Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1238178

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 #	API No. 15
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	Multiple Stage Cementing Collar Used? Yes No
Cathodic Other (Core, Expl., etc.):	
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #: Dual Completion Permit #:	Dewatering method used:
	Lassian of fluid dispass if bould affeits.
	Location of fluid disposal if hauled offsite:
ENHR Permit #: GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
Spud Date orDate Reached TDCompletion Date orRecompletion DateRecompletion Date	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:							

				Page Iwo	1238		
Operator Na	me:			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 (Attach Additional Sheets)		Yes No		-	on (Top), Depth a		Sample	
Samples Sent to Geolog	Samples Sent to Geological Survey		Name	e		Тор	Datum	
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No						
List All E. Logs Run:								
		CASING Report all strings set-c		w Used rmediate, producti	on, 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 / SQU	EEZE RECORD				

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD				
Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?	
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	

Yes	No
Yes	No
Yes	No

 No
 (If No, skip questions 2 and 3)

 No
 (If No, skip question 3)

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				Depth				
TUBING RECORD:	Siz	ze:	Set At:		Packer	r At:	Liner F		No	
Date of First, Resumed	l Producti	ion, SWD or ENHF	} .	Producing M	ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
						I				
DISPOSITI	ION OF G	BAS:			METHOD	OF COMPLE	TION:		PRODUCTION INTE	ERVAL:
Vented Solo	d 🗌 l	Jsed on Lease		Open Hole	Perf.	Dually		Commingled		
(If vented, Su	ıbmit ACO	D-18.)		Other (Specify)		(Submit /	,	(Submit ACO-4)		

Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	CHANCE 1-16
Doc ID	1238178

Tops

Name	Тор	Datum
ANHYDRITE	2708	+302
BASE ANHYDRITE	2799	+261
ТОРЕКА	3765	-755
HEEBNER	3932	-922
LANSING	3978	-968
BASE KANSAS CITY	4218	-1208
PAWNEE	4336	-1326
FORT SCOTT	4376	-1366
CHEROKEE	4388	-1378



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

FIELD SERVICE TICKET 1718 11473 A

PRESSU	PING & WIRELINE					DATE TICKET NO	
DATE OF	DATE OF JOB DISTRICT						
	Dri	ling, loc			LEASE Ch	an ce	WELL NO.
ADDRESS					COUNTY K	muli	AS STATE KS
CITY		STATE			SERVICE CR	EW S	art Shawn , Sacion
AUTHORIZED BY	DD	(11) 5			JOB TYPE:	8 5/4	Soulars Pipe CAYE
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQL	JIPMENT#	HRS	TRUCK CALLED DATE AM TIME
38,570;	.3						ARRIVED AT JOB 10-30-14 AM 11:45
01101 19843	13		_				START OPERATION
19960 19860	, 3		-				FINISH OPERATION 10-31-14 PM 1.36
20-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1							RELEASED 10-31-14 AM 2:30
14							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 Jupan A Bion 18

				WELL OWNE	R, OPERATOR, CONT	RACTOR OR AG	ENT)
ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT A	ND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUN	T, S
CP 103	601110 POZ		Sto	300		3600	00
						- 17 - 18 m	1.1
66.102	Celler Jake		16	75		277	50
((109	Calencer Chionde		16	774		817	70
				<u> </u>			
F-100	Ilait malage Pick	103, Small dans	MI	190		855	00
FIDE	Heavy Equipment	milcane	mi	3.80		2550	00
EIJ	Pico 2 Butt Deliver	1 per tan mile	TM	2451		6137	50
65700	Death charge 6	-5001	4hr			1000	06
NF 740	Rendered & Mining	- Secure Charles	SK	300		170	00
						1mg	100
5003	Service Superinsor	fulst & bis an Lot	Ea	1		115	40
			-	-			
							-
			-				
_							
CF	EMICAL / ACID DATA:				SUB TOTAL	16,117.	170
		SERVICE & EQUIP	MENT	%TA>	ON \$		-
		MATERIALS			ON\$		
					TOTAL		53
				Discou	nted Total,	12,410	2
					K	N	271
		THE ABOVE MATERIAL AND SERV	UCE	1	1		
SERVICE REPRESENTATI		ORDERED BY CUSTOMER AND R	ECEIVE	D BY: M	The AR	ma	
	- fart and - f				OR CONTRACTOR OF	AGENT)	
FIELD SERVICE	ORDER NO.						



ŝ,

TREATMENT REPORT

Customer	Deilli	1.5	lac	Lease No.					Date			
Lease		91	111	Well #	- 16					10	31-141	
Field Order #	Station	Peut		1 /	1.51	Casing 5	18	Depth	County	Raw	lins	State
Type Job	2/5 <	1	a F	pe		CNW	Form	nation			egal Descriptio	n 55-3260
PIPE	DATA	PE	RFORATI	NG DATA		FLUID US	SED	<u></u>		TREATM	IENT RESU	ME
Casing Size	Tubing Siz	e Shot	s/Ft		Acid				RATE	PRESS	S ISIP	
Depth	Depth	From	, İ	То	Pre	Pad		Max			5 Min	
Volume GG	Volume	From		То	Pad			Min			10 Mi	n.
Max Press	Max Press			То	Frac		¢.	Avg	x		15 Mi	n.
Well Connectio	n Annulus Ve			То				ННР	'Used		Annul	lus Pressure
Plug Depth	Packer De			То	Flus			Gas	Volume		Total	
Customer Rep	resentative			Station	1 Mana	ger	7	Guild	Iles Trea	ater Sca	H Gu	11105
Service Units	38970	8498										
Driver Names	Santi		Acric	1.12								
Time	Casing Pressure	Tubing Pressur		Pumped	F	Rate				Service	Log	
11:40	Treagure	110000	•	10			Rice	110	Safet	w w	2+++000	·/
T				1			0	· · ·		,	0	
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									1.1.24			

10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • (620) 672-1201 • Fax (620) 672-5383

FIELD SERVICE TICKET 171705078 Α

PRESSURE PUMPING & WIRELINE							DATE TICKET NO.	
JOB 11-7-14 DISTRICT 717				NEW X			CUSTOMER ORDER NO.:	
CUSTOMER LD	Da	lina			LEASE	trai	1ce #1-16.	WELL NO.
ADDRESS		0			COUNTY	hawl	STATE	ICS .
CITY		STATE			SERVICE OF	NEWE	Mondoza, C	harles
AUTHORIZED BY	5 12	Servicett			JOB TYPE:	24	- PTA	
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQI	JIPMENT#	HRS	TRUCK CALLED	-14 04:00
34726	8		_)		ARRIVED AT JOB	1 AM \$100
27462	8		-				START OPERATION	10 9:00 2:0
19001	8						FINISH OPERATION	
-3104 i	0	_					RELEASED	1 8 3.0
3,2							MILES FROM STATION T	

1700 S. Country Estates Rd. Liberal, Kansas 67905

Phone 620-624-2277

SERVICES

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, material 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 shi become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED:

(WELL OWNER, OPERATOR, CONTRACTOR OR AGEN

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES U	SED UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
1103 -	60140 Poz	st	240		2880 a
Caop V	Concept Greek	16	414		103 50
CC102 .	Cellflake	<u> </u>	Cel		225-72
PIDI	Hearing Equipound Allean	mi	350		2450 0
(Ed40	Boundary of Minute Service	e SK	240		336 0
EII3	Enopart & Bulk Detwery	ton	181		4528 1.
(E203	Puis Dielli 2001-3000	(4hr	-		1800 0
E100-	Unit Millage	ui	10		743 7
5003	service sperisa	ea			175 0
				As	
	IEMICAL / ACID DATA:	Liber		SUB TOTAL	9,269.
		ERVICE & EQUIPMENT	%TA)	(ON \$	
		IATERIALS		(ON \$	
		16		TOTAL	
					1
			- 114 - 114		
SERVICE		ERIAL AND SERVICE	D BY:	(u) les	

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer /	Liberal	SERVICES		Lease No.		Date	11-7.14
ease C		CILING	<u>r</u>	Well #	11.	PIO 5078	
Casing	hance	Depth		County Roughlys State KS			0.000
Job Type 🌱	111 50	A	Formation	1	Legal Des	cription 1 (- 5	- 32
L	<u>4 -</u> P	Pipe I	Data		Perfor	ating Data	Cement Data
Casing size	46 m				Sh	ots/Ft	Lead
Depth			Depth		From	То	
Volume			Volume		From	To	
Max Press			Max Press		From	To	Tail in 240 SK
Well Connec	tion		Annulus Vol.		From	Ťo	Tail in 740 Sk 60/40 Poz
Plug Depth			Packer Depth		From	То	
	Casing	Tubing	Bbis, Pumbed	Rate		Servic	e Log
Time	Pressure	Pressure	Dois, Pulloed	(tate	our loc.		esnut
					sont t	note not	(ID
					Saft	Mantilia	-TSA
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V120			13.4	-	1412 8 0	UMO 50	sk 60/40 002
8:30			- lar		@13.5	# 1.616	43/1K-7.50ac/KK
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1730						40'	0 11.0-
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Service Un	1 211-	228	27462	19837	-37817		
Service on	1 30		TITUA	11/10/0 1/	- il literation	and the second se	

R Wilson J Bersnett Allera

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

TIME ON: 0615

TIME OFF: 1325

	FI	LE: Chance	e1-16Dst1				
Company L.D. Drilling Inc			Lease & Well No.	Chance #1-16			
Contractor L.D. Drilling			_ Charge to L.D. Dril	lling Inc			
Elevation 3010KB Form	nation	LKC '	J'Effective Pay		Ft. Ticke	t No. P	0014
Date 11-05-14 Sec. 16	Twp	5 S R	ange	32 W County	Rawlins	State	KANSAS
Test Approved By Kim Shoemaker			_ Diamond Representa	tive	Michael C	arroll	
Formation Test No. `1	Interval Tested from	41	20 ft. to	4160 ft. Tota	al Depth		4160 ft.
Packer Depth 4115 ft	t. Size 6 3/4	in.	Packer depth		ft. Size	6 3/4	in.
Packer Depth 4120 ft		in.	Packer depth				in.
Depth of Selective Zone Set					_		
Top Recorder Depth (Inside)		4102 _{ft.}	Recorder Number_	0063	Cap.	5,000) P.S.I.
Bottom Recorder Depth (Outside)		4157 _{ft.}	Recorder Number_	6884	4_Cap	6275	P.S.I.
Below Straddle Recorder Depth		ft.	Recorder Number_		_Cap		_ P.S.I.
01	sity50		Drill Collar Length_		_ft. I.D		
Weight 8.7 Water Los	6.4	CC.	Weight Pipe Length	0	ft. I.D	2 7/8	3 ir
Chlorides	1500	P.P.M.	Drill Pipe Length	4088	³ ft. I.D	3 1/2	2in
Jars: MakeSTERLINGSerial N	lumber	3	Test Tool Length			ze3_1/2	2-IFin
	eversed Out		Anchor Length	40	_ft. Size	4 1/2	2-FHir
Main Hole Size 7 7/8 To	ol Joint Size 4 1/	2 XH _in.	Surface Choke Size	e1	in. Bottom	Choke Siz	e_5/8_ir
Blow: 1st Open: 2 3/4" BLOW-D	IMINISHING ⁻	ΓΟ 1" IN	30MINS			NOBE	3
2nd Open: NO BLOW-BUIL	T TO WSB IN	45MINS				NOBB	
Recovered 35 ft. of MUD 100)%M						
Recovered 35 ft. of TOTAL FL	UID						
Recoveredft. of							
Recoveredft. of							
Recoveredft. of					Price Job		
Recoveredft. of					Other Charg	es	
Remarks: TOOL SLID 8' TO BOTT	ОМ				Insurance		
TOOL SAMPLE: 100%M	A.M.			A.M.	Total		
Time Set Packer(s) 8:37A.M.		arted Off Bo	ttom11:37A.M	1. P.M. Max	kimum Tempe	erature	120
Initial Hydrostatic Pressure			(A)	1962 P.S.I.			
Initial Flow Period	Minutes	30	(B)	21 P.S.I. to	(C)	23 _P	.S.I.
Initial Closed In Period	Minutes	45	(D)	1156 P.S.I.			
Final Flow Period	Minutes	45	(E)	23 P.S.I. to	(F)	26 _P	S.I.
Final Closed In Period	Minutes	60	(G)	1141 P.S.I.			
Final Hydrostatic Pressure			(H)	1953 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.



Michael Carroll 620-617-0368 carroll.dtllc@gmail.com

Hoisington, Kansas

General Information

Company Name L.D. Drilling

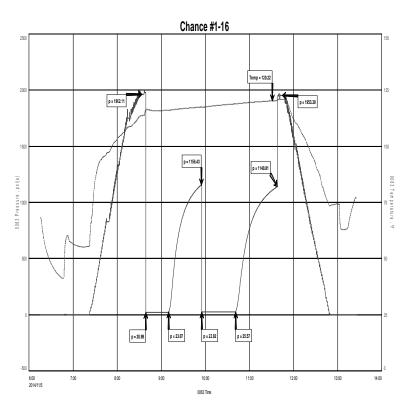
Contact	L.D. Davis
Well Name	Chance #1-16
Unique Well ID	Dst #1 L/KC "J" 4120-4160'
Surface Location	Sec16-5s-32w Rawlins County
Field	NA
Well Type	Vertical
Test Type	Drill Stem Test
Well Operator	L.D. Drilling
Formation	Dst #1 L/KC "J" 4120-4160'
Well Fluid Type	01 Oil
Test Purpose	Initial Test
Start Test Date	2014/11/05
Start Test Time	06:15:00
Final Test Time	13:25:00

P0014

2014/11/05

Michael Carroll

100%M 35'



TEST RECOVERY

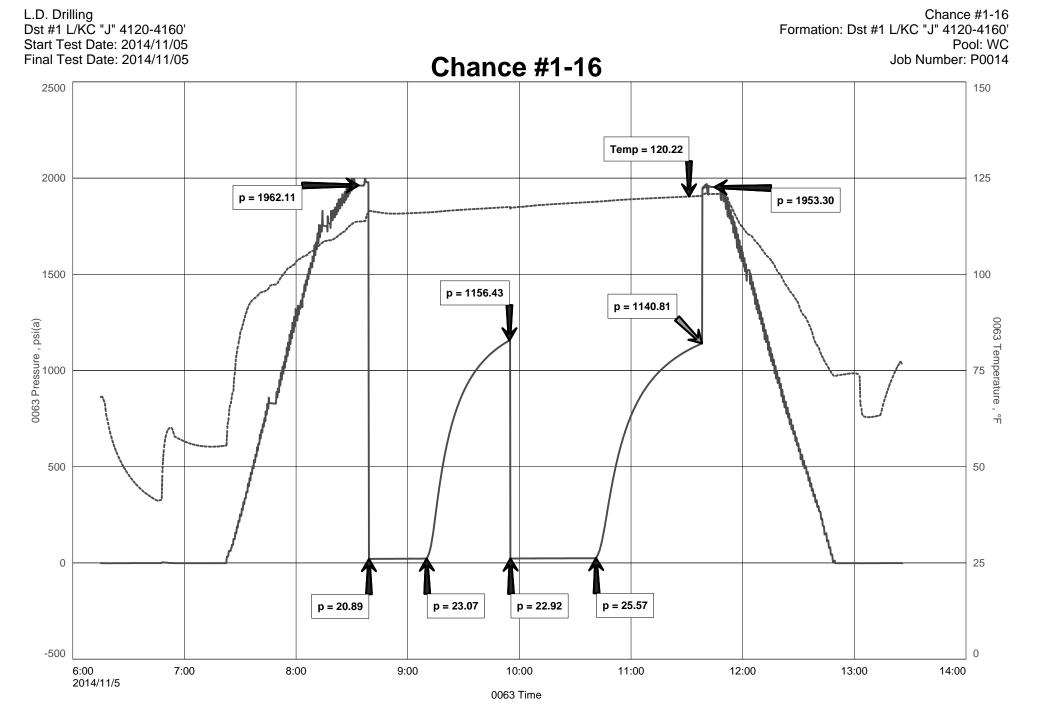
Job Number

Report Date

Prepared By

Remarks	Recovery:
	35' Mud
	Total Fluid

Tool Sample: 100%M



KIM B. SHOEN CONSULTING GEOLO 316-684-9709 * WI	GIST			S	
GEOLOGIST'S RI DRILLING TIME AND SAMPLE COMPANY_L.D. DRILLING, TNC. LEASE <u>\$1-16</u> CHANCE FIELD WILDCAT LOCATION	LOG ELEVATIONS KB DF GL GL Measurements Are All From CASING SURFACE 85/9"@ 32.6" PRODUCTION ELECTRICAL SURVEYS None TO 4470	API: IS - 153 - 21068	LEGEND CECEND Control Shale Carb sh Limestone Col.Lime Chert Dolomite	IN MINUTES FOOT on increases 0" 15" 20" 25" SAMPLE DESCRIPTIONS REMARKS	
SAMPLES EXAMINED FROM	TO		Scilt Sande	C TIME IN MIN PER FOOT Penatration Increa	
FORMATION TOPS LOG SAMPLE ANHYDRITE 2708+3 B/ANH 2749+2 TOPEKA 3765-7 HEEBNER 3932-9	02		Anhyäritte	DRILLIN(
LANSING 3978-96 B/KC 4218-120 PAWNEE 1326-132 FORT SCOTT 4376-132 CHEROKEE 4388-137 RTD 4470-146		REMARKS. 10-30-14 - 500 10-31 - 21 - 22 - 2400 11-1 - 21 - 2425 11-2 - 21 - 2425 11-5 - 245 11-5 - 245	SHQE0106	LITHOLOGY	

