

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1263540  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
November 2016

**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

Gas  DH  EOR

OG  GSW

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 EOR  Conv. to SWD  
 Plug Back  Liner  Conv. to GSW  Conv. to Producer

Commingled Permit #: \_\_\_\_\_

Dual Completion Permit #: \_\_\_\_\_

SWD Permit #: \_\_\_\_\_

EOR Permit #: \_\_\_\_\_

GSW Permit #: \_\_\_\_\_

Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No.: \_\_\_\_\_

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  Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1263540



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](mailto: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<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No<br>List All E. Logs Run: _____ | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><br>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<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><input type="checkbox"/> Plug Off Zone |                  |                |              |                            |
|  |                  |                |              |                            |

1. Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*
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)*

|   |  |         |             |                       |
|---|--|---------|-------------|-----------------------|
| Date of first Production/Injection or Resumed Production/Injection: | Producing Method:<br><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:<br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION:<br><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5) (Submit ACO-4)</i> | PRODUCTION INTERVAL:<br>Top Bottom |
|---|--|------------------------------------|

| Shots Per Foot | Perforation Top | Perforation Bottom | Bridge Plug Type | Bridge Plug Set At | Acid, Fracture, Shot, Cementing Squeeze Record<br><i>(Amount and Kind of Material Used)</i> |
|----------------|-----------------|--------------------|------------------|--------------------|---|
|                |                 |                    |                  |                    |   |
|                |                 |                    |                  |                    |   |
|                |                 |                    |                  |                    |   |
|                |                 |                    |                  |                    |   |

|                |       |         |            |  |
|----------------|-------|---------|------------|--|
| TUBING RECORD: | Size: | Set At: | Packer At: |  |
|----------------|-------|---------|------------|--|

|           |                        |
|-----------|------------------------|
| Form      | ACO1 - Well Completion |
| Operator  | Thomas Garner, Inc.    |
| Well Name | Garner 6               |
| Doc ID    | 1263540                |

All Electric Logs Run

|                    |
|--------------------|
|                    |
| Dual Comp Porosity |
| Dual Induction     |
| Microresistivity   |
| Geologist          |



|                                 |                          |                      |               |                                 |                 |
|---------------------------------|--------------------------|----------------------|---------------|---------------------------------|-----------------|
| Customer<br>Thomas Garner, Inc. |                          | Lease No.            |               | Date<br>6-24-15                 |                 |
| Lease<br>Garner                 |                          | Well #<br>6          |               |                                 |                 |
| Field Order #<br>10948          | Station<br>Pratt, Kansas | Casing<br>8 7/8 28Lb | Depth<br>3037 | County<br>Stafford              | State<br>Kansas |
| Type Job<br>CNW-Surface         |                          |                      | Formation     | Legal Description<br>13-235-13W |                 |

| PIPE DATA                         |                              | PERFORATING DATA |    | FLUID USED                     |            | TREATMENT RESUME |       |                  |
|-----------------------------------|------------------------------|------------------|----|--------------------------------|------------|------------------|-------|------------------|
| Casing Size<br>8 7/8 28           | Tubing Size<br>2 3/8 Lb./Ft. | Shots/Ft         |    | Acid<br>300 sacks              |            | RATE             | PRESS | ISIP             |
| Depth<br>3037 Feet                | Depth                        | From             | To | Pre Pad<br>60/40 Poz           | Max        |                  |       | 5 Min.           |
| Volume<br>14.4 Bbl.               | Volume                       | From             | To | Pad<br>28 Total Gal            | Min        |                  |       | 10 Min.          |
| Max Press                         | Max Press                    | From             | To | Brac<br>3% calcium chb         | Avg        |                  |       | 15 Min.          |
| Well Connection<br>1 1/4 Continer | Annulus Vol.                 | From             | To | .25 Lb./sh cell                | HHP Used   |                  |       | Annulus Pressure |
| Plug Depth<br>285 Feet            | Packer Depth                 | From             | To | Flush<br>18.4 Bbl. Fresh water | Gas Volume |                  |       | Total Load       |

|  |                                  |                                 |
|--|----------------------------------|---------------------------------|
| Customer Representative<br>Alan Loftis | Station Manager<br>Kevin Gordley | Treater<br>Clarence R. Messicht |
|--|----------------------------------|---------------------------------|

|                           |        |        |        |        |
|---------------------------|--------|--------|--------|--------|
| Service Units<br>37,216   | 77,686 | 19,909 | 19,903 | 19,860 |
| Driver Names<br>Mc Ssicht | Mattal |        | Gibson |        |

| Time PM         | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log  |
|-----------------|-----------------|-----------------|--------------|------|--|
| 6:23 10:00 P.M. |                 |                 |              |      | Trucks on location and hold safety meeting                   |
| 6:24 1:00 A.M.  |                 |                 |              |      | Start run 7 Joints Limited Service 28 Lb./Ft. 8 7/8" casing. |
| 2:00            |                 |                 |              |      | Casing in well circ. with rig for 5 minutes.                 |
| 2:15            | 400             |                 |              | 4    | Start Fresh water Pre-Flush.                                 |
|                 |                 |                 | 10           | 4    | Start mixing 300 sacks 60/40 Poz. cement.                    |
|                 |                 |                 | 78           |      | stop pumping, shut in well, Release Wooden Plug. Open Well.  |
| 2:30            |                 |                 |              | 4    | Start Fresh water Displacement.                              |
| 2:40            |                 |                 | 18           |      | Plug down. Shut in well.                                     |
|                 |                 |                 |              |      | Circulated cement to cellar.                                 |
|                 |                 |                 |              |      | Wash up pump truck.  |
| 3:15            |                 |                 |              |      | Job Complete.  |
|                 |                 |                 |              |      | Thank You.   |
|                 |                 |                 |              |      | Clarence, Mike, Aaron  |



**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 10948 A

15-255-13W

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

|                              |     |                        |     |  |     |   |         |                     |       |
|------------------------------|-----|------------------------|-----|--|-----|---|---------|---------------------|-------|
| DATE OF JOB 6-24-15          |     | DISTRICT Pratt, Kansas |     | 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 Thomas Garner, Inc. |     |                        |     | LEASE Garner   |     |   |         | WELL NO. 6          |       |
| ADDRESS                      |     |                        |     | COUNTY Stafford  |     | STATE Kansas  |         |                     |       |
| CITY                         |     |                        |     | STATE  |     | SERVICE CREW Messick: M. Mattal: A. Gibson  |         |                     |       |
| AUTHORIZED BY                |     |                        |     | JOB TYPE: CNW - Surface  |     |   |         |                     |       |
| EQUIPMENT#                   | HRS | EQUIPMENT#             | HRS | EQUIPMENT#   | HRS | TRUCK CALLED  | DATE    | AM                  | TIME  |
| 37,216                       |     |                        |     |  |     |   | 6-23-15 | AM                  | 7:30  |
|                              |     |                        |     |  |     | ARRIVED AT JOB  | 6-23-15 | AM                  | 10:00 |
| 77,686-19,905                | .5  |                        |     |  |     | START OPERATION   | 6-24-15 | AM                  | 2:15  |
|                              |     |                        |     |  |     | FINISH OPERATION  | 6-24-15 | AM                  | 2:45  |
| 19,903-19,860                | .5  |                        |     |  |     | RELEASED  | 6-24-15 | AM                  | 3:15  |
|                              |     |                        |     |  |     | MILES FROM STATION TO WELL  | 20      |                     |       |

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   |
|---------------------|--|------|----------|------------|-------------|
| CP103               | 60/40 Poz  | SK   | 300      |            | \$ 3,600 00 |
| CC102               | Cell Plate                                       | Lb   | 75       |            | \$ 277 50   |
| CC109               | Calcium Chloride                                 | Lb   | 774      |            | \$ 812 70   |
| CF153               | Wooden Cement Plug 8 7/8                         | Ea   | 4        |            | \$ 160 00   |
| E100                | Unit Mileage Charge - Pickups, Small Vans & cars | Mi   | 20       |            | \$ 90 00    |
| E101                | Heavy Equipment Mileage                          | Mi   | 40       |            | \$ 300 00   |
| E113                | Proppant and Bulk Delivery                       | Tm   | 258      |            | \$ 645 00   |
| CE200               | Depth Charge Off. To 500ft.                      | Hrs  | 4        |            | \$ 1,000 00 |
| CE240               | Blending and Mixing Service                      | SK   | 300      |            | \$ 420 00   |
| CE504               | Plug Container Utilization                       | Job  | 1        |            | \$ 250 00   |
| S003                | Service Supervisor                               | Ea   | 1        |            | \$ 175 00   |

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

|                     |            |            |
|---------------------|------------|------------|
| SUB TOTAL           |            | \$7,730 20 |
| SERVICE & EQUIPMENT | %TAX ON \$ |            |
| MATERIALS           | %TAX ON \$ |            |
| TOTAL               |            | \$4,638 12 |

SERVICE REPRESENTATIVE *[Signature]*

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

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

# BASIC

energy services, L.P.

## TREATMENT REPORT

|                                       |                            |                                     |
|---------------------------------------|----------------------------|-------------------------------------|
| Customer<br><i>Thomas Garner</i>      | Lease No.                  | Date<br><i>07-01-15</i>             |
| Lease<br><i>Garner</i>                | Well #<br><i>4</i>         |                                     |
| Field Order #<br><i>12535</i>         | Station<br><i>PRATT KS</i> | Casing<br><i>5 1/2</i>              |
| Type Job<br><i>CNW 5 1/2 Longspur</i> | Depth<br><i>4281</i>       | County<br><i>STAFFORD</i>           |
|                                       | Formation                  | State<br><i>KS</i>                  |
|                                       |                            | Legal Description<br><i>B-25-13</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<br><i>4281</i>         | Depth        | From             | To | Pre Pad    | Max        |                  |       | 5 Min.           |
| Volume<br><i>10 1/2</i>      | Volume       | From             | To | Pad        | Min        |                  |       | 10 Min.          |
| Max Press<br><i>2500</i>     | Max Press    | From             | To | Frac       | Avg        |                  |       | 15 Min.          |
| Well Connection<br><i>FC</i> | Annulus Vol. | From             | To |            | HHP Used   |                  |       | Annulus Pressure |
| Plug Depth<br><i>4267</i>    | Packer Depth | From             | To | Flush      | Gas Volume |                  |       | Total Load       |

|   |                                      |                                      |
|---|--------------------------------------|--------------------------------------|
| Customer Representative                               | Station Manager<br><i>DAVE SCOTT</i> | Treater<br><i>Robert [Signature]</i> |
| Service Units<br><i>37900 77686 19903 70859 73768</i> |                                      |                                      |
| Driver Names<br><i>Rullion McCall Gibson</i>          |                                      |                                      |

| Time         | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate       | Service Log  |
|--------------|-----------------|-----------------|--------------|------------|--|
| <i>5:40</i>  |                 |                 |              |            | <i>OK</i>  |
|              |                 |                 |              |            | <i>Run 103 str 5 1/2 155 cpg Packer shoe on Rullion cut 1.35 7 1/2 11 1/2 RATE 7</i>       |
| <i>8:25</i>  |                 |                 |              |            | <i>Casing on bottom Break circ. DROP BALL</i>  |
| <i>8:40</i>  | <i>1600</i>     |                 |              |            | <i>Set Packer shoe AND circ.</i>   |
| <i>9:30</i>  | <i>400</i>      |                 | <i>5</i>     | <i>3.5</i> | <i>at 2000</i>   |
|              |                 |                 | <i>12</i>    |            | <i>at 2000</i>   |
|              |                 |                 | <i>5</i>     |            | <i>at 2000</i>   |
|              |                 |                 | <i>36</i>    | <i>5</i>   | <i>mix cut 150 sk AA-2 cut @ 1500 cpg cut mix-D shut down wash perf lines Release Plug</i> |
|              | <i>500</i>      |                 | <i>78</i>    | <i>6</i>   | <i>at 2000</i>   |
|              |                 |                 |              | <i>4</i>   | <i>flow test</i>   |
| <i>10:10</i> | <i>1800</i>     |                 | <i>102</i>   |            | <i>plug down</i>   |
|              |                 |                 | <i>1</i>     | <i>2</i>   | <i>plug R/W of 2000</i>  |
|              |                 |                 | <i>1</i>     |            | <i>plug mlt. at 2000</i>   |

*JOB Complete Thank U*



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

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

FIELD SERVICE TICKET

1718 12535 A

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

|                              |  |                     |  |  |  |                                   |  |                                      |  |                              |  |                              |  |                     |  |
|------------------------------|--|---------------------|--|--|--|-----------------------------------|--|--------------------------------------|--|------------------------------|--|------------------------------|--|---------------------|--|
| DATE OF JOB: 07-01-15        |  | DISTRICT: PRATT 115 |  | 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: THOMAS FORDER, INC |  |                     |  | LEASE: GAMES                                 |  |                                   |  | WELL NO.: 6                          |  |                              |  |                              |  |                     |  |
| ADDRESS:                     |  |                     |  | COUNTY: STAFFORD                             |  |                                   |  | STATE: KS                            |  |                              |  |                              |  |                     |  |
| CITY:                        |  |                     |  | STATE:                                       |  |                                   |  | SERVICE CREW: Sullivan, Arpan, G. S. |  |                              |  |                              |  |                     |  |
| AUTHORIZED BY:               |  |                     |  | JOB TYPE: CW 5' Sub                          |  |                                   |  |                                      |  |                              |  |                              |  |                     |  |

| EQUIPMENT# | HRS | EQUIPMENT# | HRS | EQUIPMENT# | HRS | TRUCK CALLED               | DATE    | AM | PM | TIME  |
|------------|-----|------------|-----|------------|-----|----------------------------|---------|----|----|-------|
|            |     |            |     |            |     |                            | 07-1-15 |    |    | 4:20  |
|            |     |            |     |            |     | ARRIVED AT JOB             |         |    |    | 5:40  |
| 19902      | 40  |            |     |            |     | START OPERATION            |         |    |    | 9:30  |
| 73768      | 30  |            |     |            |     | FINISH OPERATION           |         |    |    | 10:10 |
|            |     |            |     |            |     | RELEASED                   |         |    |    | 10:45 |
|            |     |            |     |            |     | MILES FROM STATION TO WELL |         |    |    | 20    |

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 cont                             | sk   | 150      |            | 2,550 00  |
| CP 103              | 60/40 102 cont                        | sk   | 50       |            | 600 00    |
| CC 102              | 611 AKC                               | lb   | 39       |            | 140 60    |
| CC 105              | C-41 P                                | lb   | 29       |            | 116 00    |
| CC 111              | SALT                                  | lb   | 711      |            | 355 50    |
| CC 112              | CMT Friction Red.                     | lb   | 43       |            | 258 00    |
| CC 115              | C-44                                  | lb   | 141      |            | 726 15    |
| CC 129              | FA-322                                | lb   | 71       |            | 532 50    |
| CC 201              | Gulzite                               | lb   | 750      |            | 502 50    |
| CF 607              | Latex Down Plug - BOPHC 5/8           | sq   | 1        |            | 400 00    |
| CF 1051             | Anti Pack Shoe                        | sq   | 1        |            | 2,800 00  |
| CF 1051             | Turbid.                               | sq   | 7        |            | 770 00    |
| CF 1501             | Basket                                | sq   | 1        |            | 290 00    |
| CC 154              | Sepan 7/16                            | ml   | 300      |            | 1,225 00  |

CHEMICAL / ACID DATA:

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

SUB TOTAL

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

TOTAL

SERVICE REPRESENTATIVE: *Robert...*

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

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)





**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

Thomas Garner Inc  
305 E 7th St  
St John, KS 67576  
ATTN: Josh Austin

**15-25S-13W Stafford**

**Garner 6**

Job Ticket: 59772      **DST#: 1**  
Test Start: 2015.06.28 @ 04:34:15

## GENERAL INFORMATION:

Formation: **Lansing "H"**  
Deviated: No Whipstock:                      ft (KB)  
Time Tool Opened: 06:28:15  
Time Test Ended: 11:24:30  
Interval: **3800.00 ft (KB) To 3815.00 ft (KB) (TVD)**  
Total Depth: 3815.00 ft (KB) (TVD)  
Hole Diameter: 7.88 inches Hole Condition: Good  
Test Type: Conventional Bottom Hole (Initial)  
Tester: Leal Cason  
Unit No: 74  
Reference Elevations: 1939.00 ft (KB)  
1926.00 ft (CF)  
KB to GR/CF: 13.00 ft

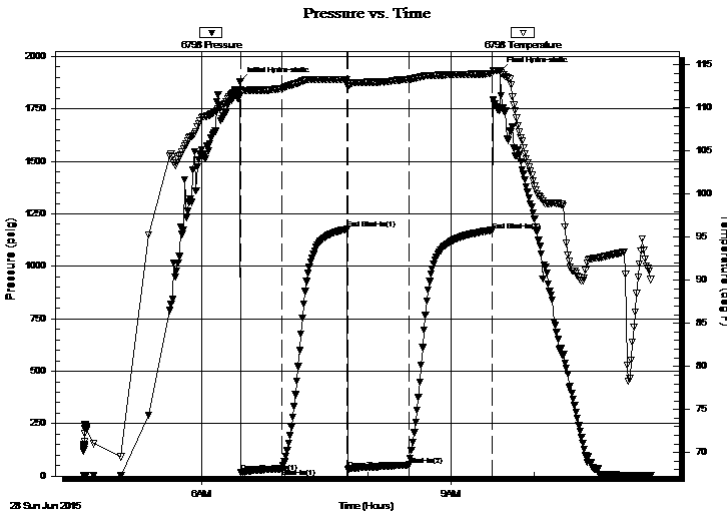
## Serial #: 6798

Inside

Press@RunDepth: 53.47 psig @ 3801.00 ft (KB)      Capacity: 8000.00 psig  
Start Date: 2015.06.28      End Date: 2015.06.28      Last Calib.: 2015.06.28  
Start Time: 04:34:16      End Time: 11:24:30      Time On Btm: 2015.06.28 @ 06:27:30  
Time Off Btm: 2015.06.28 @ 09:35:45

TEST COMMENT: IF: Strong Blow , BOB in 5 minutes  
IS: 1/4 inch Blow Back  
FF: Strong Blow , BOB in 30 seconds  
FS: No Blow Back

## PRESSURE SUMMARY



| Time (Min.) | Pressure (psig) | Temp (deg F) | Annotation           |
|-------------|-----------------|--------------|----------------------|
| 0           | 1880.20         | 112.14       | Initial Hydro-static |
| 1           | 18.86           | 111.78       | Open To Flow (1)     |
| 31          | 34.63           | 112.25       | Shut-In(1)           |
| 77          | 1176.62         | 113.29       | End Shut-In(1)       |
| 78          | 31.27           | 112.54       | Open To Flow (2)     |
| 122         | 53.47           | 113.33       | Shut-In(2)           |
| 182         | 1171.42         | 113.99       | End Shut-In(2)       |
| 189         | 1929.46         | 114.38       | Final Hydro-static   |

## Recovery

| Length (ft) | Description              | Volume (bbl) |
|-------------|--------------------------|--------------|
| 0.00        | 1071 GIP                 | 0.00         |
| 100.00      | GMWCO 12%G 5%M 10%W 73%O | 0.86         |
|             |                          |              |
|             |                          |              |
|             |                          |              |

## Gas Rates

|  | Choke (inches) | Pressure (psig) | Gas Rate (Mcf/d) |
|--|----------------|-----------------|------------------|
|  |                |                 |                  |



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Thomas Garner Inc

**15-25S-13W Stafford**

305 E 7th St  
St John, KS 67576

**Garner 6**

Job Ticket: 59772

**DST#: 1**

ATTN: Josh Austin

Test Start: 2015.06.28 @ 04:34:15

## Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 46.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.99 in<sup>3</sup>

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: 0.02 inches

## Recovery Information

Recovery Table

| Length<br>ft | Description              | Volume<br>bbbl |
|--------------|--------------------------|----------------|
| 0.00         | 1071 GIP                 | 0.000          |
| 100.00       | GMWCO 12%G 5%M 10%W 73%O | 0.856          |

Total Length: 100.00 ft      Total Volume: 0.856 bbl

Num Fluid Samples: 0

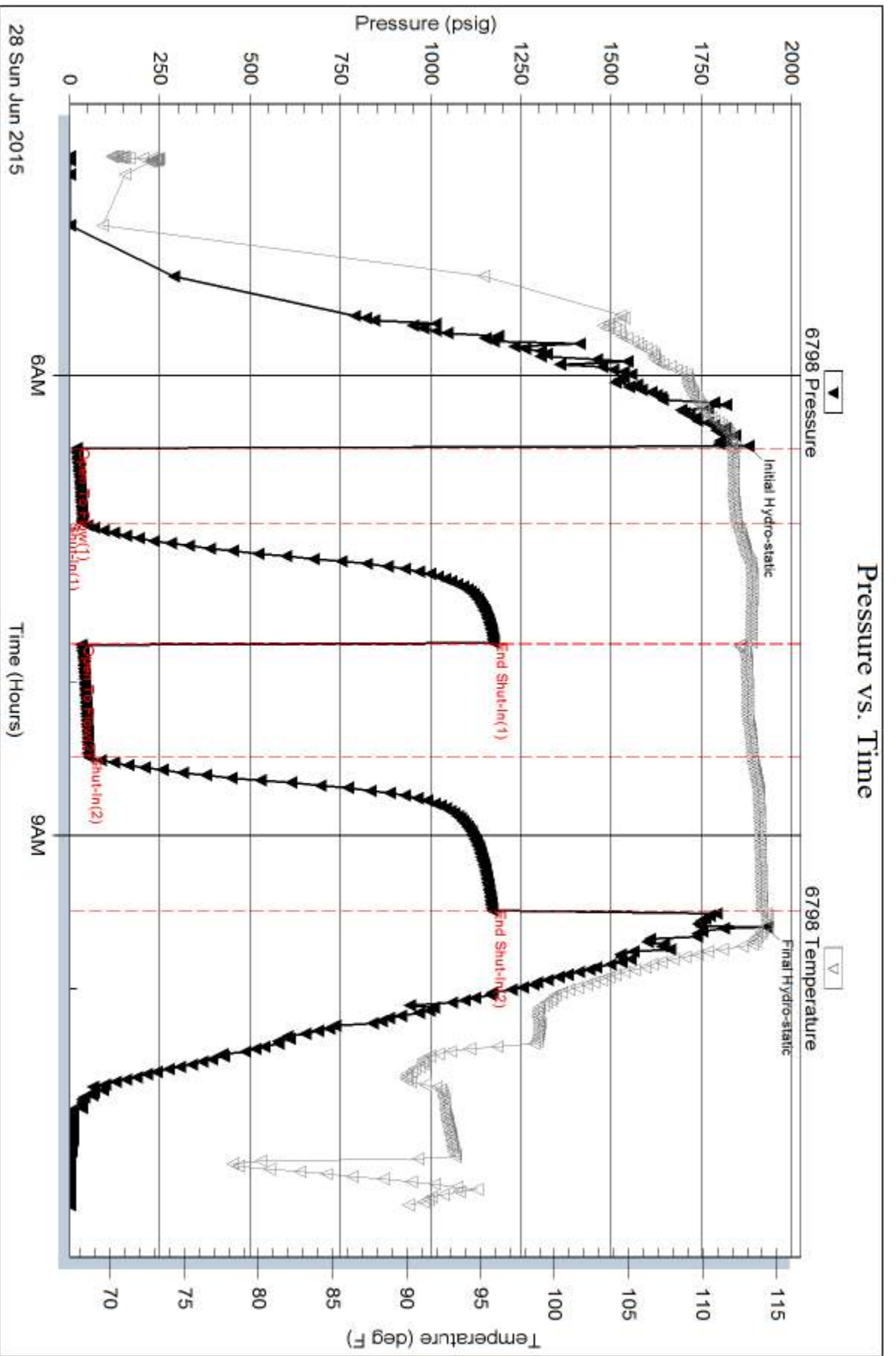
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

Thomas Garner Inc  
305 E 7th St  
St John, KS 67576-1652  
ATTN: Josh Austin

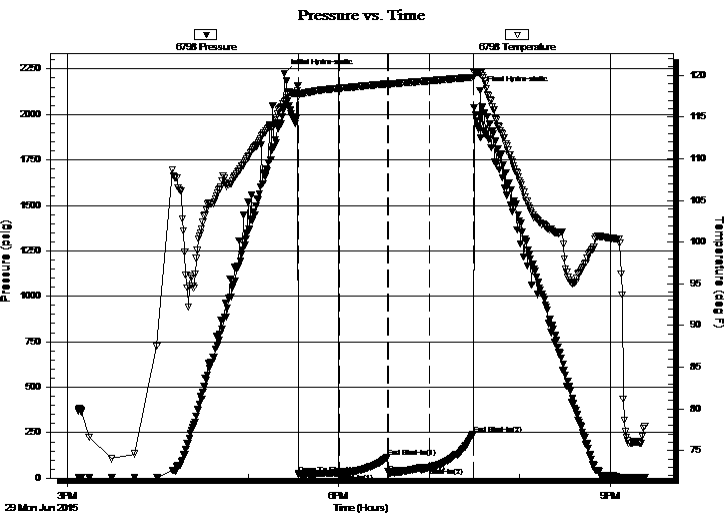
**15-25S-13W Stafford**  
**Garner 6**  
Job Ticket: 59773      **DST#: 2**  
Test Start: 2015.06.29 @ 15:07:16

## GENERAL INFORMATION:

Formation: **Simpson**  
Deviated: No Whipstock: ft (KB)  
Time Tool Opened: 17:33:01  
Time Test Ended: 21:23:01  
Interval: **4207.00 ft (KB) To 4245.00 ft (KB) (TVD)**  
Total Depth: 4207.00 ft (KB) (TVD)  
Hole Diameter: 7.88 inches Hole Condition: Good  
Reference Elevations: 1939.00 ft (KB)  
1926.00 ft (CF)  
KB to GR/CF: 13.00 ft  
Test Type: Conventional Bottom Hole (Reset)  
Tester: Leal Cason  
Unit No: 74

**Serial #: 6798      Inside**  
Press @ Run Depth: 58.34 psig @ 4208.00 ft (KB)      Capacity: 8000.00 psig  
Start Date: 2015.06.29      End Date: 2015.06.29      Last Calib.: 2015.06.29  
Start Time: 15:07:17      End Time: 21:23:01      Time On Btm: 2015.06.29 @ 17:23:46  
Time Off Btm: 2015.06.29 @ 19:33:46

TEST COMMENT: IF: Weak 1/4 inch Blow  
IS: No Blow Back  
FF: No Blow  
FS: No Blow Back



## PRESSURE SUMMARY

| Time (Min.) | Pressure (psig) | Temp (deg F) | Annotation           |
|-------------|-----------------|--------------|----------------------|
| 0           | 2226.32         | 116.89       | Initial Hydro-static |
| 10          | 23.48           | 117.51       | Open To Flow (1)     |
| 37          | 25.99           | 118.46       | Shut-In(1)           |
| 69          | 117.27          | 118.98       | End Shut-In(1)       |
| 70          | 28.62           | 118.96       | Open To Flow (2)     |
| 97          | 58.34           | 119.34       | Shut-In(2)           |
| 126         | 242.65          | 119.78       | End Shut-In(2)       |
| 130         | 2132.72         | 120.24       | Final Hydro-static   |

## Recovery

| Length (ft) | Description | Volume (bbl) |
|-------------|-------------|--------------|
| 5.00        | Mud         | 0.02         |
|             |             |              |
|             |             |              |
|             |             |              |
|             |             |              |

## Gas Rates

| Choke (inches) | Pressure (psig) | Gas Rate (Mcf/d) |
|----------------|-----------------|------------------|
|                |                 |                  |

\* Recovery from multiple tests



**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Thomas Garner Inc  
305 E 7th St  
St John, KS 67576-1652  
ATTN: Josh Austin

**15-25S-13W Stafford**  
**Garner 6**  
Job Ticket: 59773      **DST#: 2**  
Test Start: 2015.06.29 @ 15:07:16

## Mud and Cushion Information

|                                  |                            |                 |         |
|----------------------------------|----------------------------|-----------------|---------|
| Mud Type: Gel Chem               | Cushion Type:              | Oil API:        | deg API |
| Mud Weight: 9.00 lb/gal          | Cushion Length: ft         | Water Salinity: | ppm     |
| Viscosity: 46.00 sec/qt          | Cushion Volume: bbl        |                 |         |
| Water Loss: 8.98 in <sup>3</sup> | Gas Cushion Type:          |                 |         |
| Resistivity: ohm.m               | Gas Cushion Pressure: psig |                 |         |
| Salinity: 4000.00 ppm            |                            |                 |         |
| Filter Cake: 0.02 inches         |                            |                 |         |

## Recovery Information

Recovery Table

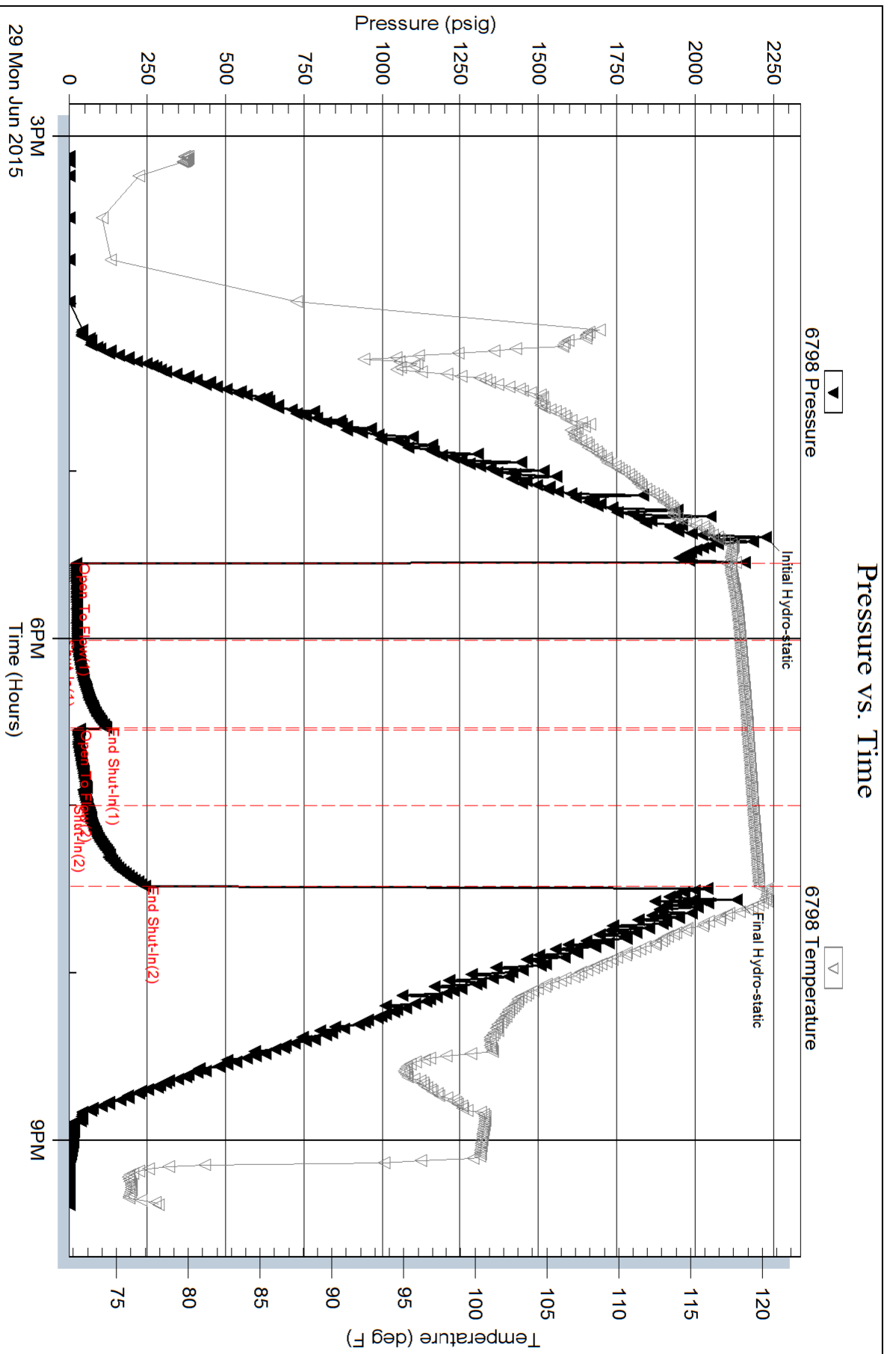
| Length<br>ft | Description | Volume<br>bbl |
|--------------|-------------|---------------|
| 5.00         | Mud         | 0.025         |

Total Length: 5.00 ft      Total Volume: 0.025 bbl

Num Fluid Samples: 0      Num Gas Bombs: 0      Serial #:

Laboratory Name:      Laboratory Location:

Recovery Comments:





**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

Thomas Gaerner Inc  
305 E 7th St  
St John, KS 67576  
ATTN: Josh Austin

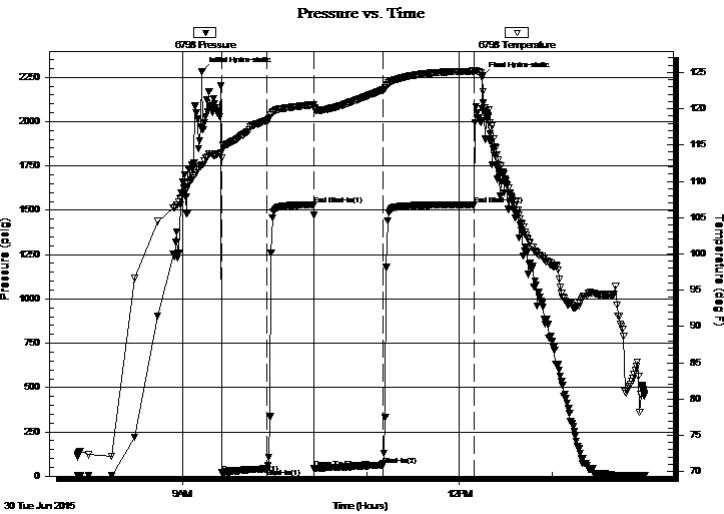
**15-25S-13W Stafford**  
**Garner 6**  
Job Ticket: 59774      **DST#: 3**  
Test Start: 2015.06.30 @ 07:51:24

## GENERAL INFORMATION:

Formation: **Arbuckle**  
Deviated: No Whipstock: ft (KB)  
Time Tool Opened: 09:25:09  
Time Test Ended: 14:00:31  
Interval: **4283.00 ft (KB) To 4290.00 ft (KB) (TVD)**  
Total Depth: 4290.00 ft (KB) (TVD)  
Hole Diameter: 7.88 inches Hole Condition: Good  
Test Type: Conventional Bottom Hole (Reset)  
Tester: Leal Cason  
Unit No: 74  
Reference Elevations: 1939.00 ft (KB)  
1926.00 ft (CF)  
KB to GR/CF: 13.00 ft

**Serial #: 6798      Inside**  
Press@RunDepth: 62.99 psig @ 4284.00 ft (KB)      Capacity: 8000.00 psig  
Start Date: 2015.06.30      End Date: 2015.06.30      Last Calib.: 2015.06.30  
Start Time: 07:51:25      End Time: 14:00:31      Time On Btm: 2015.06.30 @ 09:12:24  
Time Off Btm: 2015.06.30 @ 12:14:54

**TEST COMMENT:** IF: Weak Blow , Built to 6 inches  
IS: No Blow Back  
FF: Fair Blow , Built to 9 inches  
FS: No Blow Back



## PRESSURE SUMMARY

| Time (Min.) | Pressure (psig) | Temp (deg F) | Annotation           |
|-------------|-----------------|--------------|----------------------|
| 0           | 2284.10         | 112.30       | Initial Hydro-static |
| 13          | 18.66           | 113.19       | Open To Flow (1)     |
| 43          | 41.34           | 118.38       | Shut-In(1)           |
| 73          | 1530.96         | 120.56       | End Shut-In(1)       |
| 73          | 43.84           | 120.08       | Open To Flow (2)     |
| 118         | 62.99           | 122.55       | Shut-In(2)           |
| 177         | 1531.11         | 125.17       | End Shut-In(2)       |
| 183         | 2252.10         | 124.49       | Final Hydro-static   |

## Recovery

| Length (ft) | Description               | Volume (bbl) |
|-------------|---------------------------|--------------|
| 0.00        | 124 GIP                   | 0.00         |
| 60.00       | GOWCM 10%G 28%W 30%O 32%M | 0.30         |
| 64.00       | GSY Oil 10%G 90&O         | 0.90         |
|             |                           |              |
|             |                           |              |

\* Recovery from multiple tests

## Gas Rates

|  | Choke (inches) | Pressure (psig) | Gas Rate (Mcf/d) |
|--|----------------|-----------------|------------------|
|  |                |                 |                  |



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

**FLUID SUMMARY**

Thomas Gaerner Inc  
305 E 7th St  
St John, KS 67576  
ATTN: Josh Austin

**15-25S-13W Stafford**  
**Garner 6**  
Job Ticket: 59774      **DST#: 3**  
Test Start: 2015.06.30 @ 07:51:24

## Mud and Cushion Information

|                                  |                            |                           |
|----------------------------------|----------------------------|---------------------------|
| Mud Type: Gel Chem               | Cushion Type:              | Oil API: 35.2 deg API     |
| Mud Weight: 9.00 lb/gal          | Cushion Length: ft         | Water Salinity: 29000 ppm |
| Viscosity: 46.00 sec/qt          | Cushion Volume: bbl        |                           |
| Water Loss: 8.98 in <sup>3</sup> | Gas Cushion Type:          |                           |
| Resistivity: ohm.m               | Gas Cushion Pressure: psig |                           |
| Salinity: 4000.00 ppm            |                            |                           |
| Filter Cake: 0.02 inches         |                            |                           |

## Recovery Information

Recovery Table

| Length<br>ft | Description               | Volume<br>bbl |
|--------------|---------------------------|---------------|
| 0.00         | 124 GIP                   | 0.000         |
| 60.00        | GOWCM 10%G 28%W 30%O 32%M | 0.295         |
| 64.00        | GSY Oil 10%G 90&O         | 0.898         |

Total Length: 124.00 ft      Total Volume: 1.193 bbl  
 Num Fluid Samples: 0      Num Gas Bombs: 0      Serial #:  
 Laboratory Name:      Laboratory Location:  
 Recovery Comments: Gravity w as 39.2 @ 100 degrees  
 RW w as .18 @ 92 degrees



