

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1246617
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 |
|-----------------------------------|-----------------|---|

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: _____

1246617

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

| 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: <input type="checkbox"/> Yes <input type="checkbox"/> No |
|----------------|-------|---------|------------|---|

| | |
|---|--|
| Date of First, Resumed Production, SWD or ENHR. | Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____ |
|---|--|

| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
|-----------------------------------|-----------|---------|-------------|---------------|---------|
| | | | | | |

| | | |
|--|--|---|
| 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. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ | PRODUCTION INTERVAL: _____ _____ |
|--|--|---|

| | |
|-----------|-------------------------|
| Form | ACO1 - Well Completion |
| Operator | Chieftain Oil Co., Inc. |
| Well Name | AHS Cattle Co. 10 |
| Doc ID | 1246617 |

All Electric Logs Run

| |
|------------------------------------|
| |
| Borehole Volume 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. 10 |
| Doc ID | 1246617 |

Tops

| Name | Top | Datum |
|----------------|------|-------|
| Kansas City | 4370 | -2978 |
| Stark SH | 4515 | -3123 |
| Swope | 4528 | -3136 |
| Cherokee SH | 4743 | -3351 |
| Mississippian | 4812 | -3420 |
| Kinderhook SH | 5050 | -3658 |
| Chattanooga SH | 5131 | -3739 |
| Maquoketa SH | 5162 | -3770 |
| Viola | 5218 | -3826 |
| Base Viola | 5318 | -3926 |
| Simpson | 5338 | -3946 |
| Total Depth | 5338 | 3946 |



| | | | |
|--------|---------|--------|--------------|
| PAGE | CUST NO | YARD # | INVOICE DATE |
| 1 of 1 | 1000719 | 1718 | 12/29/2014 |

INVOICE NUMBER
91686994

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 10
 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 |
|----------|-------------|--------------------|---------------|------------|
| 40800970 | 27463 | | Net - 30 days | 01/28/2015 |

| | QTY | U of M | UNIT PRICE | INVOICE AMOUNT |
|--|--------|--------|------------|----------------|
| <i>For Service Dates: 12/28/2014 to 12/28/2014</i> | | | | |
| 0040800970 | | | | |
| 171812104A Cement-New Well Casing/Pi 12/28/2014 Cement 13 3/8 Conductor | | | | |
| 60/40 POZ | 350.00 | EA | 7.92 | 2,771.65 T |
| Celloflake | 88.00 | EA | 2.44 | 214.87 T |
| Calcium Chloride | 903.00 | EA | 0.69 | 625.70 T |
| "Unit Mileage Chg (PU, cars one way)" | 50.00 | MI | 2.97 | 148.48 |
| Heavy Equipment Mileage | 100.00 | MI | 4.95 | 494.94 |
| "Proppant & Bulk Del. Chgs., per ton mil | 753.00 | EA | 1.65 | 1,242.29 |
| Depth Charge; 0-500' | 1.00 | EA | 659.92 | 659.92 |
| Blending & Mixing Service Charge | 350.00 | BAG | 0.92 | 323.36 |
| "Service Supervisor, first 8 hrs on loc. | 1.00 | EA | 115.49 | 115.49 |

ENTERED
 DEC 31 2014
 9/21 BC

| | | | |
|---------------------------|--------------------------------------|----------------------|-----------------|
| PLEASE REMIT TO: | SEND OTHER CORRESPONDENCE TO: | SUB TOTAL | 6,596.70 |
| BASIC ENERGY SERVICES, LP | BASIC ENERGY SERVICES, LP | TAX | 258.27 |
| PO BOX 841903 | 801 CHERRY ST, STE 2100 | INVOICE TOTAL | 6,854.97 |
| DALLAS, TX 75284-1903 | FORT WORTH, TX 76102 | | |



| | | | | | |
|---|----------------------------|------------------------|----------------------|--|--------------------|
| Customer <i>Chiefman Oil Company</i> | | Lease No. | | Date <i>12/28/14</i> | |
| Lease <i>AHS Little Company</i> | | Well # <i>10</i> | | | |
| Field Order # <i>12104A</i> | Station <i>Pratt ks</i> | Casing <i>1 3/8</i> | Depth <i>313'</i> | County <i>Barber</i> | State <i>KS</i> |
| Type Job <i>1 3/8 Conductor Pipe CNW</i> | | | Formation | Legal Description <i>12-555-126</i> | |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | | |
|---------------------------------|--------------|------------------|----|------------|------------|------------------|------------------|--|
| Casing Size | Tubing Size | Shots/Ft | | Acid | RATE | PRESS | ISIP | |
| <i>1 3/8</i> | | | | | | | 5 Min. | |
| Depth <i>313'</i> | Depth | From | To | Pre Pad | Max | | | |
| Volume <i>45.8</i> | Volume | From | To | Pad | Min | | 10 Min. | |
| Max Press <i>500</i> | Max Press | From | To | Frac | Avg | | 15 Min. | |
| Well Connection <i>8 5/8</i> | Annulus Vol. | From | To | | HHP Used | | Annulus Pressure | |
| Plug Depth | Packer Depth | From | To | Flush | Gas Volume | | Total Load | |

| | | | | | | | | |
|--|--------------|--------------|---|--------------|--|--------------------------------|--|--|
| Customer Representative <i>Ryan Moltz</i> | | | Station Manager <i>Kevin Goodley</i> | | | Treater <i>Scott Givens</i> | | |
| Service Units | <i>38970</i> | <i>27465</i> | <i>19960</i> | <i>19866</i> | | | | |
| Driver Names | <i>Scott</i> | <i>Tosh</i> | <i>Arion</i> | | | | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|-------------|-----------------|-----------------|--------------|------------|--|
| <i>6:00</i> | | | | | <i>On location Safety meeting. Pig up.</i> |
| | | | | | <i>Circulating on arrival on bottom.</i> |
| <i>8:02</i> | <i>100</i> | | | <i>4</i> | <i>Pump H₂O spacer</i> |
| <i>8:04</i> | <i>250</i> | | <i>5</i> | <i>5</i> | <i>Mix 350 sacks 60/40 port 14.8ppg</i> |
| <i>8:20</i> | <i>750</i> | | <i>75.45</i> | <i>4.9</i> | <i>start displacement</i> |
| <i>8:24</i> | <i>225</i> | | <i>18</i> | <i>4.3</i> | <i>Circulate cement to surface</i> |
| <i>8:30</i> | <i>200</i> | | <i>22</i> | | <i>Displacement complete</i> |
| <i>8:30</i> | <i>200</i> | | | | <i>shut down shut in well Head</i> |
| | | | | | <i>Job Complete</i> |
| | | | | | <i>Circulated 77 bbls to surface</i> |



| | | | |
|--|--------------------|----------------|----------------------------|
| PAGE 1 of 1 | CUST NO 1000719 | YARD # 1718 | INVOICE DATE 12/30/2014 |
| INVOICE NUMBER 91689441 | | | |

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 10
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

| JOB # | EQUIPMENT # | PURCHASE ORDER NO. | TERMS | DUE DATE |
|--|-------------|--------------------|---------------|------------|
| 40801793 | 19905 | | Net - 30 days | 01/29/2015 |
| <i>For Service Dates: 12/30/2014 to 12/30/2014</i> | | | | |
| 0040801793 | | | | |
| ENTERED JAN 13 2015 9/21 BC | | | | |
| 171811902A Cement-New-Well Casing/Pi 12/30/2014 | | | | |
| A-Con Blend Common | | 250.00 | EA | 11.88 |
| 60/40 POZ | | 200.00 | EA | 7.92 |
| Celloflake | | 113.00 | EA | 2.44 |
| Calcium Chloride | | 1,221.00 | EA | 0.69 |
| "Top Rubber Cmt Plug, 8 5/8"" | | 1.00 | EA | 148.49 |
| "8 5/8"" Basket (Blue)" | | 1.00 | EA | 207.88 |
| Flapper Type Insrt Float Valve 8 5/8(Blu | | 1.00 | EA | 184.79 |
| "Unit Mileage Chg (PU, cars one way)" | | 50.00 | MI | 2.97 |
| Heavy Equipment Mileage | | 150.00 | MI | 4.95 |
| "Proppant & Bulk Del. Chgs., per ton mil | | 1,018.00 | EA | 1.65 |
| Depth Charge; 501'-1000' | | 1.00 | EA | 791.94 |
| Blending & Mixing Service Charge | | 450.00 | BAG | 0.92 |
| Plug Container Util. Chg. | | 1.00 | EA | 164.99 |
| "Service Supervisor, first 8 hrs on loc. | | 1.00 | EA | 115.49 |

| | | | |
|---------------------------|-------------------------------|---------------|-----------|
| PLEASE REMIT TO: | SEND OTHER CORRESPONDENCE TO: | SUB TOTAL | 10,275.47 |
| BASIC ENERGY SERVICES, LP | BASIC ENERGY SERVICES, LP | TAX | 405.81 |
| PO BOX 841903 | 801 CHERRY ST, STE 2100 | INVOICE TOTAL | 10,681.28 |
| DALLAS, TX 75284-1903 | FORT WORTH, TX 76102 | | |





BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

12-355-12W

FIELD SERVICE TICKET
1718 11902 A

DATE _____ TICKET NO. _____

| | | | | | | | | | |
|-------------------------------------|-----|--|----------|------------|-----|----------------------------|----------|----|-------|
| DATE OF JOB 12-30-14 DISTRICT Pratt | | 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 Cheffman Oil Company | | LEASE AHS CATCO COMPANY WELL NO. 10 | | | | | | | |
| ADDRESS | | COUNTY Barber | STATE KS | | | | | | |
| CITY STATE | | SERVICE CREW MATTEL, ERNST, GIBSON, COBB | | | | | | | |
| AUTHORIZED BY | | JOB TYPE: CNW 8 5/8 34 RLL | | | | | | | |
| EQUIPMENT# | HRS | EQUIPMENT# | HRS | EQUIPMENT# | HRS | TRUCK CALLED 12-29-14 | DATE | AM | TIME |
| 37550 | 1 | 19959/73764 | 1 | | | | 12-29-14 | PM | 10:00 |
| | | | | | | ARRIVED AT JOB | 12-30-14 | AM | 1:45 |
| 77686/19905 | 1 | | | | | START OPERATION | | AM | 12:50 |
| | | | | | | FINISH OPERATION | | PM | 1:45 |
| 19960/19300 | 1 | | | | | RELEASED | | AM | 2:45 |
| | | | | | | MILES FROM STATION TO WELL | | | 50 |

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 |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| CP 101 | A-CUR | SK | 25 | | 4,500 00 |
| CP 103 | 60/40 Poz | SK | 200 | | 2,400 00 |
| CC 102 | CELLULOSE | lb | 115 | | 418 10 |
| CC 109 | CALCIUM CHLORIDE | lb | 1221 | | 1,282 05 |
| CF 105 | TOP RUBBER PLUG 8 7/8 | EA | 1 | | 225 00 |
| CF 1455 | FLAPPER TYPE INSERT 8 5/8 | EA | 1 | | 280 00 |
| CF 1903 | BASOL 8 5/8 | EA | 1 | | 315 00 |
| E 100 | P.U. MILLS | M | 50 | | 225 00 |
| E 101 | HEAVY EQ MILLS | M | 150 | | 1,125 00 |
| E 113 | PUMP + BULK DEL. | PM | 1018 | | 2,543 75 |
| CC 201 | DEPTH CHARGE 501-1000' | 4hr | 1 | | 1,200 00 |
| CC 240 | BLEND + MIX CHARGE | SK | 450 | | 630 00 |
| 5003 | SUPERVISOR | EA | 1 | | 175 00 |
| CC 504 | RIMY COAT | JOB | 1 | | 250 00 |

SUB TOTAL 15,568 90

| CHEMICAL / ACID DATA: | | | |
|-----------------------|--|--|--|
| | | | |
| | | | |
| | | | |

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

TOTAL *[Signature]* 10,275 47

SERVICE REPRESENTATIVE Mike Mattel

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

FIELD SERVICE ORDER NO.

| | | |
|-------------------------------|------------------|---------------------------------|
| Customer BASIN OIL COMPANY | Lease No. | Date 12-30-14 |
| Lease #1173 CATTLE COMPANY | Well # 10 | |
| Field Order # 11902 | Station Pratt | Casing S/S 5 7/8 |
| | | Depth 475.5 |
| | | County BAIRD |
| | | State KS |
| Type Job COW 8 5/8 Sucker | Formation | Legal Description 12-353-12W |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | | |
|-----------------|---------------------|------------------|----|---------------------------|------------|------------------|------------------|--|
| Casing Size | Tubing Size | Shots/Ft | | Acid | RATE | PRESS | ISIP | |
| 5 7/8 | | | | 250 SKI H-CO ₂ | | | 5 Min. | |
| Depth 3633 | Depth 436.33 | From | To | Pre Pad | Max | | 10 Min. | |
| Volume 6.2 | Volume | From | To | Pad | Min | | 15 Min. | |
| Max Press 500 | Max Press | From | To | Frac | Avg | | Annulus Pressure | |
| Well Connection | Annulus Vol. | From | To | | HHP Used | | Total Load | |
| Plug Depth 1533 | Packer Depth 893.41 | From | To | Flush 56.8 | Gas Volume | | | |

| | | |
|--------------------------------------|---------------------------------|------------------------|
| Customer Representative KVIN MULZ | Station Manager Kevin Guidry | Treater Mike Mattal |
| Service Units 37556 | 77686 | 19905 |
| Driver Names MATTAL | ERIBT | SIBSU |
| | | 19960 |
| | | 19860 |
| | | 19959 |
| | | 73769 |
| | | COE B |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|-------|-----------------|-----------------|--------------|------|--|
| 9:15 | | | | | ON LOCATION |
| 10:10 | | | | | Run 8 5/8 24" CSNG, BASIN OIL # 13 |
| 11:55 | | | | | CSNG ON BOTTOM |
| 12:10 | | | | | Hook to CSNG / Began circ. w. Rig |
| 12:50 | 300 | | 3 | 5.5 | Pump 3 bit water |
| 12:56 | 250 | | 110 | 5.5 | Mix 250 SKI H-CO ₂ |
| 1:16 | 250 | | 43 | 5.5 | Mix 200 SKI CO ₂ /NO PAD |
| 1:24 | - | | - | - | Release Plug |
| 1:28 | 200 | | - | 5 | START DISPLAY ALARM |
| 1:33 | 150 | | 30 | 2 | Lost circ. slowed rate |
| 1:40 | 350 | | 56.8 | - | Plug down, released, DID NOT hold |
| 1:45 | 350 | | - | - | Repressured + shut in well. |
| | | | | | cellar never dropped |
| | | | | | 313' 1 3/8 conductor previously cemented to sink |
| | | | | | JOB COMPLETE |
| | | | | | THANK YOU! |
| | | | | | MIKE MATTAL |
| | | | | | SHAWN AARON, etc |



| | | | |
|--|--------------------|----------------|----------------------------|
| PAGE 1 of 1 | CUST NO 1000719 | YARD # 1718 | INVOICE DATE 01/06/2015 |
| INVOICE NUMBER 91693505 | | | |

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 10
 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 | |
|---|-------------|--------------------|---------------|----------------|------------|
| 40803161 | 19843 | | Net - 30 days | 02/05/2015 | |
| For Service Dates: 01/05/2015 to 01/05/2015 0040803161 171811762A Cement-New Well Casing/Pi 01/05/2015 Cement 5 1/2" Longstring | | QTY U of M | UNIT PRICE | INVOICE AMOUNT | |
| | | 275.00 | EA | 11.22 | 3,085.31 T |
| | | 52.00 | EA | 2.64 | 137.27 T |
| | | 1,364.00 | EA | 0.33 | 450.09 T |
| | | 259.00 | EA | 3.40 | 880.28 T |
| | | 208.00 | EA | 4.95 | 1,029.53 T |
| | | 500.00 | EA | 0.99 | 494.97 T |
| | | 1,375.00 | EA | 0.44 | 607.98 T |
| | | 1.00 | EA | 263.98 | 263.98 |
| | | 1.00 | EA | 237.58 | 237.58 |
| | | 9.00 | EA | 72.60 | 653.36 |
| | | 2.00 | EA | 191.39 | 382.77 |
| | | 50.00 | MI | 2.97 | 148.49 |
| | | 100.00 | MI | 4.95 | 494.97 |
| | | 648.00 | EA | 1.65 | 1,069.13 |
| | | 1.00 | EA | 1,900.67 | 1,900.67 |
| | | 275.00 | BAG | 0.92 | 254.08 |
| | | 1.00 | EA | 164.99 | 164.99 |
| | | 1.00 | EA | 115.49 | 115.49 |

ENTERED
 JAN 08 2015
 9304 BC

| | | | |
|----------------------------------|--------------------------------------|----------------------|------------------|
| PLEASE REMIT TO: | SEND OTHER CORRESPONDENCE TO: | SUB TOTAL | 12,370.94 |
| BASIC ENERGY SERVICES, LP | BASIC ENERGY SERVICES, LP | TAX | 478.01 |
| PO BOX 841903 | 801 CHERRY ST, STE 2100 | INVOICE TOTAL | 12,848.95 |
| DALLAS, TX 75284-1903 | FORT WORTH, TX 76102 | | |



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 11762 A

DATE _____ TICKET NO. _____

| | | | | | | | | | | |
|--|-----------|--|-----|------------|-----|----------------------------|-----------------|----|----|--------------|
| DATE OF JOB <u>01-05-15</u> DISTRICT <u>Pratt KC</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>Chickford Co</u> | | LEASE <u>AHS CATTLE Co.</u> 10 WELL NO. | | | | | | | | |
| ADDRESS | | COUNTY <u>BARBER</u> STATE <u>KC</u> | | | | | | | | |
| CITY STATE | | SERVICE CREW <u>Sullivan, Edwards, Gibson</u> | | | | | | | | |
| AUTHORIZED BY | | JOB TYPE: <u>CNW 5 1/2 Longstay</u> | | | | | | | | |
| EQUIPMENT# | HRS | EQUIPMENT# | HRS | EQUIPMENT# | HRS | TRUCK CALLED | DATE | AM | PM | TIME |
| <u>84481-1984</u> | <u>50</u> | <u>m</u> | | | | | <u>01-05-15</u> | | | <u>9:30</u> |
| <u>19902-19860</u> | <u>50</u> | <u>me</u> | | | | ARRIVED AT JOB | | | | <u>7:00</u> |
| <u>37900</u> | | | | | | START OPERATION | | | | <u>10:20</u> |
| | | | | | | FINISH OPERATION | | | | <u>11:00</u> |
| | | | | | | RELEASED | | | | <u>11:45</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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

| ITEM/PRICE REF. NO. | MATERIAL, EQUIPMENT AND SERVICES USED | UNIT | QUANTITY | UNIT PRICE | \$ AMOUNT |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| CP 105 | AA-2 cut | SK | 225 | | 3,825.00 |
| CP 105 | AA-7 cut | SK | 50 | | 950.00 |
| CC 105 | C-41 P | lb | 52 | | 208.00 |
| CC 111 | SALT | lb | 1364 | | 682.00 |
| CC 115 | C-44 | lb | 259 | | 1,333.95 |
| CC 129 | 74A-322 | lb | 208 | | 1,560.00 |
| CC 201 | 7.5 sand | lb | 1375 | | 921.25 |
| CF 607 | LATCH down Plug-BAR/1 5 1/2 | SA | 1 | | 400.00 |
| CF 1251 | Auto. Drill shoe | SA | 1 | | 360.00 |
| CF 1651 | Telescope | SA | 9 | | 990.00 |
| CF 1901 | BASKET | SA | 7 | | 590.00 |
| CC 151 | MUD FLK | gal | 500 | | 750.00 |
| E 100 | Drill rod | in | 50 | | 225.00 |
| F 101 | Hardy Sand | in | 100 | | 750.00 |
| C 113 | Bulk Delivery Tr | TM | 648 | | 1,619.75 |
| CE 206 | DEPTH check SWOC; 100 cc | SA | 1 | | 2,890.00 |
| CE 240 | Blow - 1000 | SK | 275 | | 395.00 |
| CE 304 | Plug lost | SK | 1 | | 250.00 |
| SOO 3 | Servicing | SA | 1 | | 175.00 |

SUB TOTAL 18,742.85

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

TOTAL 12,370.94

| CHEMICAL / ACID DATA: | | | |
|-----------------------|--|--|--|
| | | | |
| | | | |
| | | | |

SERVICE REPRESENTATIVE Robert [Signature]

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]

FIELD SERVICE ORDER NO. _____

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

| | | |
|--|--------------------------|--------------------------------------|
| Customer <i>Chicktown Oil</i> | Lease No. | Date <i>01-05-15</i> |
| Lease <i>AHS CATTLE CO</i> | Well # <i>10</i> | |
| Field Order # <i>11762</i> | Station <i>PRH-11</i> | Casing <i>5 1/2</i> |
| | | Depth <i>5436</i> |
| Type Job <i>CNW 5 1/2 long stop</i> | Formation | County <i>BARBER</i> |
| | | State <i>KS</i> |
| | | Legal Description <i>12-35-12</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>5436</i> | Depth | From | To | Pre Pad | Max | | | 5 Min. |
| Volume <i>129</i> | Volume | From | To | Pad | Min | | | 10 Min. |
| Max Press <i>2,000</i> | Max Press | From | To | Frac | Avg | | | 15 Min. |
| Well Connection <i>PC</i> | Annulus Vol. | From | To | | HHP Used | | | Annulus Pressure |
| Plug Depth <i>5414</i> | Packer Depth | From | To | Flush | Gas Volume | | | Total Load |

| | | |
|---|--------------------------------------|----------------------------------|
| Customer Representative | Station Manager <i>DAVE SCOTT</i> | Treater <i>Robert Jullien</i> |
| Service Units <i>37900 84951 19843 19960 19860</i> | | |
| Driver Names <i>Jullien EDWARDS T. BROWN</i> | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|--------------|-----------------|-----------------|--------------|----------|---------------------------------|
| <i>2:00</i> | | | | | <i>ON LOC</i> |
| <i>9:10</i> | | | | | <i>CASING and BOTTOM</i> |
| <i>9:20</i> | | | | | <i>Ri. circ casing</i> |
| <i>10:20</i> | | | <i>5</i> | <i>3</i> | <i>BY SPACER</i> |
| | <i>200</i> | | <i>12</i> | | <i>MUD FLODY</i> |
| | | | <i>5</i> | | <i>ST SPACER</i> |
| | | | | <i>5</i> | <i>MIX CNT 22.5 SK AA-2 CNT</i> |
| | | | <i>57</i> | | <i>CNT MIXED SHUT DOWN</i> |
| | | | | | <i>WASH LIDER PUMP</i> |
| | | | | | <i>RELEASE PLUG</i> |
| | | | | <i>6</i> | <i>ST. DISP</i> |
| | | | | | <i>BY</i> |
| | <i>800</i> | | | <i>4</i> | <i>SLOW RATE</i> |
| <i>11:00</i> | <i>1,850</i> | | <i>129</i> | | <i>slow down</i> |
| | | | <i>7</i> | | <i>plug R.4 w/30sk</i> |
| | | | <i>5</i> | | <i>plug and 20 sk.</i> |

SOB completed
[Signature]

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

| | |
|----------------------------------|------------------------|
| Fracture Start Date/Time: | 2/25/15 10:35 |
| Fracture End Date/Time: | 2/25/15 12:30 |
| State: | Kansas |
| County: | Barber |
| API Number: | 15-007-24255-0000 |
| Operator Name: | Chieftain Oil Co. Inc. |
| Well Name: | AHS Cattle Co. #10 |
| Federal Well: | |
| Longitude: | -98.569373 |
| Latitude: | 37.0134866 |
| Long/Lat Projection: | NAD27 |
| True Vertical Depth (TVD): | 4,800' |
| Total Clean Fluid Volume* (gal): | 409,400 |

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

| Additive | Specific Gravity | Additive Quantity | Mass (lbs) | |
|---------------------|------------------|-------------------|------------|-----|
| Water | 1.00 | 409,400 | 3,416,443 | gal |
| Sand (Proppant) | 2.65 | 445,700 | 445,700 | lb |
| Plexcide B7 | 1.33 | 22 | 244 | gal |
| Plexcide B7 | 1.33 | 22 | 244 | gal |
| Plexgel Breaker XPA | 1.03 | 67 | 576 | gal |
| Plexset 730 | 0.90 | 0 | 0 | gal |
| Plexset 730 | 0.90 | 0 | 0 | gal |
| Plexsurf 580 ME | 0.95 | 103 | 817 | gal |
| Plexsurf 580 ME | 0.95 | 103 | 817 | gal |
| Plexslick 957 | 1.11 | 249 | 2,306 | gal |
| Claymax | 1.09 | 205 | 1,865 | 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 |
| | | | | gal |
| | | | | gal |

Total Slurry Mass (Lbs)
3,885,017

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% | 3,416,443 | 87.93894% | Water |
| Sand (Proppant) | Uniman | Proppant | Crystalline Silica in the form of Quartz | 14808-60-7 / 238-878-4 | 99.90% | 445,254 | 11.46081% | Sand (Proppant) |
| Plexcide B7 | Chemplex | Biocide | Sodium Hydroxide | 1310-73-2 | 4.99% | 12 | 0.00031% | Plexcide B7 |
| Plexcide B7 | Chemplex | Biocide | Alkaline Bromide Salts (non-hazardous) | NA | 0.00% | 0 | 0.00000% | Plexcide B7 |
| Plexgel Breaker XPA | Chemplex | Slickwater Breaker | Hydrogen Peroxide | 7722-84-1 | 7.00% | 40 | 0.00104% | Plexgel Breaker XPA |
| Plexset 730 | Chemplex | Activator | Methanol | 67-56-1 | 50.00% | 0 | 0.00000% | Plexset 730 |
| Plexset 730 | Chemplex | Activator | Alcohol Ethoxylates | Mixture | 60.00% | 0 | 0.00000% | Plexset 730 |
| Plexsurf 580 ME | Chemplex | Product Stabilizer | Methyl Alcohol | 67-56-1 | 10.00% | 82 | 0.00210% | Plexsurf 580 ME |
| Plexsurf 580 ME | Chemplex | Product Stabilizer | 2-Butoxyethanol | 111-76-2 | 50.00% | 408 | 0.01051% | Plexsurf 580 ME |
| Plexslick 957 | Chemplex | Friction Reducer | Petroleum Hydrotreated Light Distillate | 64742-47-8 | 25.00% | 577 | 0.01484% | Plexslick 957 |
| Claymax | Chemplex | Clay Stabilizer | No Hazardous Ingredient | NA | 0.00% | 0 | 0.00000% | Claymax |
| Plexgel 907L-EB | Chemplex | Gelling Agent | Distillates, Hydrotreated Light | 64742-47-8 | 50.00% | 1,597 | 0.04110% | Plexgel 907L-EB |
| Plexgel 907L-EB | Chemplex | Gelling Agent | Organophylic Clay | NDA | 2.00% | 64 | 0.00164% | Plexgel 907L-EB |
| Plexgel 907L-EB | Chemplex | Gelling Agent | Crystalline Silica | 14808-60-7 | 0.06% | 2 | 0.00005% | Plexgel 907L-EB |
| Plexgel 907L-EB | Chemplex | Gelling Agent | Alcohol Ethoxylates | 34398-01-1 | 1.00% | 32 | 0.00082% | Plexgel 907L-EB |
| Plexgel 907L-EB | Chemplex | Gelling Agent | Guar Gum | 9000-30-0 | 50.00% | 1,597 | 0.04110% | Plexgel 907L-EB |
| Plexgel Breaker 10L | Chemplex | Breaker/Gel | No Hazardous Ingredient | NA | 0.00% | 0 | 0.00000% | Plexgel Breaker 10L |
| | | | | | | | | Non-MSDS Component |
| | | | | | | | | Non-MSDS Component |
| | | | | | | | | Non-MSDS Component |
| | | | | | | | | Non-MSDS Component |
| | | | | | | | | Non-MSDS Component |
| | | | | | | | | Non-MSDS Component |

*Total Water Volume sources may include fresh water, produced water, and/or recycled water

** Information is based on the maximum potential for concentration and thus the total may be over 100%

All component information listed was obtained from the supplier's Material Safety Data Sheets (MSDS). As such, the Operator is not responsible for inaccurate and/or incomplete information. Any questions regarding the content of the MSDS should be directed to the supplier who provided it. The Occupational Safety and Health Administration's (OSHA) regulations govern the criteria for the disclosure of this information. Please note that Federal Law protects "proprietary", "trade secret", and "confidential business information" and the criteria for how this information is reported on an MSDS is subject to 29 CFR 1910.1200(i) and Appendix D.