

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION
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: _____

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 Geologist Report / Mud Logs <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				

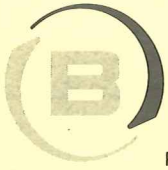
1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted 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: <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) (Submit ACO-4)</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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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 12770 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>09-15-15</u> DISTRICT <u>PRATT KC</u>		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>Coral Coast Petro.</u>		LEASE <u>MARY</u> WELL NO.:								
ADDRESS		COUNTY <u>NESS</u> STATE <u>KS</u>								
CITY STATE		SERVICE CREW <u>Sullivan, Gross E.S. (operator)</u>								
AUTHORIZED BY		JOB TYPE: <u>onw 8 3/8 SURFACE</u>								
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME
							<u>9-15-15</u>			<u>4:00</u>
						ARRIVED AT JOB				<u>7:45</u>
<u>20920</u>	<u>25</u>					START OPERATION				<u>9:50</u>
<u>19862</u>	<u>15</u>					FINISH OPERATION				<u>10:15</u>
						RELEASED				<u>10:45</u>
						MILES FROM STATION TO WELL				<u>100</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: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP 103	60740 por cont	sk	150		1,800 00
CC 102	cellf. lke	lb	38		140 00
CC 109	Calcium chloride	lb	387		406 35
E 100	Pumper m	mi	100		450 00
E 101	Hydrant eqt	mi	200		1,500 00
E 113	Bulk Mule	TR	645		1,612 50
PE 200	Depth Charge 0-500'	sq	1		1,000 00
PE 240	Hydrant m	sk	150		210 00
5003	Service Surface	sk	1		175 00
SUB TOTAL					7,294 45

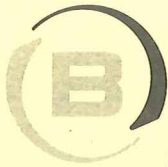
CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		2,917 78

SERVICE REPRESENTATIVE <u>Robert Sullivan</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Mike</u>
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(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____



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 12622 A

2-165-22W

DATE _____ TICKET NO. _____

DATE OF JOB: 9-23-15		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: Coral Coast Pet., LC				LEASE: Mary				WELL NO. 1	
ADDRESS:				COUNTY: Ness		STATE: Kansas			
CITY:		STATE:		SERVICE CREW: Messich, P. Franklin, M. Mattal					
AUTHORIZED BY:				JOB TYPE: C.N.W. - Plug To Abandon					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
86,779	3						9-23-15	AM	1:00
						ARRIVED AT JOB		PM	4:00
						START OPERATION		PM	8:30
21,010	3					FINISH OPERATION		PM	11:30
						RELEASED	9-23-15	AM	11:45
						MILES FROM STATION TO WELL			100

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: Trisho Ken
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP103	60/40 Poz	skt	230		\$ 2,760.00
CC102	cellflake	Lb	58		\$ 214.60
CC200	Cement Gel	Lb	396		\$ 99.00
E100	Unit Mileage Charge - Pickups, small vans & cars	mi	100		\$ 450.00
E101	Heavy Equipment Charge	mi	200		\$ 1,500.00
E113	Proppant and Bulk Delivery	Tm	990		\$ 2,475.00
CE202	Depth Charge 1,000 Feet To 2,000 Feet	4 Hr	1		\$ 1,500.00
CE240	Blending and Mixing Service	skt	230		\$ 322.00
S003	Service Supervisor	Ea	1		\$ 175.00

SUB TOTAL \$ 9,495.60

CHEMICAL / ACID DATA:			

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

TOTAL \$ 3,798.24

SERVICE REPRESENTATIVE: Trisho Ken THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Trisho Ken

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Subj: **Mary #1 final drilling report**
 Date: 9/24/2015 7:59:24 A.M. Central Daylight Time
 From: DanielRey@aol.com
 To: danielrey@aol.com, cfilson@hotmail.com

Even though we ran quite a bit high to the well to the south and had a good sand section, the Cherokee sand only contained a slight sample show of oil and the drill stem test only recovered water. The elogs didn't show any other potential zones. This well will be plugged and abandoned as a dry hole. We will be starting on the #1 Dorothy on Monday.

#1Mary

API#: 15-135-25888-00-00

700'FSL&720'FWL

Section 2-16s-22w

Ness County, Kansas

ELEV: 2426'KB, 2424'DF, 2419'GL

Projected RTD: 4400'

Contractor: Pickrell Drilling Co. Inc. Rig #10

September 9, 2015 Pits have been dug. Too wet to move rig in.

September 10, 2015 Rained out.

September 14, 2015 Moving in drilling rig tomorrow.

September 15, 2015 Moving in drilling rig. Will possibly spud today.

September 16, 2015 Drilling at 230'. Spud @ 4:00 PM yesterday. Drld 12 1/4" surface hole to 224'. SHT @ 224' = 3/4°. Ran 5 jts of New 8 5/8" 24# surface casing set @ 220' (tally was 211'), cmt w/150sx 60-50 poz, 3% CC w/1/4#CF/sx. PD @ 10:15 PM on 9-15-15. CDC. Basic Energy ticket # 12770. WOC approx. 8 hrs.

September 17, 2015 Drilling at 1500'. 1° deviation.

September 18, 2015 Drilling at 2405'.

September 19, 2015 Drilling at 3060'.

September 20, 2015 Drilling at 3650'. Displaced mud at 3403'. 3/4°.

September 21, 2015 Drilling at 4065'.

September 22, 2015 Circulating upper sands at 4340'.

September 23, 2015 Logging at 4490. DST #1 Basal Cherokee sand 10-30-60-60 Recovered 993' water, 120° F, Hyd: 2189-2137 FP: 70-90,179-534 SIP 1252-1254 Will run elogs today.

September 24, 2015 Ran E-Logs. LTD 4493'. P&A as follows: 50sx @ 1850', 80sx @ 1100', 50sx @ 270', 20sx @ 60', 30sx in RH of 60-40 poz, 4% gel w/1/4#CF/sx. Plugging orders from Ken Jehlik on 9/21/15 @ 9:00 AM. Plugging completed @ 11:00PM on 9-23-15. Basic Energy ticket #12622.

Formation tops:

Structure to comparison well #1-11 Wyman (SW/4 11)

Topeka	3545	-1119	+11
Heebner	3812	-1386	+16
Lansing	3852	-1426	+16
Fort Scott	4302	-1876	+19
Cherokee	4315	-1889	+19
Cherokee basal sand	4380	-1954	+38
Mississippi	4443	-2017	+33