

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1247195

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:	SecTwpS. R
Address 2:	Feet from
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxxx) (e.gxxx.xxxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:
□ Oil □ WSW □ SHOW □ 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:	Producing Formation: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No 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 Plug Back Conv. to GSW Conv. to Producer Commingled Permit #: Dual Completion Permit #: SWD Permit #:	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:
☐ ENHR Permit #: ☐ GSW Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	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:					

Page Two



Operator Name:				Lease N	Name: _			Well #:		
Sec Twp	S. R	East	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whethe with final cha	er shut-in pre art(s). Attach	essure reac n extra shee	hed stati t if more	c level, hydrosta space is neede	itic pressures, bot d.	tom hole temp	erature, fluid re	ecovery,
Final Radioactivity Lo files must be submitte						ogs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital electr	ronic log
Drill Stem Tests Taker (Attach Additional		Yes	☐ No				on (Top), Depth ar		Sampl	
Samples Sent to Geo	logical Survey	Yes	□No		Nam	е		Тор	Datum	1
Cores Taken Electric Log Run		☐ Yes ☐ Yes	☐ No ☐ No							
List All E. Logs Run:										
				RECORD	Ne					
	2	1				ermediate, product		T	I	
Purpose of String	Size Hole Drilled		Casing n O.D.)	Weig Lbs. /		Setting Depth	Type of Cement	# Sacks Used	Type and Pe Additive	
			ADDITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of	Cement	# Sacks	Used		Type and F	ercent Additives		
Perforate Protect Casing	100 20111111									
Plug Back TD Plug Off Zone										
1 lug 0 li 20 lio										
Did you perform a hydrau	ulic fracturing treatment	on this well?				Yes	No (If No, ski	ip questions 2 ar	nd 3)	
Does the volume of the t							= :	p question 3)		
Was the hydraulic fractur	ring treatment information	on submitted to	the chemical	disclosure re	gistry?	Yes	No (If No, fill	out Page Three	of the ACO-1)	
Shots Per Foot		ION RECORD Footage of Eac					cture, Shot, Cement			epth
	open,					,,				
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or Ef	NHR. F	Producing Met	hod: Pumpin	a	Gas Lift 0	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat			Gas-Oil Ratio	Gra	avity
	1									
	ON OF GAS:		en Hole	METHOD OF			mmingled	PRODUCTION	ON INTERVAL:	ļ
Vented Solo	I Used on Lease bmit ACO-18.)		en noie _	Perf.	(Submit		mmingled mit ACO-4)			

Form	ACO1 - Well Completion
Operator	L. D. Drilling, Inc.
Well Name	WATT 2-10
Doc ID	1247195

Tops

Name	Тор	Datum
ANHYDRITE	2137	+590
BASE ANHYDRITE	2165	+562
STOTLER	3398	-671
HEEBNER	3782	-1055
LANSING	3820	-1093
STARK	4074	-1347
MARMATON	4185	-1458
FORT SCOTT	4328	-1601
CHEROKEE	4352	-1625
MISSISSIPPI	4420	-1693

General Information Report

General Information

Company Name L.D. DRILLING, INC. Representative **TIM VENTERS** Contact L.D. DAVIS Well Operator L.D. DRILLING, INC. **Well Name WATT #2-10 Report Date** 2015/01/10 **Unique Well ID** DST #1, LKC "K-L", 4068-4130 **Prepared By TIM VENTERS** Surface Location SEC 10-16S-30W, LANE CO. KS. **Field DOLL EAST Qualified By** KIM SHOEMAKER **Well Type** Vertical CONVENTIONAL **Test Type** DST #1, LKC "K-L", 4068-4130 **Formation Well Fluid Type** 01 Oil

 Start Test Date
 2015/01/09
 Start Test Time
 16:42:00

 Final Test Date
 2015/01/10
 Final Test Time
 01:02:00

Test Recovery:

RECOVERED: 210' GAS IN PIPE

165' SMCO, 99% OIL, 1% MUD, GRAVITY: 35 315' M&WCO, 46% OIL, 36% WATER, 18% MUD

315' G,HWMCO, 6% GAS, 46% OIL, 30% WATER, 18% MUD

505' SMOCW, 24% OIL, 68% WATER, 8% MUD

1300' TOTAL FLUID

TOOL SAMPLE: 9% OIL, 85% WATER, 6% MUD

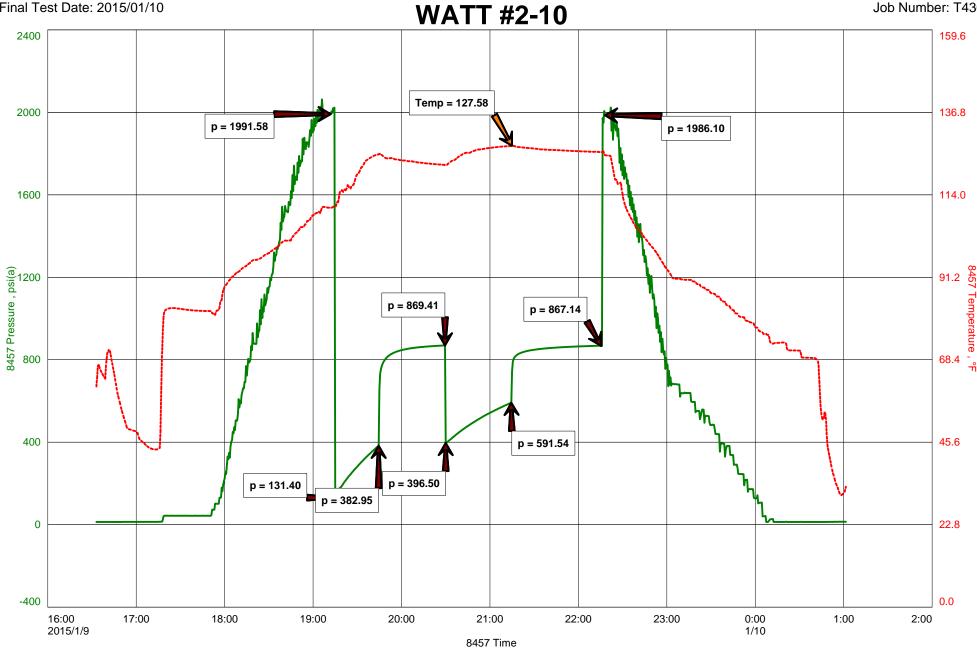
CHLORIDES: 34,000 ppm

PH: 7.0

RW: .21 @ 86 deg.

L.D. DRILLING, INC. DST #1, LKC "K-L", 4068-4130 Start Test Date: 2015/01/09 Final Test Date: 2015/01/10 WATT #2-10 Formation: DST #1, LKC "K-L", 4068-4130

Pool: DOLL EAST Job Number: T430





DIAMOND TESTING P.O. Box 157

HOISINGTON, KANSAS 67544 (800) 542-7313

DRILL-STEM TEST TICKET

TIME ON: 16:37 1-9-15

TIME OFF: 01:02 1-10-15

FILE: WAT	T2-10DST1	
Company L.D. DRILLING, INC.	Lease & Well No. WATT #2-10	
Contractor WW DRILLING, LLC RIG #2	Charge to_L.D. DRILLING, INC.	
Elevation 2727 KB Formation LKC "R	K-L"_Effective PayFt. Ticket NoT	430
Date 1-9-15 Sec. 10 Twp. 16 S	RangeState	KANSAS
Test Approved By KIM SHOEMAKERQ	Diamond Representative TIMOTHY T. VENTERS	
Formation Test No1Interval Tested from	4068 ft. to 4130 ft. Total Depth 4	4130 ft.
Packer Depth 4063 ft. Size 6 3/4 in.	Packer depthft. Size6 3/4	in.
Packer Depth 4068 ft. Size 6 3/4 in.	Packer depthft. Size6_3/4	in.
Depth of Selective Zone Set		
Top Recorder Depth (Inside) 4054 ft.	Recorder Number	P.S.I.
Bottom Recorder Depth (Outside)ft.	Recorder Number 11029 Cap. 5,025	_P.S.I.
Below Straddle Recorder Depthft.	Recorder Number Cap	P.S.I.
Mud Type CHEMICAL Viscosity 53	Drill Collar Length 123 ft. I.D. 2 1/4	in.
Weight 8.9 Water Loss 8.0	cc. Weight Pipe Length0ft. I.D2 7/8	in
Chlorides 2,400 P.P.M.	Drill Pipe Length 3917 ft. I.D 3 1/2	in
Jars: Make STERLING Serial Number 2	Test Tool Length 28 ft. Tool Size 3 1/2	-IF in
Did Well Flow? NO Reversed Out NO	Anchor Length 30 ft. Size 4 1/2-	-FH in
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in	32' DP IN ANCHOR Surface Choke Size1 in. Bottom Choke Size	,5/8in
Blow: 1st Open: GOOD 2 INCH BLOW, BUILDING, F	REACHING BOB 2 1/2 MIN. (1 1/2" BB)	
^{2nd Open:} WEAK SURFACE BLOW, BUILDING,	REACHING BOB 6 1/2 MIN. (1 1/2" BB)	11
Recovered 210 ft. of GAS IN PIPE		
Recovered165_ft. of SMCO, 99% OIL, 1% MUD, GRAVITY:	35	
Recovered 315 ft. of M&WCO, 46% OIL, 36% WATER, 1	8% MUD	
Recovered 315 ft. of G,HWMCO, 6% GAS, 46% OIL, 30%	% WATER, 18% MUD	
Recovered505_ft. of_SMOCW, 24% OIL, 68% WATER, 8% N	MUD Price Job	
Recovered 1300 ft. of TOTAL FLUID	CHLORIDES: 34,000 ppm Other Charges	
Remarks:	PH: 7.0 Insurance	
	RW: .21 @ 86 deg.	
TOOL SAMPLE: 9% OIL, 85% WATER, 6% MUD	Total	
Time Set Packer(s) 7:15 PM A.M. P.M. Time Started Off	Bottom10:15 PMP.MMaximum Temperature12	8 deg.
Initial Hydrostatic Pressure		
Initial Flow PeriodMinutes30	(B) F.S.I. to (C) 666 F.	S.I.
Initial Closed In Period	(D) F.S.I.	
Final Flow Period	(L)	3.I.
Final Closed In PeriodMinutes60		
Final Hydrostatic Pressure	the state of the s	

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.

General Information Report

2014/01/11

General Information

Company Name L.D. DRILLING, INC. Representative **TIM VENTERS** Contact L.D. DAVIS Well Operator L.D. DRILLING, INC. **Well Name** WATT #2-10 Report Date **DST #2, PAWN./MYR ST., 4268-4320 Unique Well ID Prepared By TIM VENTERS** SEC 10-16S-30W, LANE CO. KS. **Surface Location Field DOLL EAST Qualified By** KIM SHOEMAKER Well Type Vertical CONVENTIONAL **Test Type** DST #2, PAWN./MYR. ST., 4268-4320 **Formation Well Fluid Type** 01 Oil

2014/01/10 **Start Test Date Start Test Time** 18:37:00

Final Test Date Final Test Time Gauge Name

Test Recovery:

RECOVERED: 10' MUD

Gauge Serial Number

TOOL SAMPLE: SPOTTY OIL, 100% MUD



P.O. Box 157 OISINGTON, KANSAS 6754

HOISINGTON, KANSAS 67544 (800) 542-7313

DRILL-STEM TEST TICKET

FILE: WATT2-10DST2

TIME ON:	18:37
TIME OFF:	

Company L.D. DRILLING, INC.	Lease & Well No. WATT #2-10
Contractor WW DRILLING, LLC RIG #2	Charge to L.D. DRILLING, INC.
Elevation 2727 KB Formation PAWNEE/MYRICK ST	_Effective PayFt. Ticket NoT431
Date <u>1-10-15</u> Sec. <u>10</u> Twp. <u>16</u> S Ra	nge30 W CountyLANEStateKANSAS
Test Approved By KIM SHOEMAKER	Diamond Representative TIMOTHY T. VENTERS
Formation Test No. 2 Interval Tested from 426	68 ft. to 4320 ft. Total Depth 4320 ft.
Packer Depthin.	Packer depthft. Size6 3/4in.
Packer Depth 4268 ft. Size 6 3/4 in.	Packer depthft. Size6 3/4in.
Depth of Selective Zone Set	
Top Recorder Depth (Inside) 4249 ft.	Recorder Number 5504 Cap. 5,000 P.S.I.
Bottom Recorder Depth (Outside)ft.	Recorder Number 11029 Cap. 5,025 P.S.I.
Below Straddle Recorder Depthft.	Recorder NumberCapP.S.I.
Mud Type CHEMICAL Viscosity 53	Drill Collar Length 123 ft. I.D. 2 1/4 in.
Weight 9.0 Water Loss 7.8 cc.	Weight Pipe Length0 ft. I.D2 7/8 in
Chlorides 2,500 P.P.M.	Drill Pipe Length 4117 ft. I.D 3 1/2 in
Jars: Make STERLING Serial Number 2	Test Tool Length 28 ft. Tool Size 3 1/2-IF in
Did Well Flow?NOReversed OutNO	Anchor Length 21 ft. Size 4 1/2-FH in
Main Hole Size 7 7/8 Tool Joint Size 4 1/2 XH in.	31' DP IN ANCHOR Surface Choke Size 1 in. Bottom Choke Size 5/8 in
Blow: 1st Open: VERY WEAK SURFACE BLOW, LAST	TING 4 MIN. (NO BB)
^{2nd Open:} NO BLOW THROUGHOUT PERIOD.	(NO BB)
Recovered 10 ft. of MUD	
Recoveredft. of	Price Job
Recoveredft. of	Other Charges
Remarks: I FORGOT TO PUT ELEC. RECORDERS IN.	Insurance
TOOL SAMPLE: SPOTTY OIL, 100% MUD	Total
Time Set Packer(s) 8:16 PM P.M. Time Started Off Bot	tom10:16 PMP.MMaximum Temperature
nitial Hydrostatic Pressure	
nitial Flow PeriodMinutes	(B) 15 P.S.I. to (C) 8 P.S.I.
nitial Closed In PeriodMinutes30	(D)
Final Flow PeriodMinutes30	(E)8 P.S.I. to (F)8 P.S.I.
Final Closed In PeriodMinutes30	(G)5 P.S.I.
Final Hydrostatic Pressure	(H) 1828 P.S.I.

General Information Report

Representative

Final Test Time

TIM VENTERS

15:16:00

General Information

Contact	L.D. DAVIS	Well Operator	L.D. DRILLING, INC.
Well Name	WATT #2-10	Report Date	2015/01/11
Unique Well ID	DST #3, FT. SCT./CHER., 4318-4370	Prepared By	TIM VENTERS
Surface Location	SEC 10-16S-30W, LANE CO. KS.		
Field	DOLL EAST	Qualified By	KIM SHOEMAKER
Well Type	Vertical	•	
Test Type	CONVENTIONAL		
Formation	DST #3, FT. SCT./CHER., 4318-4370		
Well Fluid Type	01 Oil		
Start Test Date	2015/01/11	Start Test Time	08:17:00

L.D. DRILLING, INC.

2015/01/11

Test Recovery:

Final Test Date

Company Name

RECOVERED: 780' GIP

20' CO, 100% OIL, GRAVITY: 36

145' G,HMCO, 8% GAS, 54% OIL, 38% MUD

165' TOTAL FLUID

TOOL SAMPLE: 98% OIL, 2% MUD

L.D. DRILLING, INC. DST #3, FT. SCT./CHER., 4318-4370 Start Test Date: 2015/01/11

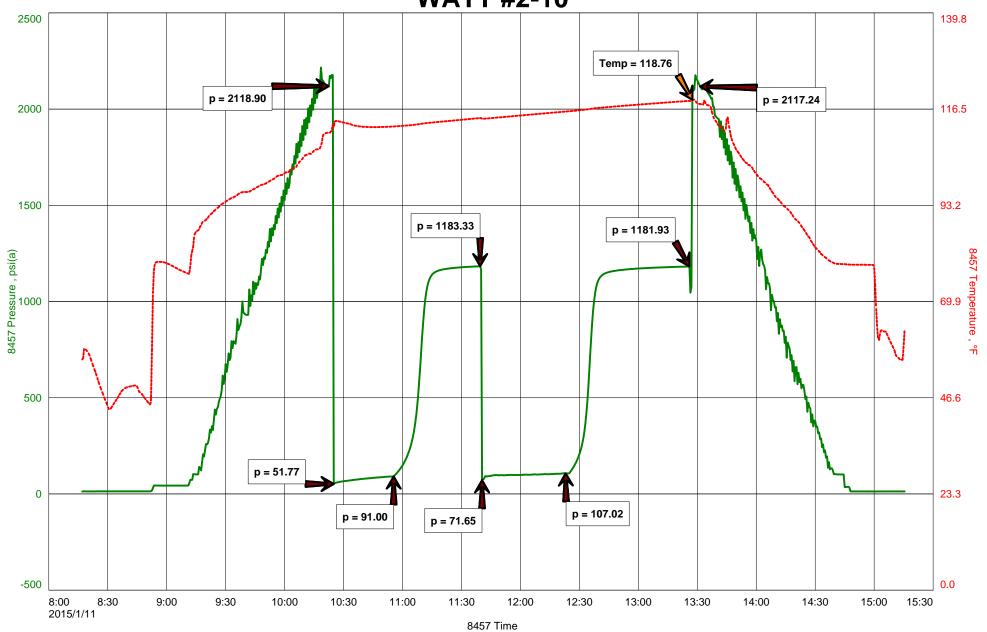
Final Test Date: 2015/01/11

Formation: DST #3, FT. SCT./CHER., 4318-4370

Pool: DOLL EAST Job Number: T432

WATT #2-10







P.O. Box 157

HOISINGTON, KANSAS 67544 (800) 542-7313

DRILL-STEM TEST TICKET

FILE: WATT2-10DST3

TIME ON: 08:17
TIME OFF: 15:16

Company L.D. DRILLING, INC.	
Contractor WW DRILLING, LLC RIG #2	Charge to L.D. DRILLING, INC.
Elevation 2727 KBFormation FT. SCOTT/CHEROKE	Effective PayFt. Ticket NoT432
Date 1-11-15 Sec. 10 Twp. 16 S Ra	ngeState_ KANSAS
Test Approved By KIM SHOEMAKER	Diamond Representative TIMOTHY T. VENTERS
Formation Test No. 3 Interval Tested from 43	18 ft. to 4370 ft. Total Depth 4370 ft.
Packer Depth 4313 ft. Size 6 3/4 in.	Packer depthft. Size6 3/4in.
Packer Depth 4318 ft. Size 6 3/4 in.	Packer depthft. Size6_3/4in.
Depth of Selective Zone Set	
Top Recorder Depth (Inside) 4299 ft.	Recorder Number
Bottom Recorder Depth (Outside) 4367_ft.	Recorder Number 11029 Cap. 5,025 P.S.I.
Below Straddle Recorder Depthft.	Recorder Number Cap P.S.I.
Mud Type CHEMICAL Viscosity 55	Drill Collar Length 123 ft. I.D. 2 1/4 in
Weight 9.0 Water Loss 7.2 cc.	Weight Pipe Length0 ft. I.D2 7/8 ir
Chlorides 1,200 P.P.M.	Drill Pipe Length 4167 ft. I.D. 3 1/2 in
Jars: Make STERLING Serial Number 2	Test Tool Length 28 ft. Tool Size 3 1/2-IF in
Did Well Flow?NOReversed OutNO	Anchor Length 20 ft. Size 4 1/2-FH ir
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: WEAK 1/4 INCH BLOW, BUILDING, F	REACHING BOB 24 MIN. (NO BB)
^{2nd Open:} GOOD 2 1/2 INCH BLOW, BUILDING, R	EACHING BOB 3 1/2 MIN. (NO BB)
Recovered 780 ft. of GAS IN PIPE	
Recovered 20 ft. of CO, 100% OIL, GRAVITY: 36	
Recovered 145 ft. of G,HMCO, 8% GAS, 54% OIL, 38% ML	JD
Recovered 165 ft. of TOTAL FLUID	
Recoveredft. of	Price Job
Recoveredft. of	Other Charges
Remarks:	Insurance
TOOL SAMPLE: 98% OIL, 2% MUD	Total A.M.
Time Set Packer(s) 10:25 AM P.M. Time Started Off Bo	
Initial Hydrostatic Pressure	(A) 2119 P.S.I.
Initial Flow Period	(B)52 _{P.S.I.} to (C)91 _{P.S.I.}
Initial Closed In Period	(D)1183 _{P.S.I.}
Final Flow Period	(E)
Final Closed In PeriodMinutes60	(G) 1182 P.S.I.
Final Hydrostatic Pressure	(H) 2117 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.

General Information Report

Representative

Well Operator

Report Date

Prepared By

Qualified By

General Information

Company Name L.D. DRILLING, INC. L.D. DAVIS Contact **Well Name WATT #2-10 Unique Well ID DST #4, JOHNSON, 4368-4417** Surface Location SEC 10-16S-30W, LANE CO. KS. Field **DOLL EAST** Well Type Vertical CONVENTIONAL **Test Type DST #4, JOHNSON, 4368-4417 Formation Well Fluid Type** 01 Oil

2015/01/11

2015/01/12

Start Test Time 22:39:00 **Final Test Time**

TIM VENTERS

TIM VENTERS

KIM SHOEMAKER

2015/01/12

05:17:00

L.D. DRILLING, INC.

Test Recovery:

Start Test Date

Final Test Date

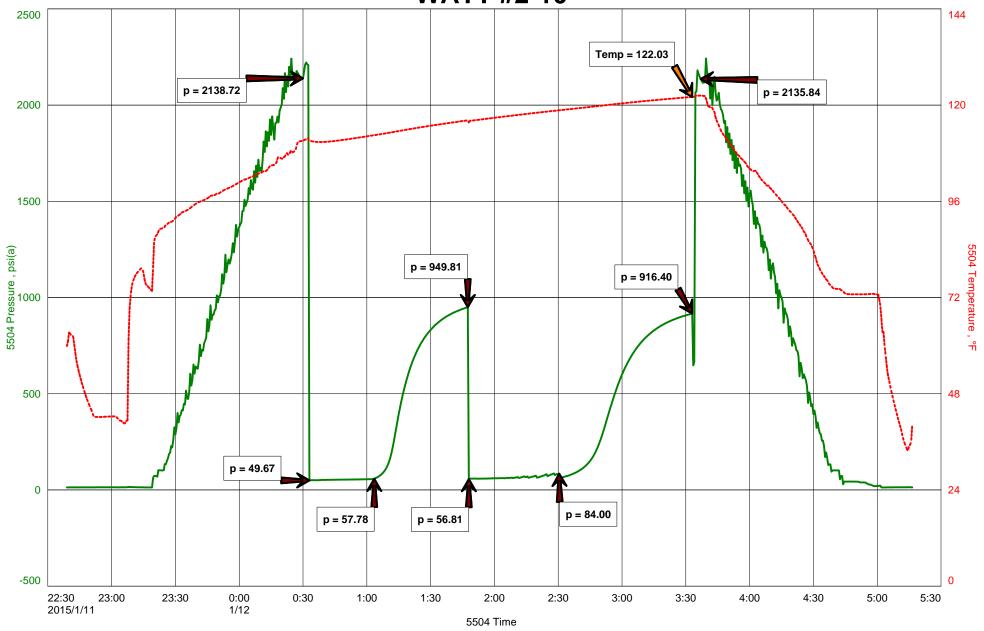
RECOVERED: 10' SOCM, 2% OIL, 98% MUD

TOOL SAMPLE: 2% OIL, 98% MUD

L.D. DRILLING, INC. DST #4, JOHNSON, 4368-4417 Start Test Date: 2015/01/11 Final Test Date: 2015/01/12 WATT #2-10 Formation: DST #4, JOHNSON, 4368-4417

Pool: DOLL EAST Job Number: T433







P.O. Box 157

HOISINGTON, KANSAS 67544 (800) 542-7313

DRILL-STEM TEST TICKET

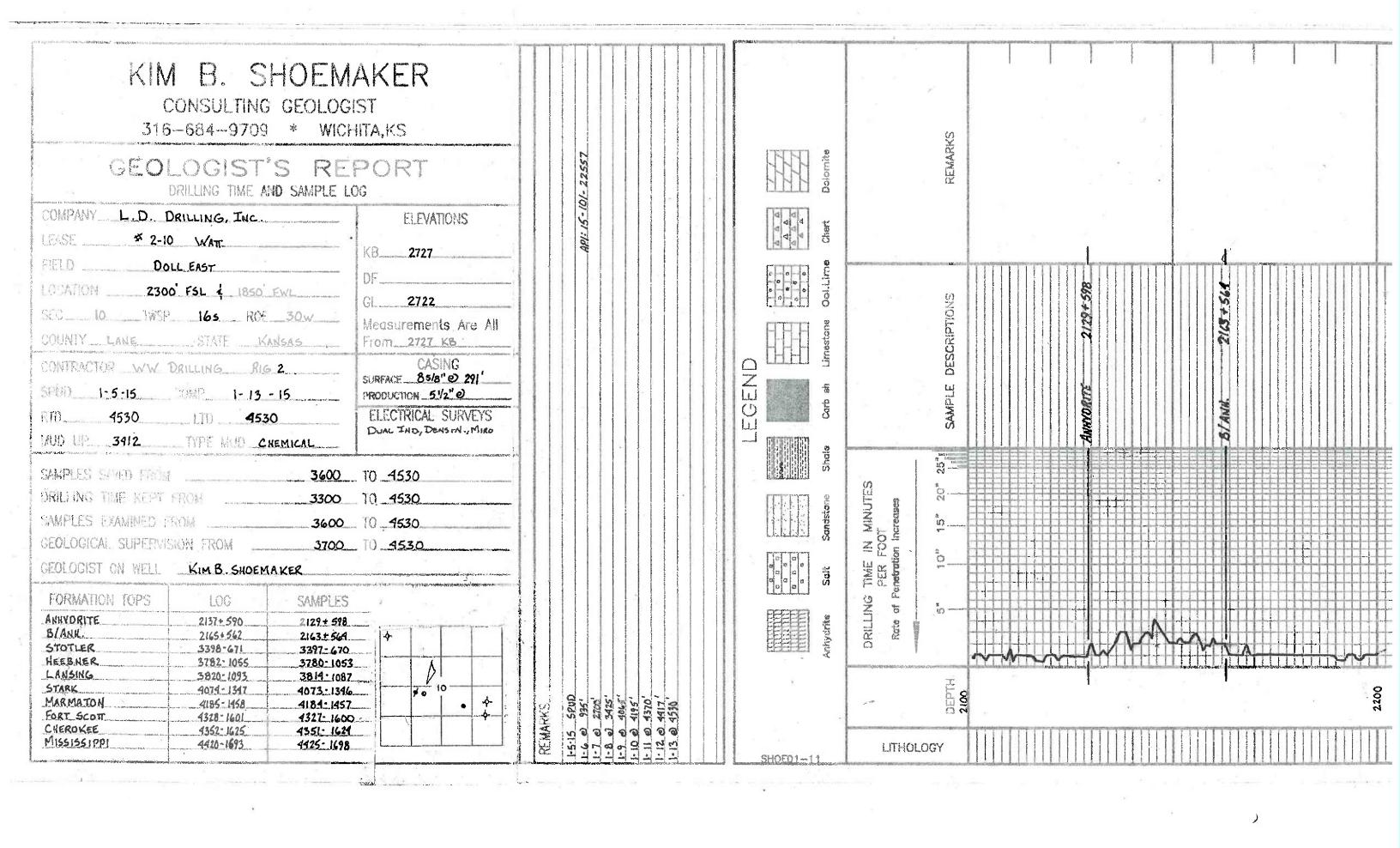
FILE: WATT2-10DST4

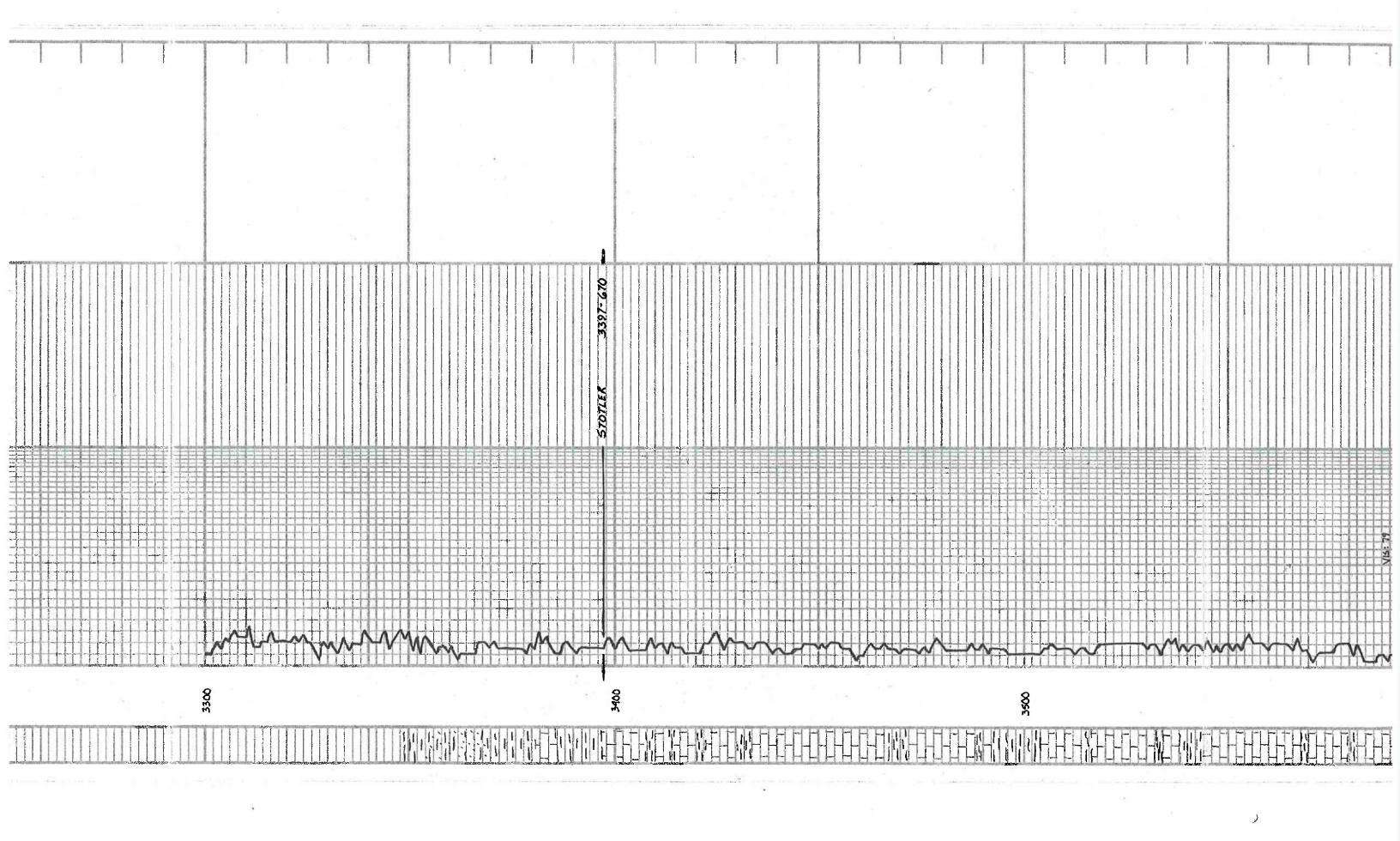
TIME ON: 22:39 1-12-15

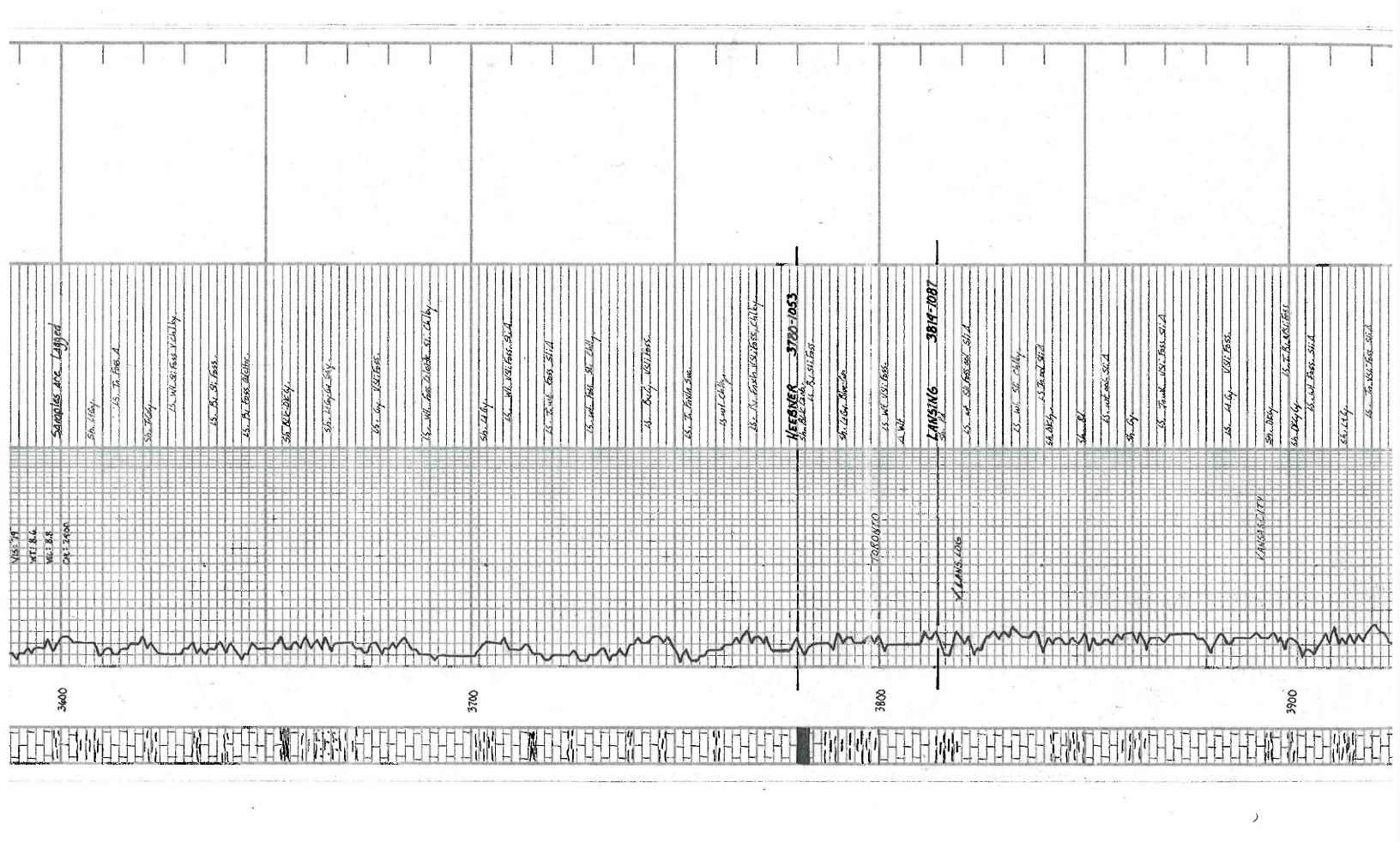
TIME OFF: 05:17 1-12-15

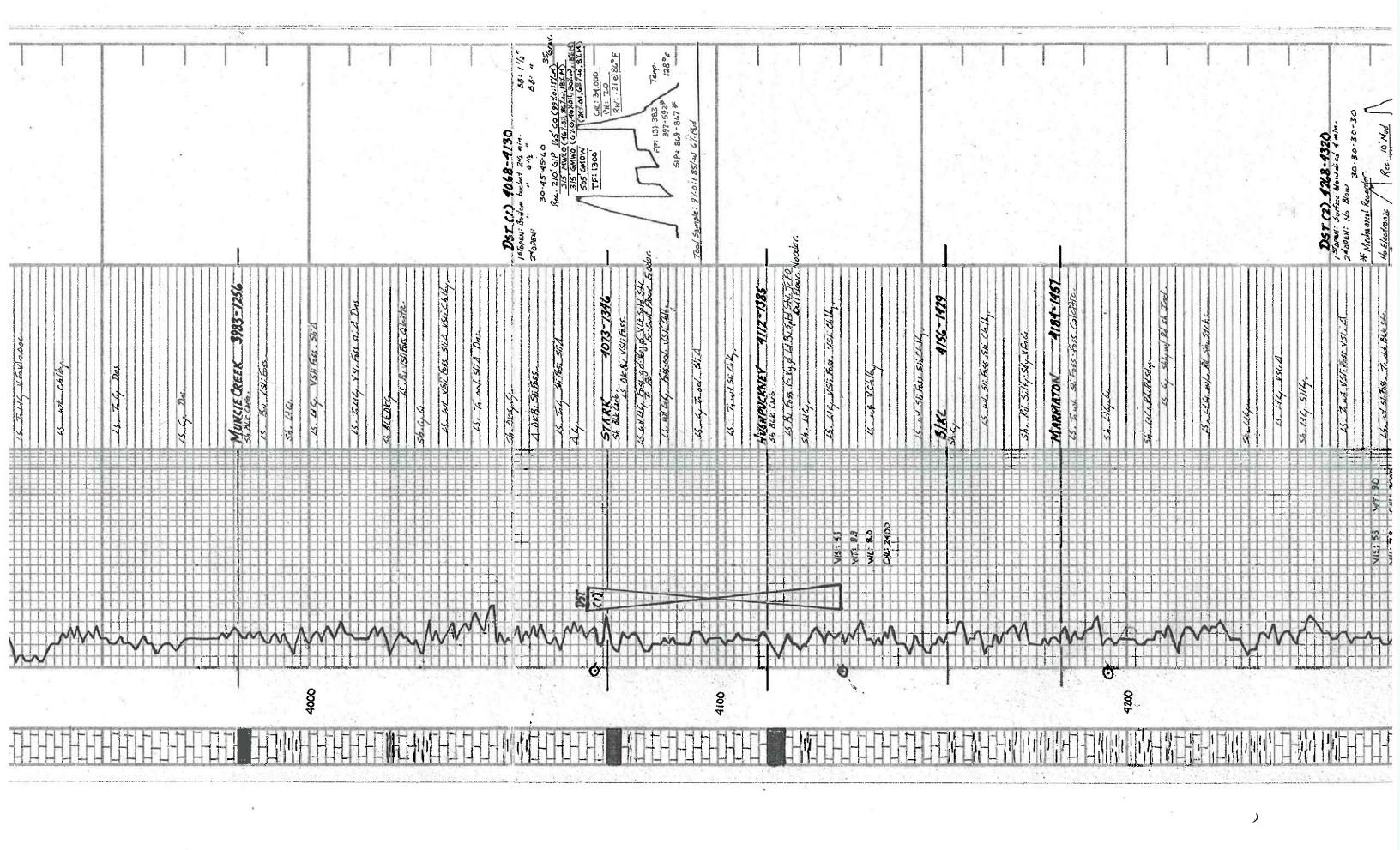
	10.0	L. VVAIIZ	-100014				
Company L.D. DRILLING, INC.			_Lease & Well No. W	/ATT #2-10			
Contractor WW DRILLING, LLC RIC	G #2		Charge to L.D. DRII	LLING, INC.			
Elevation 2727 KB Forma	ation	JOHNSO	N_Effective Pay		_Ft. Ticke	t No	T433
Date 1-12-15 Sec. 10	Twp	16 S R	ange	30 W County	LANE	State_	KANSAS
Test Approved By KIM SHOEMAKER			_ Diamond Representati	veTIM	OTHY T. \	/ENTERS	;
Formation Test No. 4	nterval Tested from	43	368 ft. to	4417 _{ft.} Total	Depth		4417 ft.
Packer Depth4363 _{ft.}	Size6 3/4	in.	Packer depth		_ft. Size	6 3/4	in.
Packer Depth 4368 ft.	Size6 3/4	in.	Packer depth		_ft. Size	6 3/4	in.
Depth of Selective Zone Set						/	
Top Recorder Depth (Inside)		4349 _{ft.}	Recorder Number_	5504	Сар	5,00	<u>0</u> P.S.I.
Bottom Recorder Depth (Outside)		4414 _{ft} .	Recorder Number_	11029	Сар	5,02	²⁵ P.S.I.
Below Straddle Recorder Depth		ft.	Recorder Number_		Сар		_ P.S.I.
Mud TypeCHEMICAL_ Viscosit			Drill Collar Length_	123 ff	. I.D	2 1/	<u>4</u> in.
Weight9.0 Water Loss	7.2	cc.	Weight Pipe Length	0	t. I.D	2 7/	/8in
Chlorides	1,200	P.P.M.	Drill Pipe Length	4217 _f	t. I.D	3 1/	′2in
Jars: MakeSTERLINGSerial Nu	mber	2	Test Tool Length	28 _f	t. Tool Si	ze3_1/	2-IF in
Did Well Flow?NORev	rersed Out	NO	Anchor Length	17	t. Size _	4 1/	2-FH in
Main Hole Size 7 7/8 Too	Joint Size 4 1/	2 XH_in.	32' DP IN ANCHOR Surface Choke Size	1ir	n. Bottom	Choke Siz	ze_5/8_in
Blow: 1st Open: WEAK 1/4 INCH	I BLOW, BUIL	_DING T	O 1 INCH.		(NO	BB)	
2nd Open: NO BLOW THRO	UGHOUT PE	RIOD.			(NO	BB)	
Recovered 10 ft. of SOCM, 2%	OIL, 98% MUD						
Recovered ft. of							
Recoveredft. of							
Recovered ft. of							
Recovered ft. of				F	rice Job		
					ther Charg	jes	
Remarks:				- Ir	nsurance		
TOOL SAMPLE: 2% OIL, 98% MUD					otal		
Time Set Packer(s) 12:33 AM	A.M. _P.M. Time St	arted Off Bo	3:33 AM	A.M. P.M. Maxin	num Tempe	erature1	22 deg.
Initial Hydrostatic Pressure			(A)	2139 P.S.I.			
Initial Flow Period	Minutes	30	(B)	50 P.S.I. to (C)	58	P.S.I.
Initial Closed In Period	Minutes	45	(D)	950 P.S.I.		_	
Final Flow Period	Minutes	45	(E)	57 P.S.I. to (F	-)	84 _F	² .S.I.
Final Closed In Period	Minutes	60	(G)	916 P.S.I.			
Final Hydrostatic Pressure				2136 _{P.S.I.}			
Diamond Testing shall not be liable for damages of	f any kind to the property of	r personnel of th	e one for whom a test is made	or for any loss suffered	or sustained di	rectly or indired	ctly, through

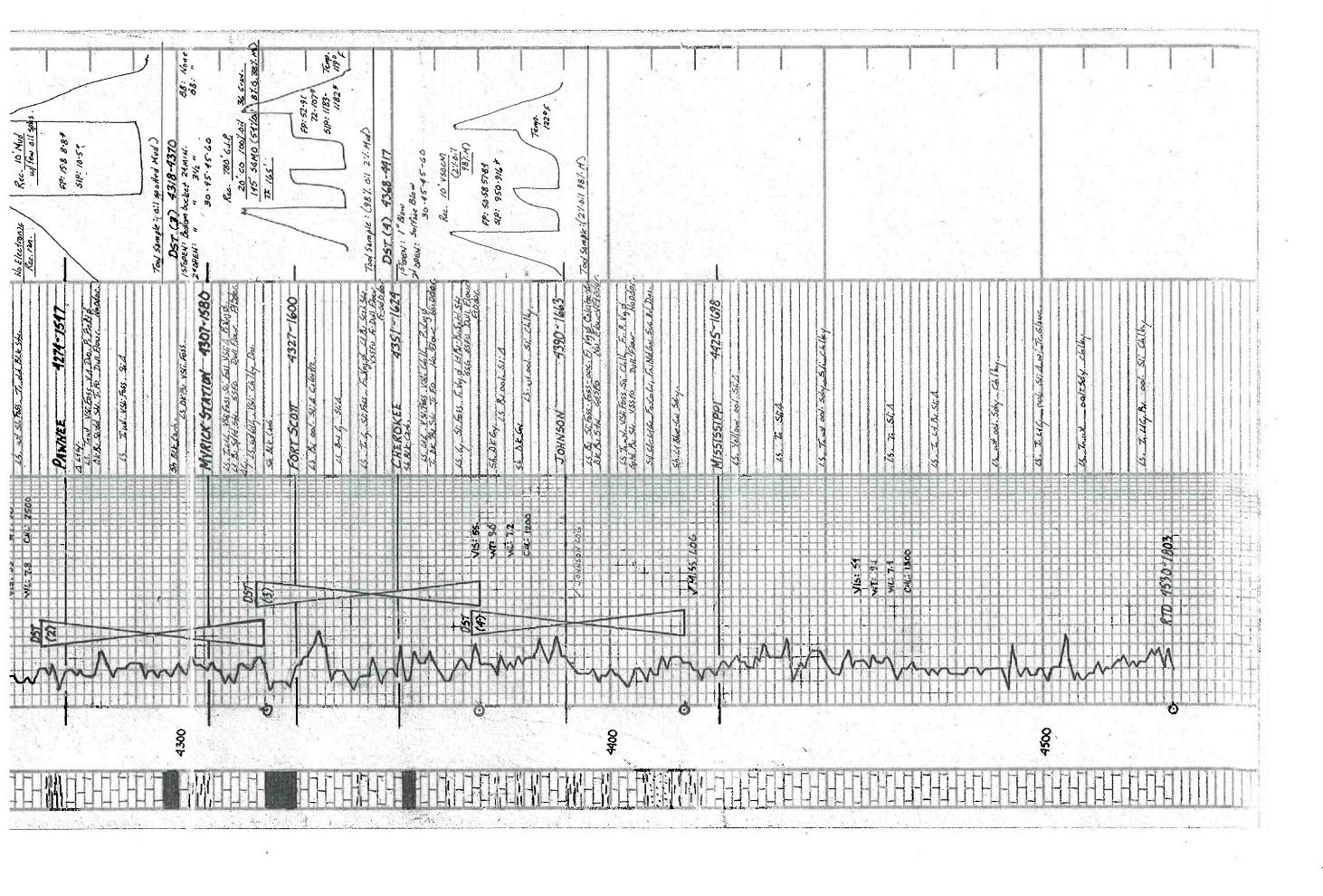
Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.













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

FIELD SERVICE TICKET 1718 11906

PRESSURE PUMPING & WIRELINE 0-16-30 DATE TICKET NO. CUSTOMER ORDER NO.: OLD PROD INJ ☐ WDW DISTRICT WATT Prilling LEASE WELL NO. 2 CUSTOMER STATE 45 LAME COUNTY **ADDRESS** SERVICE CREW MATTAL, MIGYER, CUBB STATE CITY JOB TYPE: ("W **AUTHORIZED BY** DATE TIME **EQUIPMENT#** HRS **EQUIPMENT#** HRS **EQUIPMENT#** HRS TRUCK CALLED ARRIVED AT JOB 5 5 21010 70959 START OPERATION 7686 AM 10 **FINISH OPERATION** RELEASED AM 11.30 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:

(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PI	RICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES	USED UN	IIT QUAN	TITY U	NIT PRICE	\$ AMOUN	Т
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			MATERIALS		%TAX ON	\$		
						TOTAL		
						(Blu)		

SERVICE REPRESENTATIVE MINE MATTER	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: \ \(\) \(KEVI
FIELD SERVICE ORDER NO.	(WELL OWNER OPERATOR CONTRACTOR OF AGEN	TORBL



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124

FIELD SERVICE TICKET

1718 11907 A

Phone 620-672-1201 (ONTIAMATION UF 11906

PRESS	URE PUM	PING & WIRELINE					DATE	TICKET NO	CONTRACT	et menne men	
DATE OF JOB 13 - 15 DISTRICT PROTES CUSTOMER L D OF MANY EQUIPMENT AND SERVICES CITY STATE AUTHORIZED BY EQUIPMENT# HRS EQUIPMENT# HRS E CONTRACT CONDITIONS: (This contract must be signed in the custome products, and/or supplies includes all of and only those terms and conditions appearing become a part of this contract without the written consent of an officer of Basic Energy ITEMPRICE REF. NO. MATERIAL, EQUIPMENT AND SERVICES FIGURE AND FIRST BULK OF I CREYON BIRDLY BULK OF I CREYON BULK BULK BULK OF I CREYON BULK BULK BULK BUL				OF STATE OF	WENT A	lelle r	PROD INJ	☐ WDW	□ SH	STOMER IDER NO.:	415
CUSTOMER L D	0	1.11,09		7	ATT	LES OF L	ie i familie		WELL NO.	2-10	
ADDRESS	- 5- 7-	ALL HITCH		COUNTY	Lin		STATE	K.	5	25	
CITY	1	STATE		SERVICE CRI	EW //		16 CHAN			the.	
AUTHORIZED BY				JOB TYPE:	GV	VW- C	ones				
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQU	IPMENT#	HRS	TRUCK CALI	LED	DATE	AM TIM	ME
MANAGEMENT OF THE PARTY	-						ARRIVED AT	JOB		AM PM	1
CHEN TO STATE OF THE STATE OF T							START OPE	RATION		AM	11-24-7
				TVII A			FINISH OPE	RATION		AM PM	
THEO I VALUE V	V V						RELEASED			AM	ACRES H
Male made at a second				×			MILES FROM	A STATION TO	WELL		
become a part of this cont	ract withou	it the written consent of an offi	icer of Basic	c Energy Se	rvices LP.	5	GIGNED: (WELL OWN	ER, OPERATOR,	CONTR	ACTOR OR A	GENT)
		and the second s	AND SER	VICES US	ED	UNIT	QUANTITY	UNIT PRIC	E	\$ AMOUN	<u>1</u> T
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West House to the state of the		- 1 1 Va / A -						B	OTAL	23,562	93
SERVICE REPRESENTATIVE	n,K	MATTA	THE ABO	VE MATE	RIAL AND SERV	VICE ECEIVE	D BY: 2 A	JAVIS	By	KEND	1

REPRESENTATIVE MIKE MATTA



TREATMENT REPORT

Customer	07,14	119	Le	ease No.					Date 3								
Lease	417		W	/ell #	-72	-10					1	1 -	1 /				
Field Order #	Station					Casing	De	pth	1530	County	he 1	State /					
		5//2	2 511	TAGE LUNG STAND Formation								Legal De	escription	30			
PIPE	FORATING	DATA		FLUID U	SED	ſ	TREATMENT RESUME										
Casing Size	Tubing Siz	e Shots/f	Ft		-Acid	160 5	KS AA	ā	LD	RATE	ISIP	SIP					
Depth	Depth	From	То		Pre F	Pad 325				e 3 a			∌ 5 Min.				
Volume-, 8	Volume	From	То		P.ad	30		60	Myσ				10 Min.				
Max Press	Max Press	_	То		Frac	8		T	Avg				15 Min.				
Well Connection	n Annulus V		То					7	HHP Use	ed			Annulus I	Pressure			
Plug Depth	Packer De	pth From	То		Flush	107.5	ζ		Gas Volu	me			Total Load				
Customer Rep	resentative	L.D.		Station	n Manag	ger Kay	a Gura	hey	6	Treate	er /	1. kg /4	HINTTH!				
Service Units	77596		77696	1910	18		19889		19913			7095	1 2/0/	U			
Driver Names	MATTA		Magr	AW			60	. 1	B			13 -	ACHY				
Time	Casing Pressure	Tubing Pressure	Bbls. Pum	umped Rate			Service Log										
4:00 619		1					run	-5	1/2 1	(river PV 1 of Jul of #57 @21							
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5:58														WA VICTORY			
6:00	1				1		HOOV TO CARIS, BIEN COLO W. BOY										
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							WASH	1	PunP	+ 40	50	Drop	Plug				
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														672-5383			



TREATMENT REPORT

Customer	00	15	11.01		Lea	se No.					Date - 3 - 5									
	ATT	-			We	Well # 2 - 10														
Field Order #			P. a	11		Casing 5 / Depth														
Type Job 12 5/2 2 5794 10						ST	ning		For	mation	Legal Description									
PIPE	DATA		PERF	ORAT	ING E	ATA		FLUID U	SED			TREATMENT RESUME								
Casing Size	Tubing Siz	:e	Shots/Ft			Acid				RA ^T				ATE PRESS ISIP						
Depth	Depth		From		То		Pre F	Pad			Max			5 Min.						
Volume	Volume		From		То		Pad				Min				10 Min.					
Max Press	Max Press	;	From		То		Frac				Avg				15 Min.					
Well Connection	n Annulus V	ol.	From		То						HHP Use	d			Annulus	Pressure				
Plug Depth	Packer De	pth	From		То		Flust	1			Gas Volu	me			Total Load					
Customer Rep	resentative					Station	Mana	ger				Tre	ater							
Service Units																				
Driver Names																				
Time	Casing Pressure		ubing essure	Bbls	. Pump	ed	F	Rate						ice Log						
10:10	ين 2		1					6	STAIT DISPLACEMENT											
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10:20	1500	- 4	<u></u>		5 6				Plug Down retirement Will											
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FIELD SERVICE TICKET 1718 **11550** A

	Pratt, Kansas 6712
ENERGY SERVICES	Phone 620-672-120

		E PUMPIN	IG & WIRELIN	J I	0-16	5 . 2	0		DATE	TICKET I			
DATE OF /- 5	15	DIS	STRICT P_I				WELL X	OLD	PROD INJ	l 🗌 WD'	w □8	USTOMER PRDER NO.:	
CUSTOMER /	D .	Opil	Ling	$\mathcal{I}_{\mathcal{U}}$			LEASE U/	1 T		a	10	WELL NO.	
ADDRESS			0				COUNTY /	ane		STA	ATE /55	5	
CITŸ			STATE				SERVICE C		James 1	Bilen	50	9	
AUTHORIZED B	BY						JOB TYPE:		85/8	50	1590	<u>~~~~</u>	:
EQUIPMENT		HRS	EQUIPM	ENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CAL	LED	1.5P^)	5 AM J	ME ///
33708-209		30 m/							ARRIVED AT	T JOB	1	# 17	00
19826- 210 92011	2 <u>10 2</u>	Om 1	1		 				START OPE	RATION	7	AM /S	36
1071/									FINISH OPE	RATION		AM / So	00
									RELEASED			AM 190	20
			MONESTE CONTROL						MILES FROM	A STATION	I TO WELI	- 10	0
The undersigned products, and/or su become a part of the ITEM/PRICE	pplies inclu	ides all of a without th	and only those e written cons	terms and o ent of an offi	onditions apposer of Basic I	pearing on Energy Se	the front and bac rvices LP.	k of this do	GUMENT. No addit	tional or subs	stitute terms	and/or condition	GENT)
REF. NO.		MA	TERIAL, EQI	JIPMENT A	ND SERV	ICES US	ED	UNIT	QUANTITY	UNIT	PRICE	\$ AMOUN	٩T
CP 103	60/	4 <u>0 </u>	02					55	300			3,600	ec
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CHE	MICAL / A	CID DATA:								SUI	B TOTAL	11,870	. 20
		_					VICE & EQUIF	PMENT		ON\$		• ' /	
						MAT	ERIALS			ON\$			
									Dice	in) cu	TOTAL	7,950	74
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SERVICE REPRESENTATIVE / FIELD SERVICE OF SER NO. THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



TREATMENT REPORT

Customer /	1) Dn 1	11:00		Lease No.					Date			Λ .	
Lease // / G	1 1	-149		Well# 2.	10					-	5 -	201	
Field Order # 5	Station			-		Casing 8	Depti Depti	292	County	4//	0		State 455
Type Job	10/11/ 4	5/8 Su	irsac.	1			Formation				Legal Desc	cription 10	7-16:30
PIPE		PERFO				FLUID U	SED		Т	REATN	JENT R	ESUME	
Casing/Stag	Tubing Size	Shots/Ft			Acid			F	RATE	PRESS	5	ISIP	
Depth 292	Depth	From	То		Pre P	ad		Max				5 Min.	·*····································
Volume 17	Volume	From	То		Pad			Min				10 Min.	
Max Press	Max Press	From	То		Frac			Avg				15 Min.	
Well Connection	Annulus Vol.	From	То					HHP Used			,	Annulus Pro	essure
PlugnDentin	Packer Depti	h From	То		Flush			Gas Volum	ne		-	Total Load	
Customer Repre	esentative LO	nn y		Station	Manag	er Ke l	11'5		Treat	er Ja	De_		
Service Units	3708 2	0420		1987	62	1010		92911					
Driver Names	Shu	vh		Rall	e1/10	Sbory		JO-6					
Time	Casing Pressure	Tubing Pressure	Bbls. Pu	mped	/ Ra	ate				Service	Log		
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												4.00	
10244	NI= Elime	valor	Boy	2612	Prat	+ KS 6	7124-86	13 • (620	1) 672	-1201	• Fax	(620) 6	72-5383