



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1233766
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: _____

1233766

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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
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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. <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	AHS Cattle Co. 6
Doc ID	1233766

All Electric Logs Run

Borehole Volume Caliper Log
Compensated Neutron PEL Density Micro Log
Composite Log
Geologist Log
Phased Induction Shallow Focus Log
Sonic Cement Bond Log

Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	AHS Cattle Co. 6
Doc ID	1233766

Tops

Name	Top	Datum
Kansas City	4373	-2992
Stark	4524	-3143
Hushpuckney	4558	-3177
Cherokee	4761	-3880
Mississippian	4840	-3459
Kinderhook	5077	-3696
Chattanooga Shale	5156	-3775
Misener	5174	-3793
Maquoketa	5192	-3811
Viola	5243	-3862
Upper Simpson Sand	5356	-3975
Arbuckle	5546	-4165
Total Depth	5631	



PAGE 1 of 1	CUST 1000719	YARD # 1718	INVOICE DATE 08/20/2014
INVOICE NUMBER 91572455			

Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME AHS Cattle Co 6
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40756618	19905		Net - 30 days	09/19/2014

For Service Dates: 08/19/2014 to 08/19/2014

0040756618

171811230A Cement-New Well Casing/Pi 08/19/2014
 Cement 13 3/8 Conductor

ENTERED
 AUG 26 2014
 9121 BC

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
60/40 POZ	350.00	EA	7.92	2,771.70 T
Celloflake	88.00	EA	2.44	214.87 T
Calcium Chloride	903.00	EA	0.69	625.71 T
"Unit Mileage Chg (PU, cars one way)"	50.00	MI	2.80	140.23
Heavy Equipment Mileage	100.00	MI	4.62	461.95
"Proppant & Bulk Del. Chgs., per ton mil	753.00	EA	1.45	1,093.24
Depth Charge; 0-500'	1.00	EA	659.93	659.93
Blending & Mixing Service Charge	350.00	BAG	0.92	323.36
High Head Charge	1.00	EA	197.98	197.98
Service Supervisor	1.00	HR	115.49	115.49

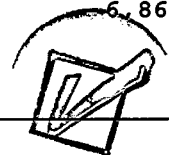
PLEASE REMIT TO:

SEND OTHER CORRESPONDENCE TO:

BASIC ENERGY SERVICES, LP
 PO BOX 841903
 DALLAS, TX 75284-1903

BASIC ENERGY SERVICES, LP
 801 CHERRY ST, STE 2100
 FORT WORTH, TX 76102

SUB TOTAL 6,604.46
 TAX 258.28
 INVOICE TOTAL 6,862.74





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 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>02-19-14</u> DISTRICT <u>Pratt, KS</u>		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/> PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/> CUSTOMER ORDER NO.:							
CUSTOMER <u>W. FAIR OIL Co.</u>		LEASE <u>HHS CATTLE Co</u> WELL NO. <u>0</u>							
ADDRESS		COUNTY <u>Pratt</u> STATE <u>KS</u>							
CITY STATE		SERVICE CREW <u>Sullivan, Wray, Payne</u>							
AUTHORIZED BY		JOB TYPE: <u>CJW 13/24/14</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>71151-19705</u>	<u>35</u>								
<u>71159-19912</u>	<u>35</u>								
<u>37900</u>									
						ARRIVED AT JOB	<u>8-1-14</u>	AM	<u>11:00</u>
						START OPERATION	<u>8-1-14</u>	AM	<u>8:25</u>
						FINISH OPERATION		AM	<u>6:00</u>
						RELEASED		AM	<u>6:30</u>
						MILES FROM STATION TO WELL			<u>50</u>

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

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

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

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT	
<u>P 103</u>	<u>6240 port</u>	<u>sk</u>	<u>350</u>		<u>4,300.00</u>	
<u>C 102</u>	<u>collar</u>	<u>lb</u>	<u>88</u>		<u>3,336.00</u>	
<u>C 109</u>	<u>Calcium chloride</u>	<u>lb</u>	<u>903</u>		<u>4,151.10</u>	
<u>100</u>	<u>pick</u>	<u>in</u>	<u>50</u>		<u>2,125.00</u>	
<u>111</u>	<u>Hand Sigs</u>	<u>in</u>	<u>100</u>		<u>700.00</u>	
<u>113</u>	<u>Bull's Bl</u>	<u>in</u>	<u>753</u>		<u>1,355.25</u>	
<u>200</u>	<u>Drill pipe</u>	<u>ft</u>	<u>1</u>		<u>1,000.00</u>	
<u>340</u>	<u>Blow by wire</u>	<u>sk</u>	<u>350</u>		<u>490.00</u>	
<u>005</u>	<u>Service to S. 2nd</u>	<u>in</u>	<u>1</u>		<u>175.00</u>	
<u>305</u>	<u>Hydr</u>	<u>in</u>	<u>1</u>		<u>320.00</u>	
					SUB TOTAL	<u>15,664.40</u>
					SERVICE & EQUIPMENT	%TAX ON \$
					MATERIALS	%TAX ON \$
					TOTAL	

CHEMICAL / ACID DATA:			

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

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

BASIC

energy services, L.P.

TREATMENT REPORT

Customer CHIEFTAIN OIL	Lease No.	Date 08-19-14
Lease AHS CATTLE CO.	Well # 6	
Field Order # 11230	Station PRATT KS	Casing 13 3/8
Type Job ENW 13 3/8 CONDUCTOR	Formation	Depth 301
		County BARBER
		State KS
		Legal Description 12-35-12

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
13 3/8								
Depth 301	Depth	From	To	Pre Pad	Max			5 Min.
Volume 43	Volume	From	To	Pad	Min			10 Min.
Max Press 350	Max Press	From	To	Frac	Avg			15 Min.
Well Connection SWAGE	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth 213	Packer Depth	From	To	Flush	Gas Volume			Total Load

Customer Representative	Station Manager DAVE SCOTT	Treater Robert J. [Signature]
Service Units 27900 77686 19905 70959 19918		
Driver Names GULLIVAN MCGRAW PHYE		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
11:45 am					ON LOC
					RUN 13 3/8 CSP.
					CASING ON BOTTOM
					HOOK UP CIRC CSP.
3:25	350		3	3.5	ST SPACER
			75	4.5	MIX CNT 350 SK
					cnt mixed
4:00			43	4	ST DISP
					plug down
					pumped 15 BBL cnt Pit
					JOB COMPLETE
					THANKS



PAGE	CUST	YARD #	INVOICE DATE
1 of 1	1000719	1718	08/28/2014
INVOICE NUMBER			
91581129			

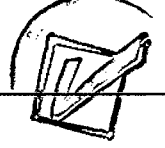
Pratt (620) 672-1201
 B CHIEFTAIN OIL COMPANY
 I PO Box: 124
 L KIOWA
 L KS US 67070
 T
 O **ATTN:** ACCOUNTS PAYABLE

J **LEASE NAME** AHS Cattle Co 6
 O **LOCATION**
 B **COUNTY** Barber
 S **STATE** KS
 I **JOB DESCRIPTION** Cement-New Well Casing/Pi
 T **JOB CONTACT**
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE	
40759542	19905		Net - 30 days	09/27/2014	
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 08/26/2014 to 08/26/2014</i>					
0040759542					
171811306A Cement-New Well Casing/Pi 08/26/2014					
Cement 5 1/2' Longstring					
60/40.POZ 80.00 EA 7.92 633.60 T					
AA2 Cement 150.00 EA 11.22 1,683.00 T					
C-41P 29.00 EA 2.64 76.56 T					
Salt 743.00 EA 0.33 245.19 T					
C-44 141.00 EA 3.40 479.26 T					
Mud Flush 500.00 EA 0.99 495.00 T					
Gilsonite 749.00 EA 0.44 331.21 T					
"Latch Down Plug & Baffle, 5 1/2" (Blu) 1.00 EA 264.00 264.00					
"Auto Fill Float Shoe 5 1/2" (Blue)" 1.00 EA 237.60 237.60					
"Turbolizer, 5 1/2" (Blue)" 9.00 EA 72.60 653.40					
"5 1/2" Basket (Blue)" 2.00 EA 191.40 382.80					
"Unit Mileage Chg (PU, cars one way)" 50.00 MI 2.81 140.25					
Heavy Equipment Mileage 100.00 MI 4.62 462.00					
"Proppant & Bulk Del. Chgs., per ton mil 525.00 EA 1.45 762.30					
Depth Charge; 5001-6000' 1.00 EA 1,900.80 1,900.80					
Blending & Mixing Service Charge 230.00 BAG 0.92 212.52					
Plug Container Util. Chg. 1.00 EA 165.00 165.00					
"Service Supervisor, first 8 hrs on loc. 1.00 EA 115.50 115.50					
FLA-322 113.00 EA 4.95 559.35 T					

PAID
 SEP 08 2014
 9304 BC

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	9,799.34
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	321.98
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	10,121.32
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		

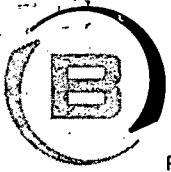


Customer <i>Chieftain Oil Co.</i>	Lease No.	Date <i>8-26-14</i>
Lease <i>AHS Cattle Co.</i>	Well # <i>6</i>	
Field Order # <i>11306A</i>	Station <i>Pratt</i>	Casing <i>5 1/2</i>
		Depth <i>5630.5</i>
		County <i>Barber</i>
		State <i>KS</i>
Type Job <i>5 1/2 Long string</i>	Formation <i>CNW</i>	Legal Description <i>12-355-12W</i>

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
<i>5 1/2</i>							
Depth <i>5630.5</i>	Depth	From	To	Pre Pad	Max		5 Min. <i>5 min</i>
Volume <i>33.99</i>	Volume	From	To	Pad	Min		10 Min.
Max Press <i>2000</i>	Max Press	From	To	Frac	Avg		15 Min.
Well Connection <i>5 1/2</i>	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer-Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative <i>Ryan Meltz</i>	Station Manager <i>Kevin Goodley</i>	Treater <i>Scott Graves</i>
Service Units <i>38970</i>	<i>77686</i>	<i>19960</i>
Driver Names <i>Scott</i>	<i>Mike</i>	<i>Dale</i>
	<i>19905</i>	<i>21010</i>

Time	Casing Pressure	Tubing Pressure	Bbbs. Pumped	Rate	Service Log
<i>9:05</i>					<i>On location Safety meeting Rig up</i>
<i>9:15</i>					<i>Run float equipment</i>
					<i>Toolbars on JT's</i>
					<i>Baskets on JT #1's</i>
<i>10:22</i>					<i>Circulate 1/2 way in casing 30 min</i>
<i>12:25</i>					<i>Circulate well casing on bottom 1hr</i>
<i>1:45</i>	<i>0</i>		<i>5</i>	<i>4.5</i>	<i>Pump H2O spacer</i>
<i>1:47</i>	<i>150</i>		<i>12</i>	<i>4.5</i>	<i>Pump 500 gal. Mud flush</i>
<i>1:50</i>	<i>150</i>		<i>5</i>	<i>5</i>	<i>Pump H2O spacer</i>
<i>1:52</i>	<i>200</i>		<i>18.5</i>	<i>5.6</i>	<i>Mix 60/40 POZ Scavenger 50SKS 12ppg</i>
<i>1:55</i>	<i>200</i>		<i>38.2</i>	<i>5.7</i>	<i>Mix 150SKS AA2 cement 15 ppg</i>
<i>2:02</i>	<i>0</i>				<i>Shut Down</i>
					<i>Wash pump and lines</i>
<i>2:10</i>					<i>Drop plug</i>
<i>2:12</i>	<i>0</i>			<i>6.1</i>	<i>Start Displacement</i>
<i>2:29</i>	<i>500</i>		<i>105</i>	<i>6</i>	<i>1-ft pressure</i>
<i>2:35</i>	<i>700</i>		<i>29</i>	<i>3.8</i>	<i>Plug landed</i>
<i>2:35</i>	<i>1700</i>				<i>Pressure up set plug</i>
					<i>Release pressure</i>
<i>2:40</i>	<i>0</i>		<i>6.5</i>	<i>2.5</i>	<i>Plug Rat hole 30SKS - 60/40 POZ</i>
					<i>Shut Down</i>
					<i>Job Complete</i>



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 11306 A

DATE _____ TICKET NO. _____

DATE OF JOB 8-26-14 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 Chicklain Oil Company Inc		LEASE AHS Cattle Co. WELL NO. 6								
ADDRESS _____		COUNTY Barber STATE KS								
CITY _____ STATE _____		SERVICE CREW Scott, M.R., Dale								
AUTHORIZED BY Ryan Maltz		JOB TYPE: 5 1/2 long string CML								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
38976	1									
77686 19905	1						8-25-14	AM	PM	9:05
19960 21010	1						8-26-14	AM	PM	1:45
							8-26-14	AM	PM	2:40
							8-26-14	AM	PM	3:30

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

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP103	60140 POZ	SK	50		6010.00
CP105	AA2 Cement	SK	150		2550.00
CP103	60140 POZ	SK	30		360.00
CC105	C-41P	lb	29		116.00
CC111	Salt	lb	743		371.50
CC115	C-44	lb	141		726.15
CC129	FLA-322	lb	113		547.50
CC201	Gilsonite	lb	749		501.83
CF607	catch down Plug + Isaffle 5 1/2	ea	1		400.00
CF1751	Auto fill float shoe 5 1/2	ea	1		360.00
CF1651	Turbolizer 5 1/2	ea	9		990.00
CF1961	Backed 5 1/2	ea	2		550.00
CC151	Mud flush	Gal	500		750.00
E100	Unit mileage pickups	MI	50		217.50
E101	Heavy Equipment	MI	100		700.00
E113	Plug + Bulk Delivery charge	TM	525		1155.00
CF206	Depth Charge 5001-6000'	4hr	1		2580.00
CF240	Blending + mixing Service charge	SK	230		322.00
CF504	Plug Container Utilization	JOB	1		250.00
5003	Service Supervisor	ea	1		
				SUB-TOTAL	175.00

CHEMICAL / ACID DATA:

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

TOTAL **kg** 9,799 34

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.

****CELLS WITH BLUE BACKGROUND ARE THE ONLY CELLS TO BE EDITED****

Fracture Start Date/Time:	10/10/14 10:44
Fracture End Date/Time:	10/10/14 13:24
State:	Kansas
County:	Barber
API Number:	15-007-24208-0000
Operator Name:	CHIEFTAIN OIL CO INC
Well Name:	AHS Cattle Co. #6
Federal Well:	
Longitude:	-98.5684054
Latitude:	37.007576
Long/Lat Projection:	NAD27
True Vertical Depth (TVD):	0'
Total Clean Fluid Volume* (gal):	497,196

(e.g. XX-XXX-XXXXX-0000)

Additive	Specific Gravity	Additive Quantity	Mass (lbs)	
Water	1.00	497,196	4,149,101	gal
Sand (Proppant)	2.65	445,000	445,000	lb
Plexcide B7	1.33	25	277	gal
Plexcide B7	1.33	25	277	gal
Plexgel Breaker XPA	1.03	77	662	gal
Plexset 730	0.90	104	781	gal
Plexset 730	0.90	104	781	gal
Plexsurf 580 ME	0.95	116	920	gal
Plexsurf 580 ME	0.95	116	920	gal
Plexslic 957	1.11	308	2,853	gal
Claymax	1.09	232	2,110	gal
Plexgel 907L-EB	1.04	368	3,194	gal
Plexgel 907L-EB	1.04	368	3,194	gal
Plexgel 907L-EB	1.04	368	3,194	gal
Plexgel 907L-EB	1.04	368	3,194	gal
Plexgel 907L-EB	1.04	368	3,194	gal
Plexgel Breaker 10L	1.10	4	37	gal

Total Slurry Mass (Lbs)
4,619,688

Ingredients Section:

Trade Name	Supplier	Purpose	Ingredients	Chemical Abstract Service Number (CAS #)	Maximum Ingredient Concentration in Additive (% by mass)**	Mass per Component (LBS)	Maximum Ingredient Concentration in HF Fluid (% by mass)**	Comments
Water	Operator	Carrier/Base Fluid	Water	7732-18-5	100.00%	4,149,101	89.81344%	
Sand (Proppant)	Uniman	Proppant	Crystalline Silica in the form of Quartz	14808-60-7 / 238-878-4	99.90%	444,555	9.62305%	
Plexcide B7	Chemplex	Biocide	Sodium Hydroxide	1310-73-2	4.99%	14	0.00030%	
Plexcide B7	Chemplex	Biocide	Alkaline Bromide Salts (non-hazardous)	NA	0.00%	0	0.00000%	
Plexgel Breaker XPA	Chemplex	Slickwater Breaker	Hydrogen Peroxide	7722-84-1	7.00%	46	0.00100%	
Plexset 730	Chemplex	Activator	Methanol	67-56-1	50.00%	391	0.00845%	
Plexset 730	Chemplex	Activator	Alcohol Ethoxylates	Mixture	60.00%	469	0.01014%	
Plexsurf 580 ME	Chemplex	Product Stabilizer	Methyl Alcohol	67-56-1	10.00%	92	0.00199%	
Plexsurf 580 ME	Chemplex	Product Stabilizer	2-Butoxyethanol	111-76-2	50.00%	460	0.00995%	
Plexslic 957	Chemplex	Friction Reducer	Petroleum Hydrotreated Light Distillate	64742-47-8	25.00%	713	0.01544%	
Claymax	Chemplex	Clay Stabilizer	No Hazardous Ingredient	NA	0.00%	0	0.00000%	
Plexgel 907L-EB	Chemplex	Gelling Agent	Distillates, Hydrotreated Light	64742-47-8	50.00%	1,597	0.03457%	
Plexgel 907L-EB	Chemplex	Gelling Agent	Organophylic Clay	NDA	2.00%	64	0.00138%	
Plexgel 907L-EB	Chemplex	Gelling Agent	Crystalline Silica	14808-60-7	0.06%	2	0.00004%	
Plexgel 907L-EB	Chemplex	Gelling Agent	Alcohol Ethoxylates	34398-01-1	1.00%	32	0.00069%	
Plexgel 907L-EB	Chemplex	Gelling Agent	Guar Gum	9000-30-0	50.00%	1,597	0.03457%	
Plexgel Breaker 10L	Chemplex	Breaker/Gel	No Hazardous Ingredient	NA	0.00%	0	0.00000%	
								Non-MSDS Component
								Non-MSDS Component
								Non-MSDS Component
								Non-MSDS Component
								Non-MSDS Component