



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1254635
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: _____



1254635

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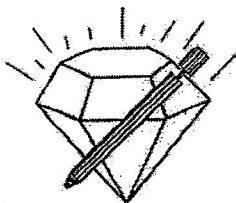
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Bird Dog Oil, LLC
Well Name	Stoltenberg-Boor 2-17
Doc ID	1254635

All Electric Logs Run

DIL
DUCP
MEL
BHCS



DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
StoltenbergBoor2-17DST1

Company Bird Dog Oil, LLC Lease & Well No. Stoltenberg - Boor No. 2-17
Elevation 1883 KB Formation Lansing/Kansas City "I & J" Effective Pay _____ Ft. Ticket No. RR104
Date 10-19-14 Sec. 17 Twp. 16S Range 10W County Ellsworth State Kansas
Test Approved By Adam Nighswonger Diamond Representative Ricky Ray

Formation Test No. 1 Interval Tested from 3,202 ft. to 3,232 ft. Total Depth 3,232 ft
Packer Depth 3,197 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 3,202 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 3,184 ft. Recorder Number 0062 Cap. 5,000 psi.
Bottom Recorder Depth (Outside) 3,206 ft. Recorder Number 5954 Cap. 5,000 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Southwind Drilling, Inc. - Rig 6 Drill Collar Length _____ ft I.D. _____ in.
Mud Type Chemical Viscosity 52 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.1 Water Loss 8.8 cc. Drill Pipe Length 3,169 ft I.D. 3 1/2 in.
Chlorides 5,300 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 8 Anchor Length 30 ft. Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: 1/2 in. blow increasing to 1 1/2 ins. in 15 mins. No blow back during shut-in.

2nd Open: No blow. No blow back during shut-in.

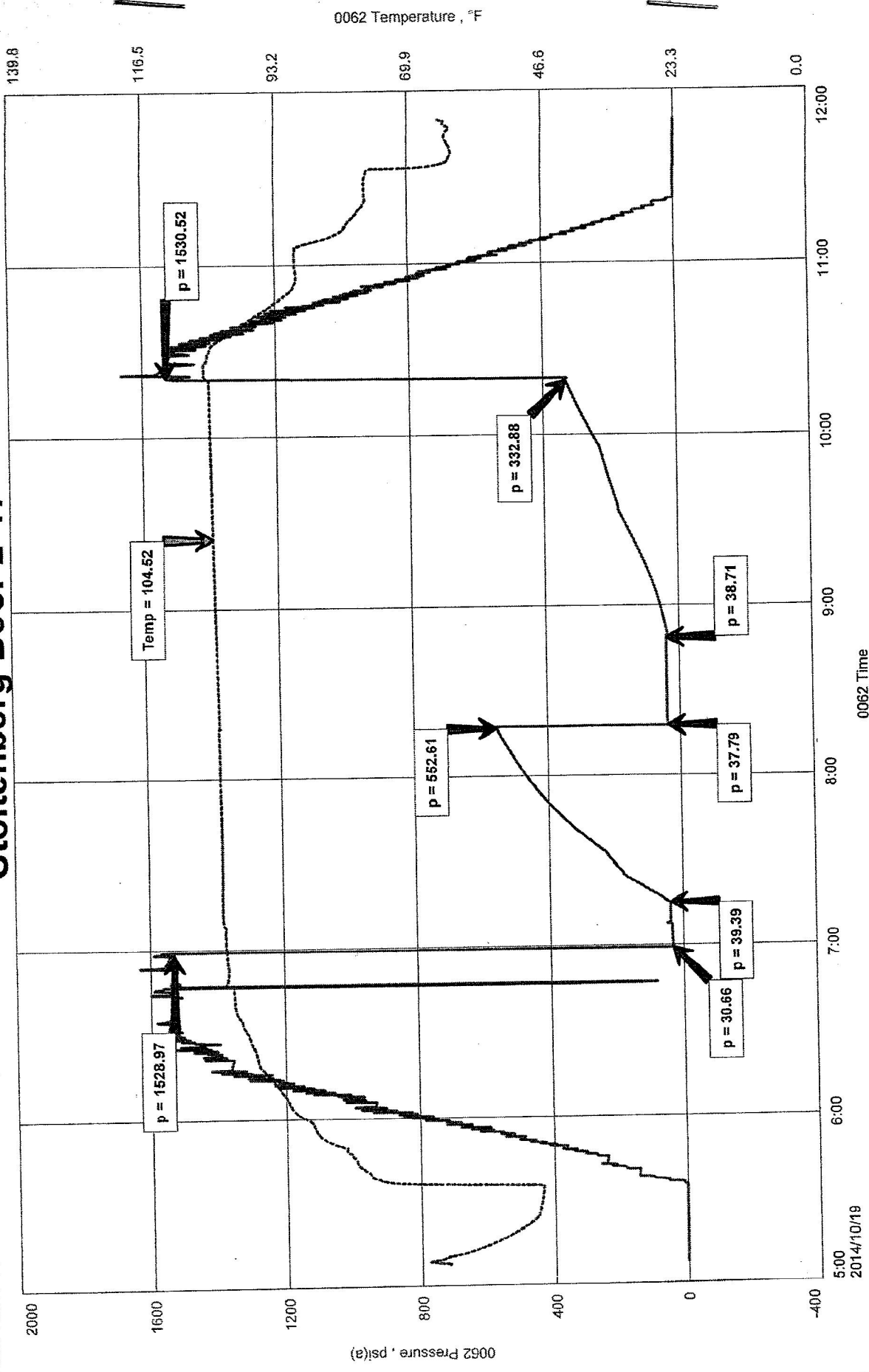
Recovered 60 ft. of mud = .853800 bbls. (Grind out: 100%-mud)
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Remarks Tool Sample Grind Out: 100%-mud w/ a few oil specks

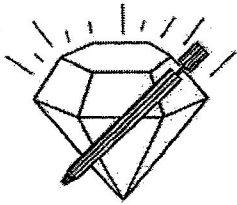
Time Set Packer(s) 7:01 A.M. Time Started off Bottom 10:16 A.M. Maximum Temperature 105°
Initial Hydrostatic Pressure.....(A) 1529 P.S.I.
Initial Flow Period.....Minutes 15 (B) 31 P.S.I. to (C) 39 P.S.I.
Initial Closed In Period.....Minutes 60 (D) 553 P.S.I.
Final Flow Period.....Minutes 30 (E) 38 P.S.I. to (F) 39 P.S.I.
Final Closed In Period.....Minutes 90 (G) 333 P.S.I.
Final Hydrostatic Pressure.....(H) 1531 P.S.I.

Formation: Dst 1 LKC "I-J" (3202-3232)
 Pool: Infield
 Job Number: RR104

Bird Dog Oil LLC
 Dst 1 LKC "I-J" (3202-3232)
 Start Test Date: 2014/10/19
 Final Test Date: 2014/10/19

Stoltenberg Boor 2-17





DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
StoltenbergBoor2-17DST2

Company Bird Dog Oil, LLC Lease & Well No. Stoltenberg - Boor No. 2-17
Elevation 1883 KB Formation Arbuckle Effective Pay _____ Ft. Ticket No. RR105
Date 10-20-14 Sec. 17 Twp. 16S Range 10W County Ellsworth State Kansas
Test Approved By Adam Nighswonger Diamond Representative Ricky Ray

Formation Test No. 2 Interval Tested from 3,300 ft. to 3,362 ft. Total Depth 3,362 ft.
Packer Depth 3,295 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 3,300 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 3,282 ft. Recorder Number 0062 Cap. 5,000 psi.
Bottom Recorder Depth (Outside) 3,337 ft. Recorder Number 5954 Cap. 5,000 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Southwind Drilling, Inc. - Rig 6 Drill Collar Length _____ ft I.D. _____ in.
Mud Type Chemical Viscosity 50 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.2 Water Loss 8.8 cc. Drill Pipe Length 3,267 ft I.D. 3 1/2 in.
Chlorides 7,200 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 8 Anchor Length 30' perf. w/ 32' drill pipe Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: 1/2 in. blow increasing to 8 1/4 ins. in 15 mins. No blow back during shut-in.
2nd Open: 1/4 in. blow increasing to 9 1/2 ins. in 45 mins. No blow back during shut-in.

Recovered 62 ft. of gas in pipe
Recovered 32 ft. of oil = .455360 bbls. (Grind out: 100%-oil) Gravity: 42 @ 60°
Recovered 32 ft. of slightly gas & oil cut mud = .455360 bbls. (Grind out: 4%-gas; 10%-oil; 86%-mud)
Recovered 280 ft. of gassy, muddy, oily water = 3.984400 bbls. (Grind out: 20%-gas; 30%-oil; 30%-water; 20%-mud)
Recovered 344 ft. of TOTAL FLUID = 4.895120 bbls.

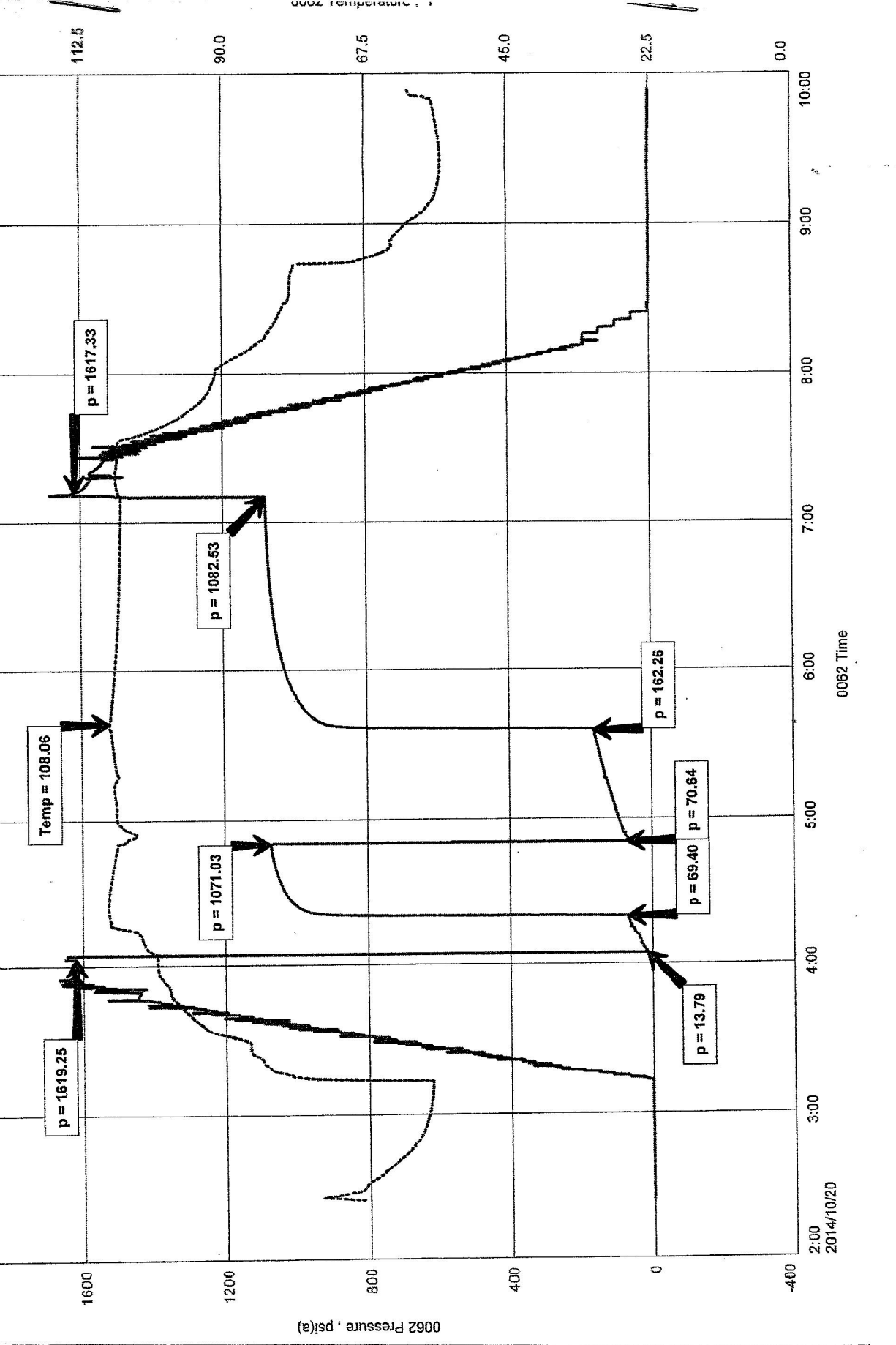
Recovered _____ ft. of
Remarks Tool Sample Grind Out: 10%-gas; 50%-oil; 20%-water; 20%-mud (Chlorides: 18,000 Ppm PH: 7.0 RW: .60 @ 50°)

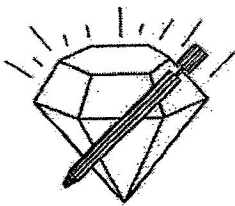
Time Set Packer(s) 4:05 A.M. Time Started off Bottom 7:05 A.M. Maximum Temperature 108°
Initial Hydrostatic Pressure.....(A) _____ 1619 P.S.I.
Initial Flow Period.....Minutes 15 (B) _____ 14 P.S.I. to (C) _____ 69 P.S.I.
Initial Closed In Period.....Minutes 30 (D) _____ 1071 P.S.I.
Final Flow Period.....Minutes 45 (E) _____ 71 P.S.I. to (F) _____ 162 P.S.I.
Final Closed In Period.....Minutes 90 (G) _____ 1083 P.S.I.
Final Hydrostatic Pressure.....(H) _____ 1617 P.S.I.

Stoltenberg Boor 2-17
 Formation: Dst 2 Arbuckle (3300-3362)
 Pool: Infield
 Job Number: RR106

Stoltenberg Boor 2-17

Bird Dog Oil LLC
 Dst 2 Arbuckle (3300-3362)
 Start Test Date: 2014/10/20
 Final Test Date: 2014/10/20





DIAMOND TESTING, LLC
 P.O. Box 157
HOISINGTON, KANSAS 67544
 (620) 653-7550 • (800) 542-7313
 StoltenbergBoor2-17DST3

Company Bird Dog Oil, LLC Lease & Well No. Stoltenberg - Boor No. 2-17
 Elevation 1883 KB Formation Arbuckle Effective Pay _____ Ft. Ticket No. RR106
 Date 10-20-14 Sec. 17 Twp. 16S Range 10W County Ellsworth State Kansas
 Test Approved By Adam Nighswonger Diamond Representative Ricky Ray

Formation Test No. 3 Interval Tested from 3,362 ft. to 3,367 ft. Total Depth 3,367 ft.
 Packer Depth 3,357 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
 Packer Depth 3,362 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
 Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 3,343 ft. Recorder Number 0062 Cap. 5,000 psi.
 Bottom Recorder Depth (Outside) 3,364 ft. Recorder Number 11048 Cap. 5,100 psi.
 Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor Southwind Drilling, Inc. - Rig 6 Drill Collar Length _____ ft. I.D. _____ in.
 Mud Type Chemical Viscosity 64 Weight Pipe Length _____ ft. I.D. _____ in.
 Weight 9.5 Water Loss 9.2 cc. Drill Pipe Length 3,330 ft. I.D. 3 1/2 in.
 Chlorides 7,200 P.P.M. Test Tool Length 33 ft. Tool Size 3 1/2-IF in.
 Jars: Make Sterling Serial Number 8 Anchor Length 5 ft. Size 4 1/2-FH in.
 Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
 Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: 1/2 in. blow increasing. Off bottom of bucket in 8 mins. Weak, 1/2 in. blow back during shut-in.
 2nd Open: 3/4 in. blow increasing. Off bottom of bucket in 10 1/4 mins. Weak, 3/4 in. blow back during shut-in.

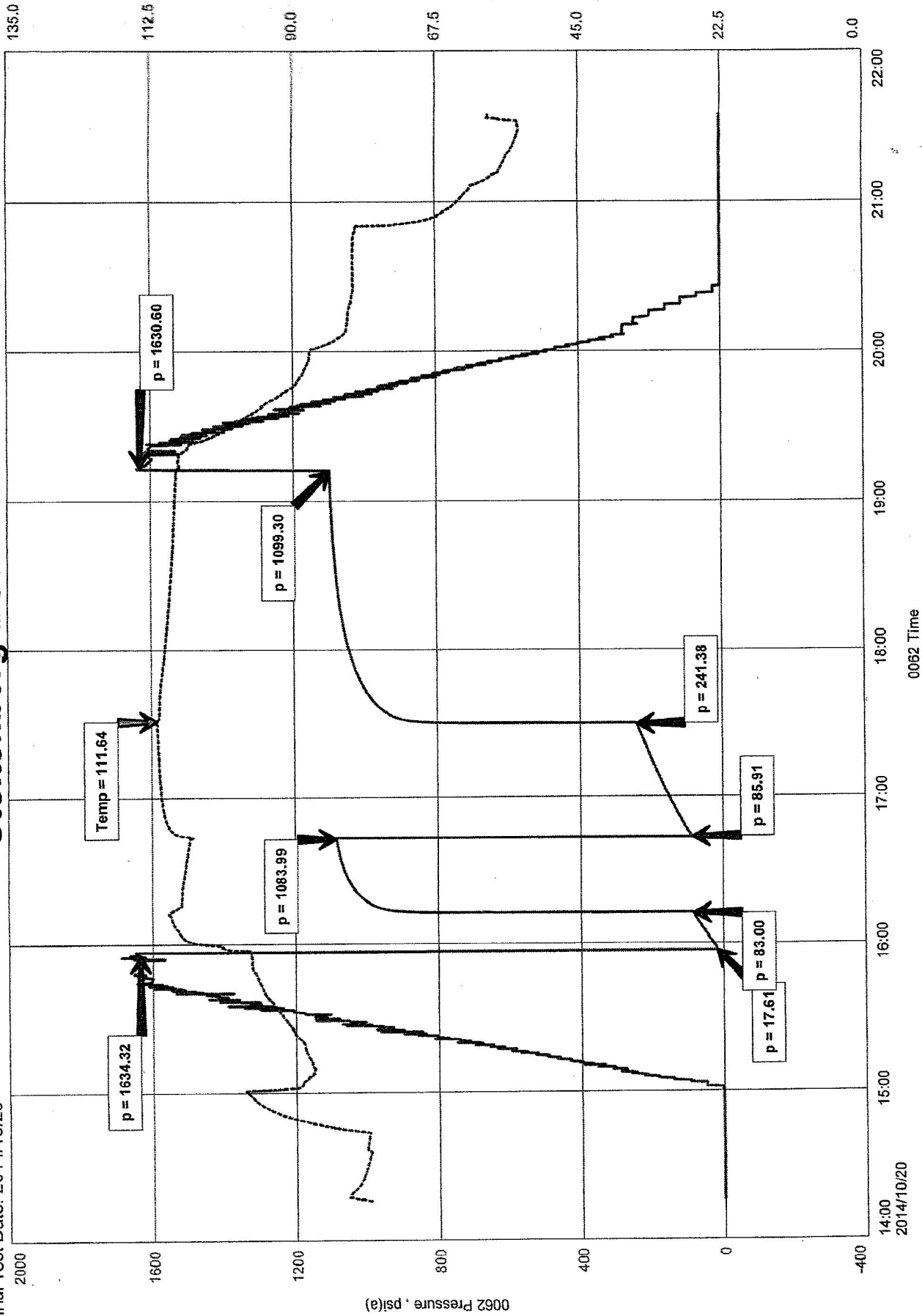
Recovered 171 ft. of gas in pipe
 Recovered 209 ft. of oil = 2.974070 bbls. (Grind out: 100%-oil) Gravity: 43 @ 60°
 Recovered 116 ft. of slightly gas & oil cut, mud cut water = 1.650680 bbls. (Grind out: 2%-gas; 6%-oil; 70%-water; 22%-mud)
 Recovered 248 ft. of water = 3.529040 bbls. (Grind out: 100%-water) Chlorides: 13,000 Ppm PH: 7.0 RW: .65 @ 66°
 Recovered 573 ft. of TOTAL FLUID = 8.153790 bbls.
 Recovered _____ ft. of _____
 Remarks Tool Sample Grind Out: 14%-oil; 83%-water; 3%-mud

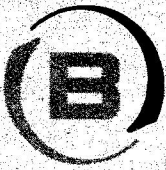
Time Set Packer(s) 3:59 P.M. Time Started off Bottom 6:29 P.M. Maximum Temperature 112°
 Initial Hydrostatic Pressure.....(A) 1634 P.S.I.
 Initial Flow Period.....Minutes 15 (B) 18 P.S.I. to (C) 83 P.S.I.
 Initial Closed In Period.....Minutes 30 (D) 1084 P.S.I.
 Final Flow Period.....Minutes 45 (E) 86 P.S.I. to (F) 241 P.S.I.
 Final Closed In Period.....Minutes 60 (G) 1099 P.S.I.
 Final Hydrostatic Pressure.....(H) 1631 P.S.I.

Bird Dog Oil LLC
 Dst 3 Arbuckle (3362-3367)
 Start Test Date: 2014/10/20
 Final Test Date: 2014/10/20

Stoltenberg Boor 2-17

Formation: Dst 3 Arbuckle (3362-3367)
 Pool: Infield
 Job Number: RR106





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 11491 A

DATE _____ TICKET NO. _____

DATE OF JOB: 10-15-14		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: <i>Burke Drilling</i>				LEASE: <i>Stokely-Bow 2-17</i> WELL NO.:						
ADDRESS:				COUNTY: <i>CHS WORTH</i>		STATE: <i>KS</i>				
CITY:				STATE:		SERVICE CREW: <i>Sullivan, Gray, White</i>				
AUTHORIZED BY:				JOB TYPE: <i>CNW 8 3/4 Tubing</i>						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<i>33208-2020</i>	<i>45</i>						<i>10-14-14</i>			<i>8:00</i>
<i>1990-1980</i>	<i>45</i>									
<i>37900</i>										
						ARRIVED AT JOB				
						START OPERATION		<i>10-15-14</i>		<i>12:50</i>
						FINISH OPERATION				<i>1:15</i>
						RELEASED				<i>1:00</i>
						MILES FROM STATION TO WELL				<i>80</i>

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: *W. Sullivan*
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<i>CP 100-C</i>	<i>Common cut</i>	<i>SK</i>	<i>325</i>		
<i>CE 102</i>	<i>Ballhead</i>	<i>LB</i>	<i>82</i>		
<i>CE 109</i>	<i>Oilfield chloride</i>	<i>LB</i>	<i>918</i>		
<i>CE 200</i>	<i>cut Dec</i>	<i>LB</i>	<i>610</i>		
<i>CF 153</i>	<i>TOP wooden Plug 8 3/4</i>	<i>SA</i>	<i>1</i>		
<i>E 100</i>	<i>pickup no</i>	<i>ms</i>	<i>80</i>		
<i>E 101</i>	<i>Heavy 2nd no</i>	<i>ms</i>	<i>160</i>		
<i>E 113</i>	<i>Build tubing for 700 m</i>	<i>TH</i>	<i>1324</i>		
<i>CE 200</i>	<i>Depth change 0-500</i>	<i>SA</i>	<i>1</i>		
<i>CE 240</i>	<i>Wireline survey change</i>	<i>SK</i>	<i>325</i>		
<i>PE 504</i>	<i>plug cementing</i>	<i>SA</i>	<i>1</i>		
<i>S 003</i>	<i>Servic separator</i>	<i>SA</i>	<i>1</i>		
SUB TOTAL					

CHEMICAL / ACID DATA:

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

TOTAL *8,233.71*

SERVICE REPRESENTATIVE: *Robert Sullivan*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *W. Sullivan*

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____

Customer <i>Buckley Oil</i>		Lease No.		Date <i>10-15-14</i>	
Lease <i>St. Hubert</i>		Well # <i>2-17</i>			
Field Order # <i>11971</i>	Station <i>Pratt</i>	Casing <i>2 3/4</i>	Depth <i>414</i>	County <i>Pratt</i>	State
Type Job <i>CNW 2 3/4 Casing</i>			Formation	Legal Description <i>17-10-10</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>2 3/4</i>	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth <i>414</i>	Depth	From	To	Pre Pad		Max		5 Min.
Volume <i>25</i>	Volume	From	To	Pad		Min		10 Min.
Max Press <i>3000</i>	Max Press	From	To	Frac		Avg		15 Min.
Well Connection <i>P.C.</i>	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth <i>397</i>	Packer Depth	From	To	Flush		Gas Volume		Total Load

Customer Representative	Station Manager <i>Mike</i>	Treater <i>Robert</i>
-------------------------	-----------------------------	-----------------------

Service Units	<i>8700</i>	<i>2708</i>	<i>2000</i>	<i>1760</i>	<i>1760</i>				
Driver Names	<i>Mike</i>	<i>Paul</i>		<i>Phyllis</i>					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>11:50</i>					<i>on loc</i>
					<i>Rund 2 3/4 casing</i>
<i>12:30</i>					<i>casing on bottom</i>
<i>12:40</i>					<i>hook up cone</i>
<i>12:50</i>	<i>2000</i>		<i>3</i>	<i>3.5</i>	<i>at 500 lbs</i>
				<i>4.5</i>	<i>mix amt 325 sk c mixed 2% gel 3% cd 4% ft</i>
			<i>71</i>		<i>amt mixed. shut down</i>
					<i>Reverse flow</i>
				<i>4.0</i>	<i>at 0.5 gal</i>
<i>1:15</i>			<i>25</i>		<i>plus back in</i>
					<i>check 15 min amt pit</i>
					<i>500 complete</i>
					<i>Mark J</i>

FIELD SERVICE TICKET

1718 11467 A

BASIC
ENERGY SERVICES

PRESSURE PUMPING & WIRELINE

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

DATE 17-11-25-16W TICKET NO. _____

DATE OF JOB <u>10-22-14</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>Bird Dog Oil, LLC</u>		LEASE <u>Stattenberg - Boon</u> WELL NO. <u>2-17</u>								
ADDRESS _____		COUNTY <u>Ellsworth</u> STATE <u>Ks</u>								
CITY _____ STATE _____		SERVICE CREW <u>Scott, Shawn, Aaron</u>								
AUTHORIZED BY <u>Kelly Braunum</u>		JOB TYPE: <u>5 1/2 Long string</u> <u>CNW</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
<u>38970</u>	<u>.75</u>									
<u>27463</u>	<u>.75</u>									
<u>19889</u>	<u>19862</u>	<u>.75</u>								
						ARRIVED AT JOB	<u>10-21-14</u>	AM	PM	<u>8:15</u>
						START OPERATION	<u>10-22-14</u>	AM	PM	<u>12:05</u>
						FINISH OPERATION	<u>10-22-14</u>	AM	PM	<u>12:50</u>
						RELEASED	<u>10-22-14</u>	AM	PM	<u>2:00</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	
CP104	50/50 P02	SK	135		1375.00	
CP103	60/40 P02	SK	80		960.00	
CC102	C-110/140	lb	31		114.70	
CC105	C-41P	lb	27		108.00	
CC109	Calcium chloride	lb	210		220.50	
CC112	Cement Friction Reducers	lb	32		192.00	
CC113	Gypsum	lb	625		468.75	
CC129	FIA-322	lb	84		630.00	
CC200	Cement Gel	lb	210		52.50	
CC201	Gilsonite	lb	625		418.75	
CF607	Latch Down Plug + Baffle 5 1/2	EG	1		400.00	
CF1251	Auto Fill Fleet shoe 5 1/2	Ea	1		360.00	
CF1451	Teetholizers 5 1/2	Ea	8		880.00	
CF1901	Basket 5 1/2	EG	1		290.00	
C704	Claymore Kcl Substitute	Gal	4		140.00	
CC151	Mud Flush	Gal	500		750.00	
E100	Unit Mileage Pickups, Small Long	M1	80		360.00	
E101	Heavy Equipment Mileage	M1	160		1200.00	
E113	Prop 4 Ball Delivery per 100 mile	TM	696		1740.00	
					SUB TOTAL	
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. _____

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 11468~~ A

CONTRACTOR

DATE 17-165-10W TICKET NO. 1718 11467A

DATE OF JOB 10-27-14	DISTRICT	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:	
CUSTOMER Bud dog oil, LLC		LEASE Sta Henry - Boer					WELL NO 2-17	
ADDRESS		COUNTY Ellsworth			STATE KS			
CITY		STATE		SERVICE CREW Scott, Shawn, Aaron				
AUTHORIZED BY Kelly Branum		JOB TYPE: 5 1/2 Long string						CNW
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED		
38970	.75					ARRIVED AT JOB	10-21-14 AM 8:15	
27463	.75					START OPERATION	10-22-14 AM 12:05	
19889 19867	.75					FINISH OPERATION	10-22-14 AM 12:50	
						RELEASED	10-27-14 AM 2:00	
						MILES FROM STATION TO WELL		

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

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

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CE204	Depth charge 3001-4	4hrs	1		2160.00
CE240	Blending + mixing charge	SK	205		257.00
CE504	Play container utilization charge	Job	1		250.00
5003	Service supervisor, first 8 hrs	hr	1		175.00
SUB TOTAL					13,532.24

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
Discount Total		10,419.79
		<i>[Signature]</i>

SERVICE REPRESENTATIVE: *[Signature]*

FIELD SERVICE ORDER NO. _____

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

Customer: Bird Dog Oil, LLC Lease No.: _____ Date: 10-22-14
 Lease: Slottenberg - Base Well #: 2-17 County: Ellsworth State: KS
 Field Order #: 11-167A Station: Pratt Casing: 5 1/2 Depth: 3423 Formation: _____ Legal Description: 17-165-10W
 Type Job: 5 1/2 Long String

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
<u>5 1/2</u>				Pre Pad		Max		5 Min.
Depth <u>3423</u>	Depth	From	To	Pad		Min		10 Min.
Volume <u>81.46</u>	Volume	From	To	Frac		Avg		15 Min.
Max Press <u>2000</u>	Max Press	From	To			HHP Used		Annulus Pressure
Well Connection <u>5 1/2</u>	Annulus Vol.	From	To	Flush		Gas Volume		Total Load
Plug Depth	Packer Depth	From	To					

Customer Representative: Kelly Beaman Station Manager: Kevin Goodley Treater: Scott Graves
 Service Units: 28970 27463 19669 19867

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<u>8:15</u>					<u>On location Safety, Working Rig up</u>
<u>9:20</u>					<u>Run Flood Equipment Baster on</u>
					<u>Turbalizers on 1, 3, 5, 7, 9, 11, 13, 15</u>
<u>11:00</u>					<u>Circulate On bottom 1 hour</u>
<u>12:05</u>	<u>0</u>		<u>5</u>	<u>3.5</u>	<u>Pump H2O Spacer</u>
<u>12:06</u>	<u>50</u>		<u>12</u>	<u>4</u>	<u>Pump Mud Flush</u>
<u>12:09</u>	<u>50</u>		<u>5</u>	<u>4</u>	<u>Pump H2O Spacer</u>
<u>12:10</u>	<u>100</u>		<u>13</u>	<u>4.6</u>	<u>Mix 50 sks 60/40 POZ Slurry</u>
<u>12:14</u>	<u>150</u>		<u>33.17</u>	<u>4.5</u>	<u>Mix 125 sks 50/50 POZ 13.5 pp</u>
<u>12:30</u>	<u>0</u>				<u>shut down</u>
					<u>Wash pump + lines</u>
<u>12:32</u>					<u>Drop plug</u>
<u>12:33</u>	<u>100</u>			<u>5.6</u>	<u>Start Displacement</u>
<u>12:43</u>	<u>400</u>		<u>72</u>	<u>5.4</u>	<u>lift pressure</u>
<u>12:45</u>	<u>500</u>		<u>82</u>	<u>3</u>	<u>Plug loaded</u>
<u>12:45</u>	<u>1500</u>				<u>Pressure up on plug</u>
<u>12:46</u>	<u>0</u>				<u>Release pressure NO Returns</u>
<u>12:50</u>	<u>0</u>		<u>8</u>	<u>3</u>	<u>Plug shut hole 30 sks 60/40</u>
					<u>shut down</u>
					<u>Job Complete</u>