



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

KANSAS CORPORATION COMMISSION 1326171
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
 K.A.R. 82-3-117

Form CP-4
March 2009

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

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



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 14880 A

DATE _____ TICKET NO. _____

DATE OF JOB: 12/20/16		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: LD Drilling, Inc				LEASE: Thompson				WELL NO.: 1-2							
ADDRESS				COUNTY: Scott Pratt				STATE: KS							
CITY				STATE				SERVICE CREW: Scott, Josh, Tim							
AUTHORIZED BY: <i>Scott</i>				JOB TYPE: Plug to Abandon				241							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	PM	TIME					
86779	X 1					ARRIVED AT JOB	12/20/16	9:10							
19862	X 15					START OPERATION	12/20/16	10:00							
						FINISH OPERATION	12/20/16	11:30							
						RELEASED	12/20/16	11:45							
MILES FROM STATION TO WELL.															

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

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP103	60/40 P02	SK	120		1440 ⁰⁰
CC 200	Cement Gel	lb	208		52 ⁰⁰
CC 200	Cement Gel	lb	1500		375 ⁰⁰
E100	Unit Mileage Charge Pick ups	M1	5		22 ⁵⁰
E101	Heavy Equipment Mileage	M1	10		75 ⁰⁰
E113	Prop & Bulk Delivery Charge	TM	26		65 ⁰⁰
CE201	Depth Charge 50'-1000'	Mes	1		1200 ⁰⁰
CE240	Blending & Mixing Service	SK	120		168 ⁰⁰
3003	Service Supervisor	EA	1		175 ⁰⁰
SUB TOTAL					3572 ⁵⁰

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		1857 ⁷⁰

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

BASIC

energy services, L.P.

TREATMENT REPORT

Customer <i>W.D. Drilling Inc.</i>	Lease No.	Date <i>12/20/16</i>
Lease <i>Thompson</i>	Well # <i>1-2</i>	
Field Order <i>14350A</i>	Station <i>Pratt KS</i>	County <i>Pratt</i>
Type Job <i>Plug to Abandonment 241</i>	Casing <i>4 1/2</i>	Depth <i>900'</i>
	Formation	Legal Description

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS
<i>4 1/2</i>				<i>120 steps</i>			
Depth	Depth	From	To	Pre-Pad	Max		5 Min.
<i>900'</i>				<i>60/40 P02</i>			
Volume	Volume	From	To	Pad	Min		10 Min.
<i>14.31</i>				<i>4% Cel</i>			
Max Press	Max Press	From	To	Frac	Avg		15 Min.
<i>600 #5</i>							
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
<i>4 1/2</i>							
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative <i>Janis</i>	Station Manager <i>Kevin Goodley</i>	Treater <i>Scott Cross</i>
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Service Units	<i>58450</i>	<i>78957</i>	<i>616779</i>	<i>70959</i>	<i>149603</i>
Driver Names	<i>Scott</i>	<i>Josh</i>	<i>—</i>	<i>Tim</i>	<i>—</i>

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>9:10</i>					<i>On location Safety Meeting Rigs up</i>
<i>9:58</i>	<i>0</i>			<i>3.5</i>	<i>Pump H2O Spacer (900')</i>
<i>10:00</i>	<i>170</i>		<i>5</i>	<i>4</i>	<i>Mix 15 steps Gel</i>
<i>10:08</i>	<i>70</i>		<i>32</i>	<i>4</i>	<i>Mix 50 steps 60/40 P02 15.78ppg</i>
<i>10:12</i>	<i>40</i>		<i>12.7</i>	<i>4</i>	<i>Shut Displacement Fluid Circ</i>
<i>10:15</i>	<i>0</i>		<i>10.5</i>	<i>0</i>	<i>Shut down</i>
					<i>425'</i>
<i>10:30</i>	<i>80</i>			<i>4</i>	<i>Pump H2O Spacer</i>
<i>10:30</i>	<i>70</i>		<i>2</i>	<i>4</i>	<i>Mix 50 steps 60/40 P02 15.78ppg</i>
<i>10:34</i>	<i>50</i>		<i>12.7</i>	<i>4</i>	<i>Shut Displacement</i>
<i>10:35</i>	<i>0</i>		<i>2.75</i>	<i>0</i>	<i>Shut down</i>
					<i>40'</i>
<i>10:57</i>	<i>30</i>			<i>2.5</i>	<i>Mix 70 steps 60/40 P02 15.78ppg</i>
<i>11:00</i>	<i>0</i>		<i>5</i>	<i>0</i>	<i>Cement Circulated Shut down</i>
<i>11:05</i>					<i>Wash up Pump</i>
<i>11:30</i>					<i>Job Complete</i>

Mike's Testing & Salvage Inc.

DBA Kelso Well Service
P.O. Box 467
Chase, KS 67524

Invoice

Date	Invoice #
12/27/2016	15666

Bill To
L.D. Drilling, Inc. 7 SW 26th Avenue Great Bend, Kansas 67530

P.O. No.	County	Lease
Jamie - Rig #2	Pratt	Thompson 1-2

Qty	Description	Rate	Amount
17	Hours Rig Time	195.00	3,315.00T
	Casing Cutter	350.00	350.00T
2	Sacks Cement	16.50	33.00T
	12-15-16 Move to location, set in rig, dug out cellar and pit. 2 Hours.		
	12-16-16 Excel Wireline set plug @3840', dumped 2 sacks cement with bailer. 3 Hours.		
	12-15-16 Loaded casing with salt water, set in floor and rigged up, got 20" of stretch, cut casing @2800' and 2200', worked free, pulled up to 900', shut down. 8 Hours.		
	12-20-16 Basic Energy pumped 15 gel, 50 sacks 60/40 pos @900', pulled up to 425', pumped 50 sacks 60/40 pos, 4% gel, pulled up to 40' and circulated 20 sacks 60/40 pos to surface. Tore down, Plugging Complete.		
	KCC On Location: Steve Pfeifer Sales Tax	8.25%	305.09

Total	\$4,003.09
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