

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1238835

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

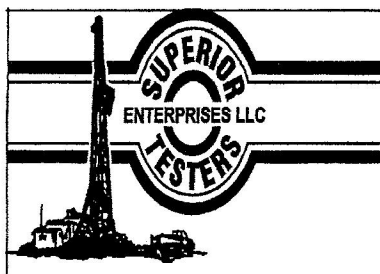
☐ UIC Distribution

ALT ☐ I ☐ II ☐ III Approved by: _____ Date: _____

Form	ACO1 - Well Completion
Operator	Bird Dog Oil, LLC
Well Name	Lakin-Sieker 2-23
Doc ID	1238835

All Electric Logs Run

DIL
DUCP
MEL
BHCS



DRILL STEM TEST REPORT

Bird Dog Oil LLC

23-19s-11w Barton

1801 Broadway Suite 450
Denver, Colorado 80202

Lakin-Sieker #2-23

Job Ticket: 19250

DST#: 1

ATTN: Adam Nighswonger

Test Start: 2014.06.21 @ 00:00:00

GENERAL INFORMATION:

Formation: **Kansas City "J-K & L"**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 00:00:00

Time Test Ended: 00:00:00

Test Type: Inflate Bottom Hole (Initial)

Tester: Gene Budig

Unit No: 3335-

Interval: **3240.00 ft (KB) To 3308.00 ft (KB) (TVD)**

Total Depth: 3308.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 1785.00 ft (KB)

1777.00 ft (CF)

KB to GR/CF: 8.00 ft

Serial #: 8938

Inside

Press@RunDepth: 172.67 psig @ 3303.79 ft (KB)

Start Date: 2014.06.21

End Date:

2014.06.21

Capacity: 5000.00 psig

Last Calib.: 2014.06.21

Start Time: 01:00:00

End Time:

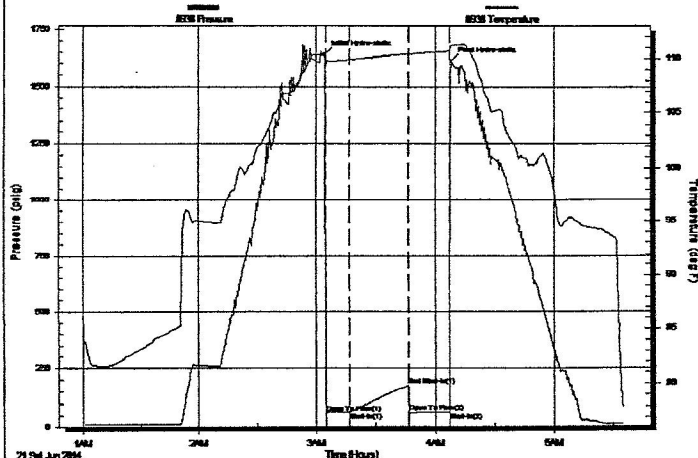
05:35:30

Time On Btm: 2014.06.21 @ 03:04:30

Time Off Btm: 2014.06.21 @ 04:08:00

TEST COMMENT: 1st Opening 10 Minutes weak to very weak surface blow
1st Shut-in 30 Minutes-No blow back
2nd Opening 15 Minutes-No blow
No 2nd shut-in taken pulled tool after being open 15 minutes on the 2nd opening

Pressure vs. Time



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1641.73	110.21	Initial Hydro-static
1	58.45	109.27	Open To Flow (1)
12	62.33	109.86	Shut-In (1)
42	172.67	110.44	End Shut-In (1)
43	60.60	110.41	Open To Flow (2)
63	62.42	110.73	Shut-In (2)
64	1611.36	111.21	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	Drilling mud with a good show of free	0.14

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
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1718 10440 A

DATE TICKET NO. 2

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

SUB TOTAL	6,015	68
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SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
	TOTAL		

FIELD SERVICE ORDER NO.



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

FIELD SERVICE TICKET

1718 10890 A

DATE _____ TICKET NO. _____

NAME OF JOB 6-22-14 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 Bird Dog Oil LLC				LEASE Larin Sider WELL NO. 2-22			
ADDRESS				COUNTY Barton STATE KS			
CITY STATE				SERVICE CREW Platt Common-1			
AUTHORIZED BY Kelly Brarum				JOB TYPE: Plug well CNA			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE AM PM TIME
37900	4.3					ARRIVED AT JOB	6-22-14 AM 1:25
70890 21010	4.3					START OPERATION	6-22-14 AM 1:52
19889 19843	4.3					FINISH OPERATION	6-22-14 AM 5:00
						RELEASED	6-22-14 AM 5:45
						MILES FROM STATION TO WELL	

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

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: _____

SIGNED: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

[illegible]

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL		5,418	8

SERVICE REPRESENTATIVE 	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: 
FIELD SERVICE ORDER NO.	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)