMPANY L. D. DRILLING, INC.
 LEASE * 2-22 KORIEL UNIT
 FIELD LAUD WEST
 LOCATION 1220' FNL ± 330' FWL
 SEC 22 TWP 18s RGE 14W
 COUNTY BARTON STATE KANSAS
 CONTRACTOR PETROMARK R16 2
 SPUD 10-25-14 COMP 10-31-14
 RTD 3457 LTD _____
 MUD UP 2660 TYPE MUD CHEMICAL

ELEVATIONS
 KB 1925
 DF _____
 GL 1920
 Measurements Are All From 1925 KB

CASING
 SURFACE 8 5/8" @ 921'
 PRODUCTION _____
 ELECTRICAL SURVEYS
 None

SAMPLES SAVED FROM 2800 TO 3457
 DRILLING TIME KEPT FROM 2700 TO 3457
 SAMPLES EXAMINED FROM 2800 TO 3457
 GEOLOGICAL SUPERVISION FROM 3100 TO 3457
 GEOLOGIST ON WELL KIM B. SHOEMAKER

FORMATION TOPS	LOG	SAMPLES
ANHYDRITE		870 + 1055
B/ANH.		888 + 1037
TOPEKA		2877 - 952
HEEBNER		3115 - 1190
BROWN LIME		3188 - 1263
LANSING		3198 - 1273
B/KC		3402 - 1477
ARBUCKLE		3449 - 1524



REMARKS

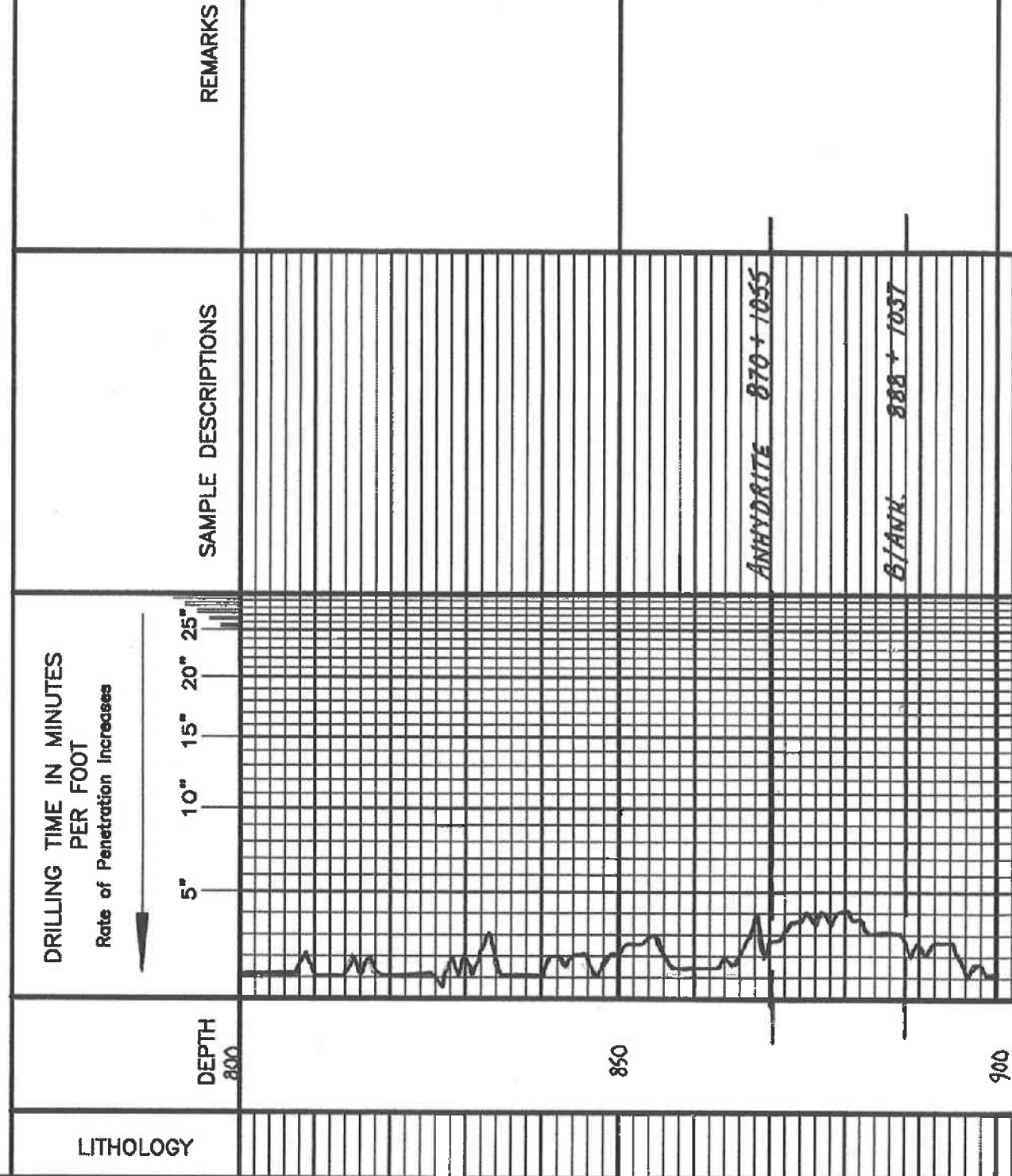
10-25-14 SPUD
 10-26 @ 872'
 10-27 @ 1345'
 10-28 @ 2400'
 10-29 @ 2953'
 10-30 @ 3397'
 10-31 @ 3457'

API: 15-009-26039

LEGEND

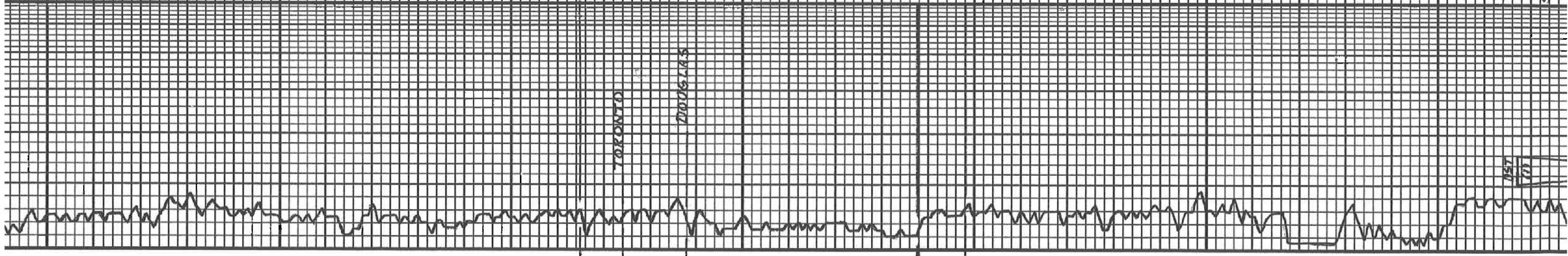
-  Dolomite
-  Chert
-  Col. Lime
-  Limestone
-  Carb sh
-  Shale
-  Sandstone
-  Salt
-  Anhydrite

SHOED1-06



Vis: 52 WT: 8.8
Wt: 6.8 CML: 8100

Sh. Gy.
 ls. To Sil. Chlgy.
 Sh. L. L. L. L.
 ls. Gy. VSI Foss.
 Sh. Alk.
 ls. Top. VSI Foss. Sil. A
 ls. w/ Chlgy. mol. Sil. Chlgy.
 ls. To mol. Sil. Foss. Sil. A
 ls. To Sil. Chlgy.
 HESNER 3115-1190
 Sh. L. L. L. L.
 ls. mol. Sil. Foss. Sil. A
 Sh. Blue Gy.
 Sh. w/ Blue Gy.
 Sh. Gy.
 BROWN LIME 3188-1263
 ls. To VSI Foss.
 LANSING 3198-1273
 ls. mol. VSI Foss. VSI A
 ls. To mol. Sil. A
 Sh. L. L. L. L.
 ls. mol. VSI Foss. Sil. Calcitic
 ls. Gy. Foss. VSI Chlgy.
 Sh. L. L. L. L.
 ls. To Mol. Foss. F. VSI
 Sec. To Sil. To Foss. Also other.
 Sh. Gy.
 ls. To mol. mol. gd. conc.
 ls. To mol. MS.
 ls. mol. Chlgy.
 ls. L. L. L. L. D. D.
 Sh. Gy. D. L. L. L.



3000
 3100
 3200
 3300

TORONTO

DODGERS

DST (1) 3317-3397
 15' OPEN: Blow built to 14"
 2' OPEN: No Blow
 30.30.30-30
 Rec. 2' Mud
 FP: 59.57 58.58
 SIP: 105.122

Ls. Lsh. Dia.

Sh. G. DRG.

Ls. cut. VSI base VSI: 2447.

L1 To VSI: base. SIA

Ls. To cut. SIA: base. P. 3440

Sent. For det. SIA VSI: base. SIA: base.

Sh. Rd.

Ls. cut. L1. VSI: base.

Ls. To cut. SIA

Sh. Rd.

L1 To cut. SIA: base

Sh. Rd.

3402-1477

Sh. Rd.

Sh. Rd. Side of T. A

A Pink Orange Washcoat.

Sh. Rd.

ARGONIE 3449-1524

DL cut. HD-CO2 In P. 3440

DL cut. BUT. SIA: base. SIA: base.

ARGONIE.

Rec. 2' Mud

FP: 5957 5858*

SIP: 105.83*

Temp. 109° F

Mud V @ 3397

VIS: 55 WT: 9.2

WL: 8.0 CAL: 8300

DST (2) 3400-3457

1500psi: Blow built to 2 1/4"

2' OPEN: " " " 1"

30-45-45-60

Rec. 65' Mud

62' MW (400' Mud 607.10)

TF: 127'

FP: 12.32

41.74*

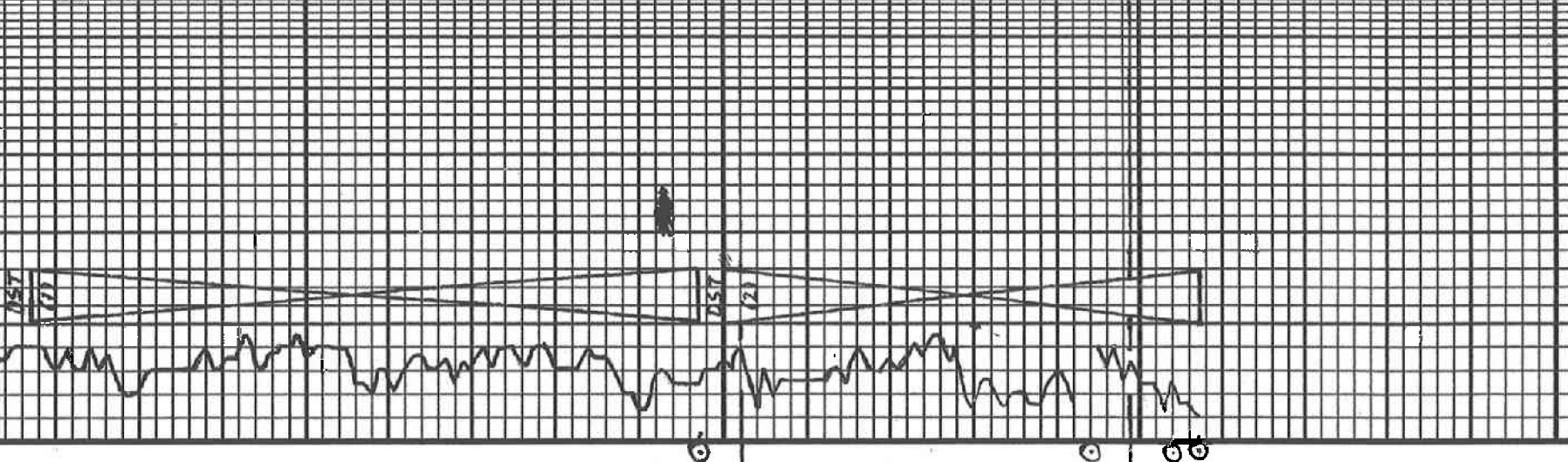
SIP: 1107-

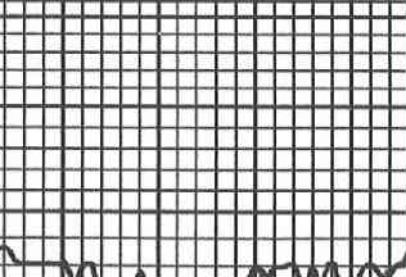
1107*

Temp. 108° F

3400

3500







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 11434 A

DATE _____ TICKET NO. _____

22-18-141

DATE OF JOB <u>10-31-2014</u> DISTRICT <u>Pisa Hills</u>		NEW WELL <input type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:			
CUSTOMER <u>L.D. Drilling, Inc</u>		LEASE <u>Koriel</u>		WELL NO. <u>222</u>	
ADDRESS		COUNTY <u>Barton</u>		STATE <u>KS</u>	
CITY STATE		SERVICE CREW <u>D. Scrin, Ed, Phye</u>			
AUTHORIZED BY		JOB TYPE: <u>CNW/PTA</u>			

EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	(AM/PM)	TIME
<u>89841</u>	<u>2 1/2</u>					ARRIVED AT JOB	<u>10-31</u>	<u>AM</u>	<u>8:30</u>
<u>19843</u>	<u>2 1/2</u>					START OPERATION	<u>10-31</u>	<u>AM</u>	<u>11:30</u>
<u>19885</u>	<u>2 1/2</u>					FINISH OPERATION	<u>10-31</u>	<u>AM</u>	<u>2:30</u>
<u>19862</u>	<u>2 1/2</u>					RELEASED	<u>10-31</u>	<u>AM</u>	<u>3:30</u>
<u>27283</u>	<u>2 1/2</u>					MILES FROM STATION TO WELL			<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: Brandon D. Smith
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<u>CP103</u>	<u>60/40 Poz</u>	<u>SK</u>	<u>220</u>		<u>2640</u>
<u>CC200</u>	<u>Cement + Gal</u>	<u>Lb</u>	<u>380</u>		<u>95</u>
<u>CF153</u>	<u>Wooden Cemen - Plus, 8 3/8"</u>	<u>ES</u>	<u>1</u>		<u>160</u>
<u>E100</u>	<u>Unit + Milese Charge - Pickups, Shovelers + etc</u>	<u>Mi</u>	<u>75</u>		<u>337.50</u>
<u>F101</u>	<u>Mesuv Equipment + Milese</u>	<u>Mi</u>	<u>150</u>		<u>1125</u>
<u>CE201</u>	<u>Depth Charge 3001-4000'</u>	<u>4hr</u>	<u>1</u>		<u>2160</u>
<u>CE240</u>	<u>Blending & Mixing Service Charge</u>	<u>SK</u>	<u>220</u>		<u>308</u>
<u>S003</u>	<u>Service Supervisor, Plus 8 hrs on loc</u>	<u>ES</u>	<u>1</u>		<u>175</u>
<u>E113</u>	<u>BULK INVENTORY</u>	<u>TM</u>	<u>713</u>		<u>1781.25</u>
SUB TOTAL					<u>8,781.75</u>

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
Discovered TOTAL		<u>6,761.95</u>

SERVICE REPRESENTATIVE <u>Brandon D. Smith</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Brandon D. Smith</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO. _____

Customer <i>L. D. Dillios, Inc</i>	Lease No.	Date <i>10-31-2014</i>
Lease <i>KOriel</i>	Well # <i>2-22</i>	
Field Order # <i>11434</i>	Station <i>PRATTSVILLE</i>	Casing <i>9 1/2 DP</i>
Type Job <i>CNU1 PTA</i>	Depth <i>3249</i>	County <i>Barton</i>
	Formation	State <i>Ks</i>
		Legal Description <i>27-18-14</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>9 1/2</i>								
Depth <i>3249</i>	Depth	From	To	Pre Pad	Max		5 Min.	
Volume	Volume	From	To	Pad	Min		10 Min.	
Max Press	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative _____ Station Manager *Kevin Golden* Treater *Darin Francisco*

Service Units	<i>27783</i>	<i>89841</i>	<i>19843</i>	<i>19885</i>	<i>19862</i>				
Driver Names	<i>Darin</i>	<i>Ed</i>	<i>Ed</i>	<i>Phye</i>	<i>Phye</i>				

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>11:30am</i>					<i>on location / SSPety meeting</i>
					<i>1st plus - 3429 - 505</i>
					<i>LOG & hole</i>
	<i>200</i>		<i>13</i>	<i>4</i>	<i>mix 505</i>
	<i>200</i>		<i>45</i>	<i>4</i>	<i>Displace 45 bbls mix</i>
					<i>2nd plus - 880 - 505</i>
					<i>LOG & hole</i>
	<i>200</i>		<i>13</i>	<i>4</i>	<i>mix 505</i>
	<i>200</i>		<i>9</i>	<i>4</i>	<i>Displace 9 bbls mix</i>
					<i>3rd plus - 380 - 805</i>
					<i>LOG & hole</i>
	<i>200</i>		<i>20</i>	<i>4</i>	<i>mix 805</i>
	<i>200</i>		<i>14</i>	<i>4</i>	<i>Displace 14 bbl</i>
					<i>4th plus</i>
					<i>LOG & hole</i>
	<i>100</i>		<i>2 1/2</i>	<i>3</i>	<i>mix 105</i>
	<i>100</i>		<i>7</i>	<i>3</i>	<i>1st plus - 305</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 11434 A

DATE _____ TICKET NO. _____

22-18-14

DATE OF JOB: 10-31-2014		DISTRICT: PIST 41RS		NEW WELL <input 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: KOLIEI		WELL NO. 222					
ADDRESS:		COUNTY: Barton		STATE: KS					
CITY:		STATE:		SERVICE CREW: Dsrin, Ed, Pave					
AUTHORIZED BY:		JOB TYPE: CNU/PTA							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
89841	2 1/2						10-31	AM	8:30
19843	2 1/2						10-31	AM	11:30
19885	2 1/2						10-31	AM	12:00
19862	2 1/2						10-31	AM	2:30
27283	2 1/2						10-31	AM	3:30
						MILES FROM STATION TO WELL	65		

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: Brandon D. Wells
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP103	60/40 Poz	SK	220		2640 -
CC700	Cement + Gal	Lb	380		95 -
CF153	Wooden Cemen - Plug, 8 3/8"	ES	1		160 -
E100	Unit + Milese Chaise - Pircuss, specious + 400'	Mi	75		337.50
F-101	Mesuv Equipment + Milese	Mi	150		1125 -
CE201	Depth Chaise 3001-4000'	4hr	1		2160 -
CE240	Blending & Mixing Service Chaise	SK	220		308 -
S003	Service Supervisor, PIST + 8 hrs on loc	ES	1		175 -
E113	BULK INVENTORY	Mi	713		1781.25
SUB TOTAL					8,781.75

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
Discussed TOTAL		6,761.95

SERVICE REPRESENTATIVE: <i>Brandon D. Wells</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>Brandon D. Wells</i> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO.

Customer <i>L. D. DeWitt, Inc</i>	Lease No.	Date <i>10-31-2014</i>
Lease <i>KOYI 1</i>	Well # <i>2-22</i>	
Field Order # <i>11434</i>	Station <i>PRR & H, KS</i>	Casing <i>4 1/2 DP</i>
Type Job <i>CNU/PTA</i>	Depth <i>3245</i>	County <i>Barton</i>
	Formation	State <i>KS</i>
		Legal Description <i>22-18-14</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>4 1/2</i>								
Depth	Depth	From	To	Pre Pad	Max		5 Min.	
<i>3425</i>								
Volume	Volume	From	To	Pad	Min		10 Min.	
Max Press	Max Press	From	To	Frac	Avg		15 Min.	
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load	

Customer Representative: _____ Station Manager: *Kevin Goetz* Treater: *Dustin Francisco*

Service Units	<i>27703</i>	<i>89841</i>	<i>19843</i>	<i>19885</i>	<i>19862</i>				
Driver Names	<i>Dustin</i>	<i>Ed</i>	<i>Ed</i>	<i>Phye</i>	<i>Phye</i>				

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>11:30am</i>					<i>on location / SSPeq meeting</i>
					<i>1st plus - 3425 - 50s</i>
					<i>LOG hole</i>
	<i>200</i>		<i>13</i>	<i>4</i>	<i>mix 50s</i>
	<i>200</i>		<i>45</i>	<i>4</i>	<i>Displace 45 bbls mix</i>
					<i>2nd plus - 880 - 50s</i>
					<i>LOG hole</i>
	<i>200</i>		<i>13</i>	<i>4</i>	<i>mix 50s</i>
	<i>200</i>		<i>9</i>	<i>4</i>	<i>Displace 9 bbls mud</i>
					<i>3rd plus - 380 - 80s</i>
					<i>LOG hole</i>
	<i>200</i>		<i>20</i>	<i>4</i>	<i>mix 80s</i>
	<i>200</i>		<i>14</i>	<i>4</i>	<i>Displace 14 bbl</i>
					<i>4th plus</i>
					<i>LOG hole</i>
	<i>100</i>		<i>2 1/2</i>	<i>3</i>	<i>mix 10s</i>
	<i>100</i>		<i>7</i>	<i>3</i>	<i>1st hole - 30s</i>