

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1237070

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: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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>	☐ Yes	☐ No	☐ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes	☐ No	Name	Top	Datum
Cores Taken	☐ Yes	☐ No			
Electric Log Run	☐ Yes	☐ No			
List All E. Logs Run:					

CASING RECORD ☐ New ☐ 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
☐ Perforate				
☐ Protect Casing				
☐ Plug Back TD				
☐ 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 (Amount and Kind of Material Used)		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: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> ☐ Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Victory Operating, Inc.
Well Name	Hamilton 2-28
Doc ID	1237070

All Electric Logs Run

Compensated Neutron/Compensated Density/PE
Dual Induction
Microlog
Compensated Sonic

Form	ACO1 - Well Completion
Operator	Victory Operating, Inc.
Well Name	Hamilton 2-28
Doc ID	1237070

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	17.5	13.375	48	294	Common	450	2% CaCl ₂ , 1/4# per sack celloflake
Production	7.875	5.5	15.5	4687	AA2	200	10% salt, 5# per sack gilsonite, 1/4# per sack celloflake

BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 11258 A

DATE _____ TICKET NO. _____

28-265-150

DATE OF JOB <u>9-21-2014</u> DISTRICT <u>Prstt, KS</u>				NEW WELL ☒ OLD WELL ☐ PROD ☐ INJ ☐ WDW ☐ CUSTOMER ORDER NO.:				
CUSTOMER <u>Victory Operations, Inc.</u>				LEASE <u>H. Smith</u> WELL NO. <u>228</u>				
ADDRESS				COUNTY <u>Prstt</u> STATE <u>KS</u>				
CITY				STATE				
CITY				STATE				
AUTHORIZED BY				SERVICE CREW <u>Darin, McGraw, Beschey</u>				
AUTHORIZED BY				JOB TYPE: <u>CNU/83% surface</u>				
EQUIPMENT#		HRS	EQUIPMENT#	HRS	EQUIPMENT#			HRS
27283		1			TRUCK CALLED			DATE <u>9-21</u> AM <u>PM</u> TIME <u>12:30</u>
27686		1			ARRIVED AT JOB			DATE <u>9-21</u> AM <u>PM</u> TIME <u>2:30</u>
19905		1			START OPERATION			DATE <u>9-21</u> AM <u>PM</u> TIME <u>3:00</u>
19959		1			FINISH OPERATION			DATE <u>9-21</u> AM <u>PM</u> TIME <u>4:00</u>
73768		1			RELEASED			DATE <u>9-21</u> AM <u>PM</u> TIME <u>5:00</u>
MILES FROM STATION TO WELL								<u>35.1</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:

(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

[illegible]

SUB TOTAL *5882.31*

CHEMICAL / ACID DATA:				

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

SERVICE REPRESENTATIVE <i>Vasim Karamba</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>P. Burt</i>
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FIELD SERVICE ORDER NO.

[illegible]



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

1718 11259 A

DATE: _____ TICKET NO. _____

DATE OF JOB 9-22-2014		DISTRICT Prst+, KS		NEW WELL ☒ OLD WELL ☐ PROD ☐ INJ ☐ WDW ☐		CUSTOMER ORDER NO.:	
CUSTOMER Victory Operating, Inc.				LEASE Hsmilton		WELL NO. 22	
ADDRESS				COUNTY Prst+		STATE KS	
CITY		STATE		SERVICE CREW Dsrin, McGraw, Phyr			
AUTHORIZED BY				JOB TYPE: C/NW/ Conductor			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED 9-22 AM PM 8:00	
27783	4 1/2					ARRIVED AT JOB 9-22 AM PM 10:00	
27463	4 1/2					START OPERATION 9-22 AM PM 10:30	
70955	4 1/2					FINISH OPERATION 9-22 AM PM 3:00	
19918	4 1/2					RELEASED 9-22 AM PM 4:00	
						MILES FROM STATION TO WELL 25	

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)

[illegible]

CHEMICAL / ACID DATA:				

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

SERVICE REPRESENTATIVE <i>Robin Franklin</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>Jim S. [Signature]</i>
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FIELD SERVICE ORDER NO.



Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
10:00 am					on location / Safety meeting
	200		10	3	mix 50% common 290cc
	200		1	3	DISPIC 1 bbl water
					Pull 3 strokes & close BOP
	300		10	2	pump 10 bbl's water
	0		0	0	wait 60 minutes
					Run 3 strokes
	200		20	3	mix 100% ic
	200		1	3	DISPIC 1 bbl
					Pull 4 strokes
	400		10	3	pump 10 bbl's water
					wait 1 hour
	500		18	1/4	Pressure up to 500 ps.
					Shut in
					Tried to run 1" in hole could not
					set it to go



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

28-26-15

FIELD SERVICE TICKET

1718 11376 A

DATE _____ TICKET NO. _____

DATE OF JOB 9-29-14		DISTRICT Pratt		NEW WELL ☒ OLD WELL ☐ PROD ☐ INJ ☐ WDW ☐ CUSTOMER ORDER NO.:	
CUSTOMER Victory Operating, Inc.		LEASE Hamilton		2-28 WELL NO.	
ADDRESS		COUNTY Pratt		STATE KS	
CITY		STATE		SERVICE CREW Josh Cole JOE	
AUTHORIZED BY		JOB TYPE: CNW 5 1/2 LS			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS
27463	1.15				
19959-73768	1.15				
28443					
TRUCK CALLED				DATE 9-29-14	AM PM
ARRIVED AT JOB					1500
START OPERATION					1845
FINISH OPERATION					2000
RELEASED					2100
MILES FROM STATION TO WELL					25

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 200	AA2 CEMENT	SK	200		3,400 00
CP 105	AA2 CEMENT	SK	50		850 00
CC 102	CELLOFLAKE	lb	50		185 00
CC 105	C-41 P	lb	38		152 00
CC 111	SALT	lb	921		460 50
CC 129	FLA-322	lb	141		1,057 50
CC 201	GILSONITE	lb	1000		670 00
CF 607	Latch Down Plug	eq	1		400 00
CF 1001	Cementing shoe Packer type	eq	1		3,700 00
CF 1651	Turbolizer	eq	10		1,100 00
CF 3000	Thread Lock Kit	eq	1		34 00
CL 151	mud flush	gal	500		750 00
E 100	Pickup Mileage	mi	25		106 25
E 101	Heavy Mileage	mi	50		350 00
E 113	Bulk Delivery	TM	288		632 50
CE 205	Depth Charge	4hr	1		2,520 00
CE 240	Mixing Charge	SK	250		350 00
CE 504	Plug Container	JOB	1		250 00
S 003	Supervisor	eq	1		175 00

SUB TOTAL 13,199 92

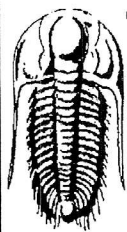
CHEMICAL / ACID DATA:			

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

SERVICE REPRESENTATIVE

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

FIELD SERVICE ORDER NO.



TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Victory Operating Inc.

28-26s-15w Pratt Ks.

6 N. Scottsdale
Wichita Ks. 67230

Hamilton #2-28

Job Ticket: 57857

DST#: 1

ATTN: Logan Walker

Test Start: 2014.09.25 @ 18:34:29

GENERAL INFORMATION:

Formation: **Lansing**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 20:36:59

Time Test Ended: 00:47:29

Test Type: Conventional Bottom Hole (Initial)

Tester: Gary Pevoteaux

Unit No: 56

Interval: **3925.00 ft (KB) To 3945.00 ft (KB) (TVD)**

Total Depth: 3945.00 ft (KB) (TVD)

Hole Diameter: 7.79 inches Hole Condition: Fair

Reference Elevations: 2056.00 ft (KB)

2047.00 ft (CF)

KB to GR/CF: 9.00 ft

Serial #: 8352 Outside

Press@RunDepth: 27.48 psig @ 3926.00 ft (KB)

Start Date: 2014.09.25

End Date:

2014.09.26

Capacity: 8000.00 psig

Last Calib.: 2014.09.26

Start Time: 18:34:34

End Time:

00:47:28

Time On Btm: 2014.09.25 @ 20:35:59

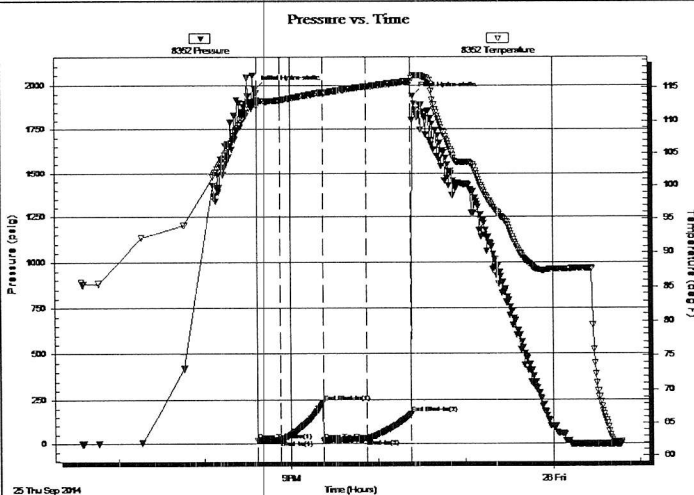
Time Off Btm: 2014.09.25 @ 22:23:59

TEST COMMENT: IF:Weak blow . 1/2 - 1 1/2".

ISI:No blow .

FF:WEak blow . 1 - 2 1/2".

FSI:No blow .



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1976.70	112.99	Initial Hydro-static
1	17.11	112.25	Open To Flow (1)
17	20.22	113.18	Shut-In(1)
46	234.29	114.31	End Shut-In(1)
47	18.47	114.23	Open To Flow (2)
76	27.48	115.15	Shut-In(2)
107	173.29	115.93	End Shut-In(2)
108	1940.95	116.60	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
25.00	Mud w / o specs	0.12
0.00	60 ft.of GIP	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
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TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

FLUID SUMMARY

Victory Operating Inc.

28-26s-15w Pratt Ks.

6 N. Scottsdale
Wichita Ks. 67230

Hamilton #2-28

Job Ticket: 57857

DST#: 1

ATTN: Logan Walker

Test Start: 2014.09.25 @ 18:34:29

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:

5000 ppm

Viscosity: 71.00 sec/qt

Cushion Volume:

bbl

Water Loss: in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 5000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
25.00	Mud w / o specs	0.123
0.00	60 ft.of GIP	0.000

Total Length: 25.00 ft

Total Volume: 0.123 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:

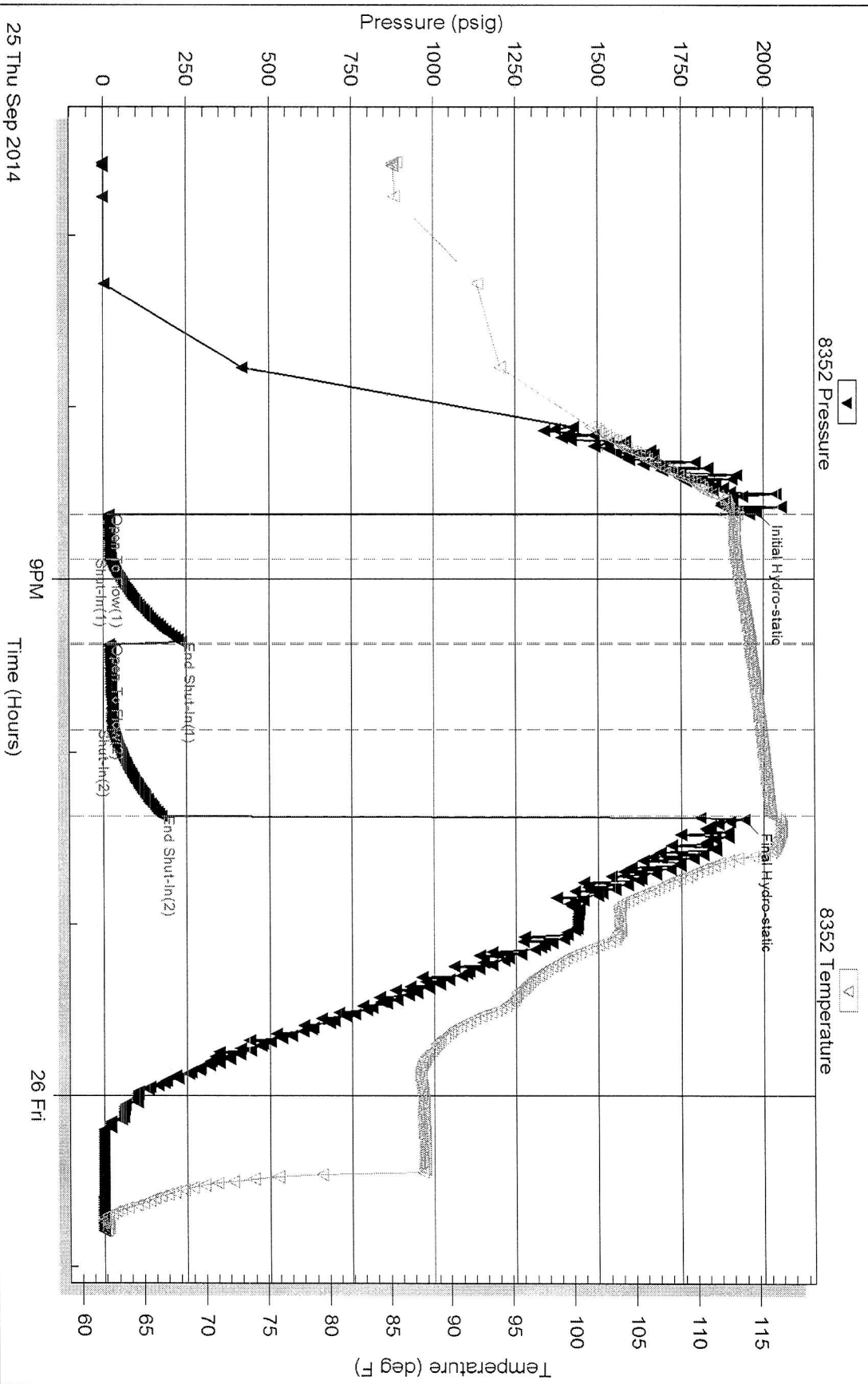
Serial #: 8352

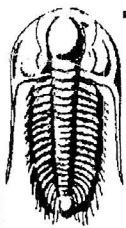
Outside Victory Operating Inc.

Hamilton #2-28

DST Test Number: 1

Pressure vs. Time





TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Victory Operating Inc.

6 N. Scottsdale
Wichita Ks. 67230

ATTN: Logan Walker

28-26s-15w Pratt Ks.

Hamilton #2-28

Job Ticket: 57858

DST#: 2

Test Start: 2014.09.26 @ 14:11:57

GENERAL INFORMATION:

Formation: **Lans. H**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 16:32:42

Time Test Ended: 22:50:27

Test Type: Conventional Bottom Hole (Reset)

Tester: Gary Pevoteaux

Unit No: 56

Interval: **4048.00 ft (KB) To 4077.00 ft (KB) (TVD)**

Total Depth: 4077.00 ft (KB) (TVD)

Hole Diameter: 7.79 inches Hole Condition: Fair

Reference Elevations: 2056.00 ft (KB)

2047.00 ft (CF)

KB to GR/CF: 9.00 ft

Serial #: 8352

Outside

Press@RunDepth: 96.85 psig @ 4049.00 ft (KB)

Start Date: 2014.09.26

End Date:

2014.09.26

Start Time: 14:12:02

End Time:

22:50:27

Capacity: 8000.00 psig

Last Calib.: 2014.09.26

Time On Btm: 2014.09.26 @ 16:30:57

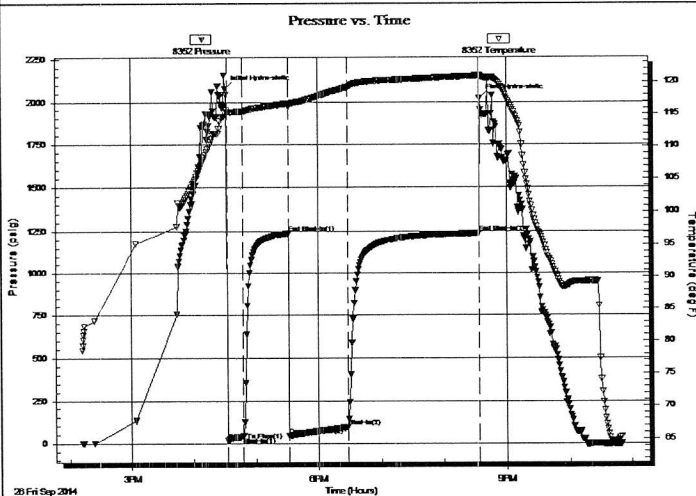
Time Off Btm: 2014.09.26 @ 20:33:57

TEST COMMENT: IF:Weak blow . 1/4 - 3/4".

ISI:No blow .

FF:Weak blow . 1/4 - 1".

FSI:No blow .



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2076.26	115.24	Initial Hydro-static
2	17.00	115.24	Open To Flow (1)
17	40.46	115.36	Shut-In(1)
61	1235.33	116.71	End Shut-In(1)
61	46.98	116.18	Open To Flow (2)
118	96.85	119.18	Shut-In(2)
242	1236.03	120.91	End Shut-In(2)
243	2020.13	121.00	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
120.00	MW 17% m 83% w /Rw .09ohms@68deg	0.59
40.00	VM w /o specs 39%w 61% m	0.20

* Recovery from multiple tests

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
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TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

FLUID SUMMARY

Victory Operating Inc.

28-26s-15w Pratt Ks.

6 N. Scottsdale
Wichita Ks. 67230

Hamilton #2-28

Job Ticket: 57858

DST#: 2

ATTN: Logan Walker

Test Start: 2014.09.26 @ 14:11:57

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:

91000 ppm

Viscosity: 50.00 sec/qt

Cushion Volume:

bbl

Water Loss: 9.59 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 5000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
120.00	MW 17%w 83%w /Rw .09ohms@68deg	0.590
40.00	WMw /o specs 39%w 61%w	0.197

Total Length: 160.00 ft

Total Volume: 0.787 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:

Serial #: 8352

Outside Victory Operating Inc.

Hamilton #2-28

DST Test Number: 2

