KOLAR Document ID: 1329668

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1
January 2018
Form must be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No.:
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
☐ Oil ☐ WSW ☐ SWD	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ EOR	Total Vertical Depth: Plug Back Total Depth:
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
☐ Deepening ☐ Re-perf. ☐ Conv. to EOR ☐ Conv. to SWD	Drilling Fluid Management Plan
☐ Plug Back ☐ Liner ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)
Described	Chloride content: ppm Fluid volume: bbls
☐ Commingled Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	Location of fluid disposal if flauled offsite.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R
Recompletion Date Recompletion Date	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:									

KOLAR Document ID: 1329668

Page Two

Operator Name: _				Lease Name:			Well #:				
Sec Twp.	S. R.	E	ast West	County:							
	flowing and shu	ut-in pressures, v	vhether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,			
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log			
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample			
Samples Sent to 0	Geological Surv	/ey	Yes No	Na	me		Тор	Datum			
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No								
		B	CASING eport all strings set-c		New Used	ion, etc.					
Purpose of Strir	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 / SO	UEEZE RECORD						
Purpose:		epth T Bottom	ype of Cement	# Sacks Used		Type and F	Percent Additives				
Perforate Protect Casi Plug Back T											
Plug Off Zor											
Did you perform a Does the volume Was the hydraulic	of the total base f	fluid of the hydrauli		_	=	No (If No, sk	ip questions 2 an ip question 3) out Page Three	,			
Date of first Product Injection:	tion/Injection or R	esumed Production	Producing Meth	nod:	Gas Lift 0	Other (Explain)					
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity			
DISPOS	SITION OF GAS:		N	METHOD OF COMP	LETION:			DN INTERVAL: Bottom			
	Sold Used	I on Lease	Open Hole			mmingled mit ACO-4)	Тор	BOROTT			
,	,			B.11 B1							
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid,	Fracture, Shot, Cer (Amount and Kind	menting Squeeze I of Material Used)	Record			
TUBING RECORD:	: Size:	Set	Δ+-	Packer At:							
TODING RECORD:	. 3126.	Set	n.	i donei Al.							

Form	ACO1 - Well Completion
Operator	Griffin, Charles N.
Well Name	SPRINGER FARMS1877 1-10
Doc ID	1329668

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
3	4832-4835	250 gal 7.5" MCA acid	
4	4804-4806	250 gal 7.5" MCA acid	
3	4697-4703	3000 gal 15%MCA	
4	3818-3820	1500 15%MCA	New zone: KC A zone
	4803-4828	50 sks Common Cement	
	4390-4428	100 sks Common Cement	

Form	ACO1 - Well Completion
Operator	Griffin, Charles N.
Well Name	SPRINGER FARMS1877 1-10
Doc ID	1329668

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	24	221	60/40	190	xx
Production	7.875	5.5	15.5	4855	AA2	125	xx



10244 NE Hwy. 61 P.O. Box 8613

FIELD SERVICE TICKET

1718 13942 A

	ENERG	Y SERVICES Phon	t, Kansa ne 620-6	as 67124 572-1201							
F	PRESSURE PU	MPING & WIRELINE	5-3	35	120		DATE	TICKET NO			
DATE OF 12/	5/2016	DISTRICT Prett,	k S		NEW □ OLD ☑ PROD □ INJ □ WDW □ CUSTOMER ORDER NO.:						
		Manasement			LEASE S	orins	er			WELL NO.	87
ADDRESS					COUNTY ${\cal B}$	Sther		STATE	Jes		
CITY	CITY STATE					EW D	srin, m	cGrew, H	nr 60	no, Keu	n B
AUTHORIZED BY JO						241,	159000	20			
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							FINISH OPE	RATION	12/	5 AM 4 1	
				, ,			RELEASED		121	5 AM 5:0	20
A CONTRACTOR							MILES FROM	A STATION TO	WELL		
products, and/or sur	d is authorized to polies includes	ONTRACT CONDITIONS: (This of the execute this contract as an agail of and only those terms and cout the written consent of an offi	ent of the onditions a	customer. A appearing on	s such, the unders the front and back	igned agre of this do	ees and acknow cument. No addi	edges that this c	e terms	and/or conditions	s shall
ITEM/PRICE REF. NO.		MATERIAL, EQUIPMENT	AND SER	VICES US	ED	UNIT	QUANTITY	UNIT PRI	CE	\$ AMOUN	IT.
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CH	EMICAL / ACID	DATA:						SUB T	OTAL	6,028	75

SERVICE REPRESENTATIVE COM	F.
REPRESENTATIVE Com	Letera

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

MATERIALS

SERVICE & EQUIPMENT

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

TOTAL 3,255

16

%TAX ON \$

%TAX ON \$



Customer Gr. LR.	mene	Soment		Lease No.	40	į	н м			Date					King K	
Lease Sp.	000	3644.8-	Ē,	Well # /	877	?					12.	15%	2016			
Field Order #	Station	n				Casing 5	1/2 [epth	90'	County	Desr	ber		Sta	te KS	
Type Job 2 41/ Squeeze							Form				ALES VO	Legal D	escription	16-	335-124	
	E DATA		FORATIN	IG DATA		FLUID U	SED			-	ΓREAT		RESUMI			
Casing Size					Acid					RATE	PRES	SS .	ISIP			
Depth 90	Depth U	300 From 4	4250 T	04428	Pre P	ad			Max				5 Min.			
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Well Connection	on Annulus	34. 104.00	T						HHP Used	t			Annulus	Press	ure	
Plug Depth	Packer D			0	Flush	Fresh	10 10.10		Gas Volur	ne		,	Total Loa	ad		
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Service Units	92911	84981				9862			,							
Driver Names	Derin			· McGou		1. Gune							7.	350		
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10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124

FIELD SERVICE TICKET

1718 14851 A

F			PING & WIRELINE	ie 620-6	72-1201			DATE	TICKET NO			
DATE OF 12	-12-	16 0	DISTRICT PIATT			NEW	OLD F	PROD INJ	WDW	□ Cr	JSTOMER RDER NO.:	
CUSTOMER 6	alife	en	MANASement			LEASE 5	Prin	9-81			WELL NO.	37
ADDRESS	198					STATE		*				
CITY			STATE			SERVICE CF	REW M	ATTAI, A	AnThiny,	140	ininez	
AUTHORIZED B	Υ						Z 41	Sque	120 P-1			
EQUIPMENT		HRS	EQUIPMENT#	HRS	EQU	JIPMENT#	HRS	TRUCK CAL	LED 12.	1P-77		
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1-186	apara e	,)						FINISH OPE	RATION		AM, Z.	15
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								MILES FROM	M STATION TO	WELL	- 35	
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, material 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)											s shall	
ITEM/PRICE REF. NO.		N	IATERIAL, EQUIPMENT A	ND SER	VICES US	ED	UNIT	QUANTITY	UNIT PRIC	Œ	\$ AMOUN	1T
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									Т	OTAL	2,752	45
				34					Λ	166	1	_

FIELD SERVICE ORDER NO.

SERVICE
REPRESENTATIVE MIKE MATTOL

SERVICE

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



TREATMENT REPORT

Customer G	CIFFER	MANAS	rmm Leas	e No.		1 80 60,	1, 1548 1 1	Date	2 1	2 16	Se H ²
Locac	Prinsa		Well	#	1877			1	2-1	2-16	
Field Order	Station	Pratt			Casing	Depth Depth	ľ	County	17 17 17	£ 9	State Us
Type Job	2-41	Squee	2 Perks			Formation Legal Description					
5	E DATA	The second secon	ORATING DA	ATA	FLUID	USED		Т	REATMEN	T RESUMI	=
Casing Size	Tubing,Si	ze Shots/F	t : 2 it	F :,	Aeid	50 SKS	Comm	RATE	PRESS	ISIP	e Ste
Depth	Depth 0		8U3 TO 48	28	Pre Pad		Max			5 Min.	
Volume	Volume		То	-1:0	Pad		Min		energy of agreement	10 Min.	
Max Press			To the		Frac		Avg			15 Min.	
Well Connecti	on Annulus \	/ol. From	То		4.,		HHP Use	d		Annulus	Pressure
Plug Depth	Packer D	epth From	То		Flush		Gas Volur	me		Total Lo	ad
Customer Rep	presentative	JR G'	if-6-1 8	station	Manager Kev	I'M Gol	DIOY	Treat	er Mik	le Mat	TUI
Service Units	37586		19903 2	097	G	70959	1986	2			
Driver Names	MATTAL	(373)	ANTHON		14		いりゃく				
Time	Casing Pressure	Tubing Pressure	Bbls. Pumped		Rate	Acres 1	i ber		Service Log	Mary Comment	\
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