



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1269150  
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: \_\_\_\_\_



1269150

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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Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Hylbom A 9
Doc ID	1269150

All Electric Logs Run

ARRAY COMPENSATED TRUE RESISTIVITY LOG
ARRAY COMPENSATED TRUE RESISTIVITY LOG 1 INCH
ARRAY COMPENSATED TRUE RESISTIVITY LOG 2 INCH
BOREHOLE COMPENSATED SONIC ARRAY LOG
MICROLOG
QUAD COMBO LOG
REPEAT PASS
SPECTRAL DENSITY DUAL SPACED NEUTRON LOG

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Hylbom A 9
Doc ID	1269150

Tops

Name	Top	Datum
Heebner	3768	
Toronto	3780	
Lansing	3818	
Kansas City	4206	
Pawnee	4405	
Cherokee	4452	
Morrow	4670	
St Genevieve	4787	
St Louis	4861	



**BASIC**  
ENERGY SERVICES  
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.  
Liberal, Kansas 67905  
Phone 620-624-2277

FIELD SERVICE TICKET

1717 05574 A

DATE 6/15 TICKET NO. \_\_\_\_\_

DATE OF JOB <u>6/25/15</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>Merit Energy</u>		LEASE <u>Hylbom</u> WELL NO. <u>A-9</u>							
ADDRESS _____		COUNTY <u>Pinnaw</u> STATE <u>KS</u>							
CITY _____ STATE _____		SERVICE CREW <u>Tommy Hector, Manganis, Rajala</u>							
AUTHORIZED BY <u>Chad Hix</u>		JOB TYPE: <u>FUE Surface</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>86573</u>	<u>6</u>						<u>6/25</u>	<u>AM</u>	<u>5:00</u>
<u>38119/19570</u>	<u>6</u>					ARRIVED AT JOB		<u>AM</u>	<u>7:30</u>
<u>30463/19566</u>	<u>6</u>					START OPERATION		<u>AM</u>	<u>10:44</u>
<u>19881/39547</u>	<u>6</u>					FINISH OPERATION	<u>6/25</u>	<u>PM</u>	<u>12:30</u>
						RELEASED		<u>PM</u>	<u>1:30</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 supplementary 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
<u>CL101</u>	<u>Acen Blend</u>	<u>sk</u>	<u>500</u>		
<u>CL110</u>	<u>Premium Plus Cement</u>	<u>sk</u>	<u>240</u>		
<u>CC109</u>	<u>Calcium Chloride</u>	<u>lb</u>	<u>1798</u>		
<u>CC102</u>	<u>Colloidal</u>	<u>lb</u>	<u>135</u>		
<u>CC130</u>	<u>C-51</u>	<u>lb</u>	<u>517</u>		
<u>E101</u>	<u>Heavy Equipment Mileage</u>	<u>mi</u>	<u>150</u>		
<u>CE240</u>	<u>Blending &amp; mixing service charge</u>	<u>sk</u>	<u>340</u>		
<u>E113</u>	<u>Propanol bulk delivery charge</u>	<u>qm</u>	<u>1270</u>		
<u>CE202</u>	<u>Noth Charge 1007-2000</u>	<u>hrs</u>	<u>1</u>		
<u>CE504</u>	<u>Plus Container Utilization charge</u>	<u>job</u>	<u>1</u>		
<u>E100</u>	<u>Dist Mileage Charge, Pick Up</u>	<u>mi</u>	<u>50</u>		
<u>5003</u>	<u>Service Supervisor First 8 hrs on loc</u>	<u>ea</u>	<u>1</u>		
<u>T105</u>	<u>Cement Data Reg. Monitor</u>				

Well Hylbom A-9  
AFE 45125  
GL 83001075

Office Garden City  
Date 4/25/15 [Signature]

SUB TOTAL 9446.00

CHEMICAL / ACID DATA:			

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

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

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



# JOB LOG CONT

TICKET# 1717-05574A

TICKET DATE 6/25/15

Chart No.	Time	Rate (BPM)	Volume (BBL)(GAL)	Rate			Job Description / Remarks
				N2	CSG.	Tbg	
		7.2	100		600		
	00:00	0	104		900		Pressure up to 1400
	00:05						Released pack, float held
							1 BBL pack
	00:08				1500		Pressure test casing
	00:11						Bled off to 1100 Isolate
							to head side pump only
							and pressure up again.
	00:14				1500		Pressure holding
	00:19						still holding
	00:30						Released pack
							float held again.
							Casing test successful.
							Job Complete
							Merit Energy
							Hylbpm # -9
							Surface
							Tommy Marcellus



### Cement Report

Customer	Merit Energy	Lease No.		Date	6/25/15
Lease	Hylbom	Well #	A-9	Service Receipt	1717-055414
Casing	8 5/8	Depth	1689.26	County	Finney
Job Type	Surface	Formation		State	KS
				Legal Description	30/23/34

Pipe Data		Perforating Data		Cement Data
Casing size	8 5/8 24#	Tubing Size		Lead 3005K Acow @ 12.1
Depth	1689	Depth		
Volume	104.59	From	To	2.1 14.0
Max Press	1500	From	To	Tail in 240 st Acow @ 14.8
Well Connection	PC	From	To	
Plug Depth	1644.59	From	To	1.34 6.33

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
17:00					Callout
19:30					On loc. Running casing
19:45					Trucks on loc.
21:16					3 Port in Trucks
21:20					Safety mts w/ B&S Emp.
21:26					Rig up casing on Btm
22:30					Safety mts w/ rig crew
22:33					Rig up head / Circ. Swage Juck
22:44					Press test 2300
22:54	200		128.2	7	Start Mixing Cement Lead 3005K
23:15	150		57.27	6	Switch to Tail
23:28					Sh-down Drop plug & wash up down hole
23:36					Start Pumping tail to tail successful
	200		10	6	
	200		20	6	
23:44	250		30	6	Cement Returns to Surface
	350		40	5.5	
	400		50	5.5	
	500		60	5	
	600		70	5.8	
	650		80	5.6	
	700		90	5.4	
	600		95	2.3	Slow Rate to go 1 Pump

Service Units	86543	38119/19540	30463/19566	19831/19547
Driver Names	Tommy M.	Hector E.	Margaret M.	Rojelio M.

Early Lion Lyce Davis Tommy M.  
 Customer Representative Station Manager Cementer



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

1700 S. Country Estates Rd.  
Liberal, Kansas 67905  
Phone 620-624-2277

FIELD SERVICE TICKET  
1717 06480 A

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

DATE OF JOB <b>6-28-15</b>	DISTRICT <b>1717</b>	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 <b>Merit Energy</b>	LEASE <b>Hylbom # A-9</b>		WELL NO.				
ADDRESS		COUNTY <b>Pinnell</b>	STATE <b>KS</b>				
CITY		STATE		SERVICE CREW <b>G. Behaviana, S. Chavez</b>			
AUTHORIZED BY <b>T. Davis</b>		JOB TYPE: <b>242 5<sup>1/2"</sup> Production</b>					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED <b>6-28-15 6:00 PM</b>	
<b>78940</b>	<b>2</b>					ARRIVED AT JOB <b>10:00 AM</b>	
<b>37223</b>	<b>2</b>					START OPERATION <b>11:30 AM</b>	
<b>37726</b>	<b>2</b>					FINISH OPERATION <b>12:30 PM</b>	
<b>3046</b>	<b>2</b>					RELEASED <b>2:00 PM</b>	
<b>37724</b>	<b>2</b>					MILES FROM STATION TO WELL <b>50 mi</b>	

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

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SIGNED: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CC104	50/50 Poz	SK	280		
CC111	Salt	LB	1724		
CC201	Gilsonite		1405		
CC113	Gypsum		1180		
CC103	GLS		142		
CC105	C-41P		59		
CC155	Specflush II		500		
Well <u>Hylbom A-9</u>					
AFE <u>45125</u>					
GL <u>83001D75</u>					
Office <u>Garden City</u>					
Date <u>6/28/15</u>					

CHEMICAL / ACID DATA:			

SUB TOTAL		<b>5357.29</b>
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE <i>[Signature]</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO.







### Cement Report

Customer	Merit Energy		Lease No.		Date	6-28-15	
Lease	Tulbarn		Well #	A-9		Service Receipt	06480
Casing	5 1/2" 17#	Depth	4975'		County	Finney	
Job Type	5 1/2" Production		Formation		Legal Description	30-23-34	
<b>Pipe Data</b>				<b>Perforating Data</b>		<b>Cement Data</b>	
Casing size	5 1/2" 17#	Tubing Size		<b>Shots/Ft</b>		<b>Lead</b>	
Depth	4975'	Depth		From	To		
Volume	Disp-114.5 bbl	Volume		From	To		
Max Press	1500 #	Max Press		From	To		
Well Connection	TD-5000'	Annulus Vol.		From	To	Tail in 280 sk 50/50 poz	
Plug Depth	55-45'	Packer Depth		From	To		
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log		
10:00					on loc-site assessment		
10:10					spot trucks rig up		
11:15					safety meeting - JSA		
11:40					pressure test 200 #		
11:40	200		5	4	pump 5 bbl H <sub>2</sub> O spacer		
11:42	200		12	4	pump 500 gal superflush		
11:45	200		5	4	pump 5 bbl H <sub>2</sub> O spacer		
11:50	200		78.8	6	mix & pump 280 sk 50/50 poz @ 13.5# - 1.58 #/sk		
12:05					wash dumpily lines		
12:10	100		0	7	drop plug, disp csg		
12:25	1000		105	2	Set wa rate		
12:30	1500		114	0	land plug, beat hold job complete		
Service Units	78940	37223	37724	3046	37724		
Driver Names	A. Suera	G. Felton	S. Chavez				

E. Zou  
Customer Representative

T. Danks  
Station Manager

A. Suera  
Cementer