

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1266582
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

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: _____

1266582

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Geologist Report / Mud Logs	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i>	PRODUCTION INTERVAL: Top _____ Bottom _____
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:
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Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Levi 18-1
Doc ID	1266582

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
DUAL SPACED NEUTRON SPECTRAL DENSITY LOG
MICROLOG
QUAD COMBO LOG
REPEAT PASS
SIX ARM CALIPER DIRECTIONAL DATA LOG

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Levi 18-1
Doc ID	1266582

Tops

Name	Top	Datum
Heebner	4151	
Toronto	4171	
Lansing	4242	
SWOPE	4706	
Hertha	4734	
Marmaton	4841	
Pawnee	4951	
Cherokee	5008	
Atoka	5195	
Morrow	5326	
St Genevieve	5496	



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1717 05463 A

DATE 8/1 TICKET NO. _____

DATE OF JOB <u>8-1-15</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>Levi</u>		WELL NO. <u>18-1</u>					
ADDRESS _____		COUNTY <u>Haskell</u>		STATE <u>Ks.</u>					
CITY _____ STATE _____		SERVICE CREW <u>Daniel, Hector E., Maria Hector R.</u>							
AUTHORIZED BY <u>Tyce Davis</u>		JOB TYPE: <u>Z42 Surface</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>78938</u>	<u>1.5</u>						<u>7-31-15</u>	<input checked="" type="checkbox"/>	<u>10:00</u>
<u>38117/19919</u>	<u>1.5</u>					ARRIVED AT JOB	<u>8-1-15</u>	<input checked="" type="checkbox"/>	<u>12:30</u>
<u>38111/37724</u>	<u>1.5</u>					START OPERATION		<input checked="" type="checkbox"/>	<u>2:00</u>
<u>14354/19578</u>	<u>1.5</u>					FINISH OPERATION		<input checked="" type="checkbox"/>	<u>3:30</u>
						RELEASED	<u>8-1-15</u>	<input checked="" type="checkbox"/>	<u>4:30</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 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
CL 101	A-Con' Blend	sk	260		4836.00
CL 110	Premium Plus Cement	sk	240		3912.00
CC 109	Calcium Chloride	lb	1187		1246.35
CC 102	Celloflake	lb	126		466.20
CC 130	C-51	lb	49		1285.00
E101	Heavy Equipment Mileage	mi	150		1125.00
CE 240	Blending & Mixing Service Charge	sk	500		700.00
E 113	Proppant & Bulk Delivery Charges	tm	1178		2943.75
CE 202	Depth Charge; 1001'-2000'	4hrs.	1		1500.00
CE 504	Plug Container Utilization Charge	job.	1		250.00
E100	Unit Mileage Charge-Pickups Small U	mi	50		225.00
S003	Service Supervisor; first 8hrs. on loc.	ea	1		175.00
T105	Cement Data Acquisition Monitor	ea	1		550.00
				Sub Total	19154.30
				Promised Discount 58%	<10151.78>
				Settlement Agreement Add 10%	<1,915.43>

Well Levi 18-1

AFE 45129

GL 82001075
CHEMICAL/ACID DATA

Office Liberal KS

Date 8/1/15

SUB TOTAL			
SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
TOTAL			<u>7087.09</u>

SERVICE REPRESENTATIVE Daniel Beck

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

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____



Cement Report

Customer <i>Merit Energy</i>		Lease No.		Date <i>7-31-15</i>	
Lease <i>Levi</i>		Well # <i>18-2</i>		Service Receipt <i>1717 05463 A</i>	
Casing <i>8 5/8" 24#</i>	Depth <i>1519.29 ft.</i>	County <i>Haskell</i>		State <i>Ks.</i>	
Job Type <i>242 Surface</i>		Formation		Legal Description <i>18 30 32</i>	
Pipe Data			Perforating Data		Cement Data
Casing size <i>8 5/8" 24#</i>	Tubing Size		Shots/Ft		Lead 'A-Con' Blend <i>260 sk</i>
Depth <i>1519.29 ft.</i>	Depth	From	To		
Volume <i>94.0 bbl</i>	Volume	From	To	<i>2.40 gal/sk 14.00 gal/sk</i>	
Max Press <i>2000</i>	Max Press	From	To	Tail in Premium Plus <i>240 sk Cement</i>	
Well Connection <i>P.C.</i>	Annulus Vol.	From	To		
Plug Depth <i>1474.61 ft</i>	Packer Depth	From	To	<i>1.34 gal/sk 6.33 gal/sk</i>	
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>22:00</i>					<i>Call Out</i>
<i>12:30</i>					<i>On Location</i>
<i>12:45</i>					<i>Safety Meeting w/ BEES personnel</i>
<i>1:00</i>					<i>Rig Up</i>
<i>1:30</i>					<i>Safety Meeting w/ Rig Crew</i>
<i>1:45</i>					<i>Rig Up Cement Head</i>
<i>1:55</i>					<i>Pressure Test to 2000</i>
<i>2:00</i>	<i>150</i>		<i>111.13 bbl slurry</i>	<i>5.0</i>	<i>Pump Lead</i>
<i>2:25</i>	<i>75</i>		<i>57.27 bbl slurry</i>	<i>3.5</i>	<i>Pump Tail</i>
<i>3:45</i>					<i>Shutdown/Wash Pump/Drop Plug</i>
	<i>100</i>		<i>10</i>	<i>5.0</i>	<i>Displacement</i>
	<i>150</i>		<i>20</i>	<i>5.0</i>	
	<i>200</i>		<i>30</i>	<i>5.0</i>	<i>Cement Returns</i>
	<i>220</i>		<i>40</i>	<i>5.0</i>	
	<i>350</i>		<i>50</i>	<i>4.8</i>	
	<i>450</i>		<i>60</i>	<i>4.7</i>	
	<i>500</i>		<i>70</i>	<i>4.5</i>	
	<i>550</i>		<i>80</i>	<i>4.5</i>	
	<i>500</i>		<i>84</i>	<i>2.0</i>	<i>Slow Rate</i>
<i>3:10</i>	<i>1500</i>		<i>94</i>	<i>0</i>	<i>Pressure up to 1500 psi + hold for 15 minutes.</i>
<i>3:25</i>					<i>Release Back Float Held</i>
					<i>Job Complete</i>
Service Units	<i>78938</i>	<i>38117/19919</i>	<i>38111/37724</i>	<i>14354/19578</i>	
Driver Names	<i>Hector E.</i>	<i>Daniel</i>	<i>Hector R.</i>	<i>Mario</i>	

James Cutter
Customer Representative

Tyler Davis
Station Manager

Daniel Gresh
Cementer



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

FIELD SERVICE TICKET
 1717 05464 A

DATE 8/4 TICKET NO. _____

DATE OF JOB <u>8-4-15</u>	DISTRICT _____	NEW WELL <input type="checkbox"/>	OLD WELL <input checked="" type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.: _____		
CUSTOMER <u>Merit Energy</u>		LEASE <u>Levi</u>				WELL NO. <u>18-2</u>			
ADDRESS _____		COUNTY <u>Haskell</u>		STATE <u>Ks.</u>					
CITY _____ STATE _____		SERVICE CREW <u>Daniel, Rogelio, Santiago</u>							
AUTHORIZED BY <u>Chad Hinz</u>		JOB TYPE: <u>Z42 Production</u>							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
<u>78938</u>	<u>1.5</u>					<u>8-3-15</u>	<u>8-3-15</u>	<u>PM</u>	<u>10:30</u>
<u>38117/19919</u>	<u>1.5</u>					ARRIVED AT JOB	<u>8-4-15</u>	<u>PM</u>	<u>3:00</u>
<u>30464/37547</u>	<u>1.5</u>					START OPERATION		<u>PM</u>	<u>7:30</u>
						FINISH OPERATION		<u>PM</u>	<u>9:00</u>
						RELEASED	<u>8-4-15</u>	<u>PM</u>	<u>10:00</u>
						MILES FROM STATION TO WELL <u>50</u>			

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

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

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

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL 104	50/50 Poz	sk	280		3080.00
CC 111	Salt	lb.	1724		862.80
CC 201	Gilsonite	lb	1405		941.35
CC 113	Gypsum	lb	1180		885.00
CC 103	C-15	lb	142		1775.00
CC 105	C-41P	lb	59		236.00
E 101	Heavy Equipment Mileage	mi	100		750.00
CE 240	Blending + Mixing Service Charge	sk	280		392.00
E 113	Proppant + Bulk Delivery Charges	tm	590		1475.00
CE 206	Depth Charge, 5001'-6000'	4hrs	1		2880.00
CE 504	Plug Container Utilization Charge	job	1		250.00
E 100	Unit Mileage Charge - Pickups, Small V.	mi	50		225.00
5003	Service Supervisor, first 8hrs. on loc.	ea	1		175.00
T 105	Cement Data Acquisition Monitor	ea	1		550.00
CE 503	High Head Charge	ea	1		300.00
				Sub TOTAL	14796.35
	Well <u>Levi 18-1</u>			Promised Discount @ <u>64%</u>	< 9456.86
	AFE <u>45129</u>			Settlement Agreement Add <u>10%</u>	< 1477.69
	GL <u>83001025</u>				
	CHEMICAL / ACID DATA:				
	Office <u>Liberal 105</u>				
	Date <u>8/4/15</u>				
				SUB TOTAL	3841.85
				SERVICE & EQUIPMENT	%TAX ON \$
				MATERIALS	%TAX ON \$
				TOTAL	

SERVICE REPRESENTATIVE Daniel Beck

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

FIELD SERVICE ORDER NO. _____

Printed on 8-15-15



Cement Report

Customer Merit Energy		Lease No.	Date 8-3-15
Lease Levi		Well # 18-1	Service Receipt 1717 0564 A
Casing 5 1/2" 17#	Depth 5696.91 Ft	County Haskell	State Ks.
Job Type 342 Production	Formation	Legal Description 18 30 32	

Pipe Data		Perforating Data		Cement Data
Casing size	Tubing Size	Shots/Ft		Lead
5 1/2" 17#		From	To	Tail in 50/50 Poz. 280sk 1.58^{fr}/sk 7.36^{gal}/sk
Depth 5696.91 Ft	Depth	From	To	
Volume 131.1 bbl	Volume	From	To	
Max Press 2800 psi	Max Press	From	To	
Well Connection P.C.	Annulus Vol.	From	To	
Plug Depth 5652.29 Ft	Packer Depth	From	To	

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
22:30					Call Out
3:00					On Location, wait on rig
4:15					Safety Meeting w/ B.E.S. personnel
4:30					Rig Up
6:15					Wait on rig to circulate
7:00					Safety Meeting w/ Rig Crew
7:15					Rig Up Head
7:30					Pressure Test to 2800 psi
7:45	300		78,79 bbls slurry	5.2	Pump Tail
8:05					Shutdown/Wash Pump
8:15	100		10	5.1	Drop Plug / Displace
	100		20	5.1	
	100		30	5.1	
	100		40	5.1	
	100		50	5.1	
	100		60	5.1	
	250		70	5.0	
	450		80	4.9	
	600		90	4.9	
	900		100	4.6	
	1100		110	4.4	
	1300		120	4.0	
	1300		122	2.6	Slow Rate

Service Units	78938	38117/19919	30464/37547		
Driver Names	Daniel	Rogelio	Santiago		

James Cutter
Customer Representative

Tyce Davis
Station Manager

Daniel Beck
Cementer
Taylor Printing, Inc

Transitiv

