



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1254066  
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
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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: \_\_\_\_\_



1254066

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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PO Box 93999  
Southlake, TX 76092

Voice: (817) 546-7282  
Fax: (817) 246-3361

# INVOICE

Invoice Number: 147626  
Invoice Date: Dec 10, 2014  
Page: 1

Federal Tax I.D.#: 20-8651475

DEC 22 2014

<b>Bill To:</b>
Novy Oil & Gas, Inc. P.O. Box 559 Goddard, KS 67052

Customer ID	Field Ticket #	Payment Terms	
Nove	63731	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-01	Great Bend	Dec 10, 2014	1/9/15

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Grover #3		
250.00	CEMENT MATERIALS	Class A Common	17.90	4,475.00
470.00	CEMENT MATERIALS	Gel	0.50	235.00
705.00	CEMENT MATERIALS	Chloride	1.10	775.50
270.33	CEMENT SERVICE	Cubic Feet Charge	2.48	670.42
493.60	CEMENT SERVICE	Ton Mileage Charge	2.75	1,357.40
1.00	CEMENT SERVICE	Surface	1,512.25	1,512.25
40.00	CEMENT SERVICE	Pump Truck Mileage	7.70	308.00
40.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	176.00
1.00	CEMENT SUPERVISOR	Kevin Eddy		
1.00	OPERATOR ASSISTANT	Patrick Walker		
1.00	OPERATOR ASSISTANT	Toriano Allen		
1.00	OPERATOR ASSISTANT	Kevin Weighous		

Subtotal	9,509.57
Sales Tax	392.21
Total Invoice Amount	9,901.78
Payment/Credit Applied	
<b>TOTAL</b>	<b>9,901.78</b>

ALL PRICES ARE NET, PAYABLE  
30 DAYS FOLLOWING DATE OF  
INVOICE. 1 1/2% CHARGED  
THEREAFTER. IF ACCOUNT IS  
CURRENT, TAKE DISCOUNT OF

\$ 1,901.91

ONLY IF PAID ON OR BEFORE  
Jan 9, 2015

- 1,901.91  
\$7,999.87

# ALLIED OIL & GAS SERVICES, LLC 063731

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999  
SOUTHLAKE, TEXAS 76092

SERVICE POINT:  
Great Bend KS

DATE <u>12-10-14</u>	SEC. <u>20</u>	TWP. <u>22</u>	RANGE <u>8</u>	CALLED OUT	ON LOCATION <u>2:00 PM</u>	JOB START <u>8:30 PM</u>	JOB FINISH <u>9:00 PM</u>
LEASE <u>Grover</u>	WELL # <u>3</u>	LOCATION <u>281 To K19 To 95 Rd East</u>			COUNTY <u>Renov</u>	STATE <u>KS</u>	
OLD OR <del>NEW</del> (Circle one)			<u>1/4 mile South into</u>				

CONTRACTOR Pickrell OWNER \_\_\_\_\_

TYPE OF JOB <u>Surface</u>	CEMENT
HOLE SIZE <u>12 1/4</u> T.D. <u>268.18</u>	AMOUNT ORDERED <u>250 SXS CLASS A 3% CC</u>
CASING SIZE <u>8 5/8 23 LBS</u> DEPTH <u>268.18</u>	<u>2% Gel</u>
TUBING SIZE _____ DEPTH _____	
DRILL PIPE _____ DEPTH _____	
TOOL _____ DEPTH _____	
PRES. MAX _____ MINIMUM _____	
MEAS. LINE _____ SHOE JOINT _____	
CEMENT LEFT IN CSG. <u>15 ft</u>	
PERFS. _____	
DISPLACEMENT <u>16-12 BB15 Fresh H2O</u>	

COMMON <u>250</u>	@ <u>17.90</u>	<u>4,475.00</u>
POZMIX _____	@ _____	_____
GEL <u>470</u>	@ <u>1.50</u>	<u>705.00</u>
CHLORIDE <u>705</u>	@ <u>1.10</u>	<u>775.50</u>
ASC <u>Materials Total</u>		<u>5,485.50</u>
<u>Dial 20%</u>		<u>1,097.10</u>
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
HANDLING <u>270.33</u>	@ <u>2.48</u>	<u>670.42</u>
MILEAGE <u>13.34 x 40 x</u>	<u>2.75</u>	<u>1,357.40</u>

**EQUIPMENT**

PUMP TRUCK # <u>597</u>	CEMENTER <u>Kevin Eddy</u>	HELPER <u>Patrick Walker</u>
BULK TRUCK # <u>544/198</u>	DRIVER <u>Toriano Allen</u>	
BULK TRUCK # _____	DRIVER <u>Kevin Weighous</u>	

**REMARKS:**

on location / Held safety meeting / Rig up  
Rig ran 268.18 ft 8 5/8 casing, broke  
Circ w/ Rig mud, Pump 5 Ahead - mix  
250 SXS CLASS A 3% CC 2% Gel, Displace  
16-12 BB15 Fresh H2O - Shut in - Rig  
Down - Cement Did Circ -

DEPTH OF JOB <u>268.18</u>	
PUMP TRUCK CHARGE <u>1512.35</u>	
EXTRA FOOTAGE _____	@ _____
MILEAGE <u>lum 40</u>	@ <u>7.70</u> <u>308.00</u>
MANIFOLD _____	@ _____
<u>lum 40</u>	@ <u>4.40</u> <u>176.00</u>

CHARGE TO: NOU OIL AND GAS  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 4,024.07  
Dial 20% 804.81

**PLUG & FLOAT EQUIPMENT**

_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____

To: Allied Oil & Gas Services, LLC.  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Mike Kern  
SIGNATURE Mike Kern

TOTAL 9,509.57  
20% 1,901.91  
DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS  
7,607.66



PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1002956	1718	12/19/2014
<b>INVOICE NUMBER</b>			
<b>91682370</b>			

Pratt (620) 672-1201  
 B NOVY OIL & GAS INC  
 I PO BOX 559  
 L GODDARD  
 L KS US 67052  
 T  
 O ATTN: W.L.

J LEASE NAME Grover 3  
 O LOCATION  
 B COUNTY Reno  
 S STATE KS  
 I JOB DESCRIPTION Cement-New Well Casing/Pi  
 T  
 E JOB CONTACT

DEC 23 2014

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40799176	86679		Net - 30 days	01/18/2015

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<b>For Service Dates: 12/17/2014 to 12/17/2014</b>				
0040799176				
171812101A Cement-New Well Casing/Pi 12/17/2014				
Cement 5 1/2" Longstring				
60/40 POZ	175.00	EA	8.40	1,470.08 T
Celloflake	32.00	EA	2.59	82.88 T
C-41P	27.00	EA	2.80	75.60 T
Salt	1,010.00	EA	0.35	353.52 T
Cement Friction Reducer	33.00	EA	4.20	138.61 T
Mud Flush	500.00	EA	1.05	525.03 T
Gilsonite	1,250.00	EA	0.47	586.28 T
"Latch Down Plug & Baffle, 5 1/2" (Blue)	1.00	EA	280.02	280.02
"Auto Fill Float Shoe 5 1/2" (Blue)"	1.00	EA	252.01	252.01
"Turbolizer, 5 1/2" (Blue)"	6.00	EA	77.01	462.03
"5 1/2" Basket (Blue)"	2.00	EA	203.01	406.02
"Unit Mileage Chg (PU, cars one way)"	55.00	MI	3.15	173.26
Heavy Equipment Mileage	110.00	MI	5.25	577.53
"Proppant & Bulk Del. Chgs., per ton mil	415.00	EA	1.75	726.29
Depth Charge; 3001-4000'	1.00	EA	1,512.08	1,512.08
Blending & Mixing Service Charge	175.00	BAG	0.98	171.51
Plug Container Util. Chg.	1.00	EA	175.01	175.01
"Service Supervisor, first 8 hrs on loc.	1.00	EA	122.51	122.51

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	8,090.27
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	247.25
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	8,337.52
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718 12101 A

DEC 23 2010

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB <u>12-17-14</u> 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 <u>Novy Oil &amp; Gas Inc.</u>		LEASE <u>Crigger</u>		WELL NO. <u>3</u>						
ADDRESS _____		COUNTY <u>Reed</u>		STATE <u>Ks</u>						
CITY _____ STATE _____		SERVICE CREW <u>Scotty, Joe, James, Josh, Kevin</u>								
AUTHORIZED BY <u>Kurt</u>		JOB TYPE: <u>CNW - LOW STRUC</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>38970</u>	<u>.5</u>									
<u>76982</u>	<u>86679</u>	<u>.5</u>				ARRIVED AT JOB	<u>12/17/14</u>			<u>2:30</u>
<u>19889</u>	<u>19862</u>	<u>.5</u>				START OPERATION	<u>12/17/14</u>			<u>7:57</u>
<u>92911</u>	<u>.5</u>					FINISH OPERATION	<u>12/17/14</u>			<u>8:51</u>
	<u>.5</u>					RELEASED	<u>12/17/14</u>			<u>9:30</u>
						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/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP103	60/40 P02	SK	125		1500.00
CP103	60/40 P07	SK	50		600.00
CC102	Cellulose	lb	32		118.40
CC105	C-41P	lb	27		108.00
CC111	Salt	lb	1010		505.00
CC112	General Friction Reducer	lb	33		198.00
CC201	Gilsonite	lb	1250		837.50
CF607	Latch down plug + ball 5 1/2	EA	1		400.00
CF1251	Auto Fill float shoe 5 1/2	EA	1		360.00
CF1651	Turbolizers 5 1/2	EA	6		660.00
CF1901	5 1/2 Bucket	EA	2		380.00
CC151	Mud Flush	Gal	500		750.00
E100	Unit mileage charge pickups	M1	55		247.50
E101	Heavy equipment mileage	M1	110		825.00
E113	Prop + Bulb Delivery Charge	TM	415		10381.3
CE204	Depth Charge 3001-4000	4hrs	1		2160.00
CE240	Blending + Mixing Service Charges	SK	175		245.00
CE504	Plug Container Utilization Charge	Sub	1		250.00
5003	Service Supervisor Dist 8 hrs call	EA	1		175.00

SUB TOTAL 11,557.53

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

TOTAL 11,809.02

CHEMICAL / ACID DATA:			

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

FIELD SERVICE ORDER NO. \_\_\_\_\_



**BASIC**<sup>SM</sup>  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

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

DEC 23 2014

FIELD SERVICE TICKET  
1718 12101 A

DATE \_\_\_\_\_ TICKET NO. \_\_\_\_\_

DATE OF JOB: 12-17-14		DISTRICT: _____		NEW WELL <input type="checkbox"/>		OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/>		INJ <input type="checkbox"/>		WDW <input type="checkbox"/>		CUSTOMER ORDER NO.: _____	
CUSTOMER: Newy Oil & Gas Inc				LEASE: _____				WELL NO.: 3							
ADDRESS: _____				COUNTY: _____				STATE: KS							
CITY: _____				STATE: _____				SERVICE CREW: _____							
AUTHORIZED BY: _____				JOB TYPE: C/W - TOUGSTRUC				_____							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
2052	1.5					ARRIVED AT JOB	12/17/14	AM	PM	7:30					
1455	1.5					START OPERATION	12/17/14	AM	PM	7:50					
92711	1.5					FINISH OPERATION	12/17/14	AM	PM	8:30					
	1.5					RELEASED	12/17/14	AM	PM	8:30					
						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/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
1183	60146 157	SF	125		1500.00
1183	60146 157	SF	50		600.00
1187	60146 157	16	37		118.40
1185	60146	16	27		105.00
1184	60146	16	1040		305.00
1182	60146	16	37		198.00
1181	60146	16	1250		537.50
1180	1/2" dia. pipe 10' x 1/2" 5/8"	50	1		400.00
1175	1/2" dia. pipe 10' x 1/2" 5/8"	50	1		310.00
1175	1/2" dia. pipe 10' x 1/2" 5/8"	50	6		660.00
1174	1/2" dia. pipe 10' x 1/2" 5/8"	50	2		330.00
1151	1/2" dia. pipe 10' x 1/2" 5/8"	50	500		750.00
1105	1/2" dia. pipe 10' x 1/2" 5/8"	MI	55		247.50
1104	1/2" dia. pipe 10' x 1/2" 5/8"	MI	110		875.00
1103	1/2" dia. pipe 10' x 1/2" 5/8"	TM	445		1058.15
1101	1/2" dia. pipe 10' x 1/2" 5/8"	MI	1		2160.00
1100	1/2" dia. pipe 10' x 1/2" 5/8"	SI	175		245.00
1099	1/2" dia. pipe 10' x 1/2" 5/8"	SI	1		250.00
1098	1/2" dia. pipe 10' x 1/2" 5/8"	SI	1		175.00

SUB TOTAL 11,557.55

CHEMICAL / ACID DATA:			

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

TOTAL 11,809.00

SERVICE REPRESENTATIVE: _____	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: _____
-------------------------------	---

FIELD SERVICE ORDER NO. \_\_\_\_\_

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

DEC 11 2014

## TREATMENT REPORT

Customer <i>Navy Oil &amp; Gas Inc</i>		Lease No.		Date	
Lease <i>GROVER</i>		Well # <i>3</i>		<i>12/17/14</i>	
Field Order # <i>12101A</i>	Station <i>Pratt, KS</i>	Casing <i>5 1/2</i>	Depth	County <i>Reno</i>	State <i>KS</i>
Type Job <i>5 1/2 Long string</i>			Formation <i>CNW</i>	Legal Description <i>20-22-8</i>	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
<i>5 1/2</i>				Pre Pad	Max		5 Min.
Depth	Depth	From	To	Pad	Min		10 Min.
Volume	Volume	From	To	Frac	Avg		15 Min.
Max Press	Max Press	From	To		HHP Used		Annulus Pressure
Well Connection	Annulus Vol.	From	To	Flush	Gas Volume		Total Load
Plug Depth	Packer Depth	From	To				

Customer Representative <i>Kurt</i>		Station Manager <i>Kevin Goodley</i>		Treater <i>Scott</i>	
Service Units	<i>38970</i>	<i>92911</i>	<i>78982</i>	<i>19899</i>	<i>80679</i>
Driver Names	<i>Scott</i>	<i>Joe</i>	<i>James</i>	<i>Josh</i>	<i>Beruby</i>

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>2:30</i>					<i>On location Safety Meeting Rig up</i>
<i>5:15</i>					<i>Run float Equipment Buckets #2, 78</i>
					<i>Turbolizers #1, 3, 45, 77, 79</i>
<i>6:50</i>					<i>Circulate on bottom 1 hour</i>
<i>7:57</i>	<i>0</i>			<i>5</i>	<i>Pump H<sub>2</sub>O spacer</i>
<i>7:58</i>	<i>50</i>		<i>5</i>	<i>5.7</i>	<i>Pump 500 Gallons mud flush</i>
<i>8:00</i>	<i>100</i>		<i>12</i>	<i>5</i>	<i>Pump H<sub>2</sub>O spacer</i>
<i>8:01</i>	<i>250</i>		<i>5</i>	<i>5.5</i>	<i>M.V 125 sk 60/40 POZ</i>
<i>8:09</i>			<i>31.39</i>		<i>Shut down</i>
<i>8:10</i>					<i>Wash pump &amp; lines clean</i>
					<i>Release Plug</i>
<i>8:12</i>	<i>150</i>			<i>6.7</i>	<i>start Disp</i>
<i>8:26</i>	<i>400</i>		<i>67</i>	<i>6.6</i>	<i>Lift Pressure</i>
<i>8:28</i>	<i>500</i>		<i>9</i>	<i>3.7</i>	<i>Reduce Rate</i>
<i>8:31</i>	<i>500</i>		<i>12</i>	<i>3.7</i>	<i>Plug landed</i>
<i>8:31</i>	<i>1500</i>				<i>Pressure up on plug</i>
<i>8:32</i>					<i>Release Pressure NO Returns</i>
<i>8:35</i>	<i>0</i>		<i>7</i>	<i>3</i>	<i>Plug Rat note Josts 60/40 poz</i>
<i>8:40</i>	<i>0</i>		<i>5</i>	<i>3</i>	<i>Plug mouse note</i>
					<i>Job complete</i>