



Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION 1274605
OIL & GAS CONSERVATION DIVISION

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD
K.A.R. 82-3-117

OPERATOR: License #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
 Is ACO-1 filed? Yes No If not, is well log attached? Yes No
 Producing Formation(s): List All (If needed attach another sheet)
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

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
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 Plugging Completed: _____

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugging Contractor License #: _____ Name: _____
 Address 1: _____ Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Phone: (_____) _____
 Name of Party Responsible for Plugging Fees: _____
 State of _____ County, _____, ss.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



BASIC RECEIVED

ENERGY SERVICES

DEC 11 2015

PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1002427	1718	12/10/2015
INVOICE NUMBER			91989434

Pratt (620) 672-1201
 B LOTUS OPERATING CO. LLC
 I 100 S MAIN ST STE 420
 L WICHITA
 L KS US 67202
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Piester #C-1
 O LOCATION
 B COUNTY Kiowa
 S STATE KS
 I JOB DESCRIPTION Cement-Casing Seat-Prod W
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40897821	27463-0		Net - 30 days	01/09/2016

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 12/08/2015 to 12/08/2015</i>				
0040897821				
171812883A Cement-Casing Seat-Prod W 12/08/2015 C.C.S.P.W. - Plug To Abandon				
60/40 POZ	120.00	EA	6.00	720.00 T
Cement Gel	208.00	EA	0.13	26.00 T
Cement Gel	1,000.00	EA	0.13	125.00 T
"Unit Mileage Chg (PU, cars one way)"	30.00	MI	2.25	67.50 T
Heavy Equipment Mileage	60.00	MI	3.75	225.00 T
"Proppant & Bulk Del. Chgs., per ton mil	156.00	EA	1.25	195.00 T
Depth Charge; 501'-1000'	1.00	EA	600.00	600.00 T
Blending & Mixing Service Charge	120.00	BAG	0.70	84.00 T
"Service Supervisor, first 8 hrs on loc.	1.00	EA	87.50	87.50 T

GL# 9350
 DESC. cement to
plug
 WELL # piests

ENTERED
 DEC 14 2015

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	2,130.00
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	159.75
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	2,289.75
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 12333 A

14-295-16W

DATE _____ TICKET NO. _____

DATE OF JOB 12-8-15		DISTRICT Pratt, Kansas		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 Lotus Operating Company				LEASE Piester "C"				WELL NO. 1							
ADDRESS				COUNTY Iowa				STATE Kansas							
CITY				STATE				SERVICE CREW C. Messick, R. Sullivan, P. Shanline							
AUTHORIZED BY				JOB TYPE: C C S.P.W. Plug To Abandon											
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
27463	1						12-7-15			10:00					
						ARRIVED AT JOB	12-8-15			9:00					
						START OPERATION				9:30					
19918	1					FINISH OPERATION				10:30					
						RELEASED	12-8-15			10:45					
						MILES FROM STATION TO WELL				30					

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

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

SIGNED: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP103	60/40 Poz	SK	120		\$ 1,440 00
CC200	Cement Gel	Lb	208		\$ 52 00
CC200	Cement Gel	Lb	1,000		\$ 250 00
E100	Pickup Mileage	Mi	30		\$ 135 00
E101	Heavy Equipment Mileage	Mi	60		\$ 450 00
E113	Bulk Delivery	Tm	156		\$ 390 00
CE201	Depth Charge Self Feed To 1,000 feet	4 Hr	1		\$ 1,200 00
CE240	Bleeding and Mixing Service	SK	120		\$ 168 00
S003	Service Supervisor	Ea	1		\$ 175 00

SUB TOTAL \$ 4,260 00

CHEMICAL / ACID DATA:			

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

TOTAL \$ 2,130 00

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

FIELD SERVICE ORDER NO.

Customer Lotus Operating Company		Lease No.		Date 12-8-15	
Lease Piester 'C'		Well # 1			
Field Order # 12883	Station Pratt, Kansas	Casing" 2 7/8 Tubing	Depth	County Iowa	State Kansas
Type Job CCS.P.W. Plug To Abandon			Formation	Legal Description 14-295-16W	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		10 sacks Gel	RATE	PRESS	ISIP
Depth	Depth	From	To	10 sacks 60/40 Poz	Max		5 Min.
Volume	Volume	From	To	with 78 Total Gel	Min		10 Min.
Max Press	Max Press	From	To		Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush Freshwater	Gas Volume		Total Load

Customer Representative Robin Brown	Station Manager Kevin Gordley	Treater Clarence R. Messich
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Service Units	37,216	27,463	19,826	19,918						
Driver Names	Messich	Sullivan	Sharline							

Time AM	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
9:00					Trucks on location and hold safety meeting.
					start 1 st Plug 924 Ft. 10 sacks Gel, 50 sacks 60/40 Poz
9:20		300		3.5	start mixing Gel
		300	21	3.5	Start mixing 50 sacks 60/40 Poz cement.
		300	33	3.5	Start Freshwater Displacement
9:35			35		Stop pumping.
					2 nd Plug 314 Feet 60 sacks 60/40 Poz cement
9:50		100		3	start mixing cement
		100	15	3	start Fresh water Displacement.
9:56		0	17		stop pumping.
					3 rd Plug 61 Ft 10 sacks cement
10:12		0		2	start mixing cement
		0	6		Cement circulated to surface
10:15		0			Stop pumping.
"					Wash up pump truck.
10:45					Job Complete