

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 # _____

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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Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Charlie 1
Doc ID	1372822

All Electric Logs Run

Dual Induction
Neutron Density
Frac log
Micro Log
Sonic log



PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1002427	1718	08/02/2017
INVOICE NUMBER			
92487256			

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 Charlie
 O LOCATION
 B COUNTY Barber
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

RECEIVED
AUG 7 2017

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
41045466	19843		Net - 30 days	09/01/2017

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
For Service Dates: 07/31/2017 to 07/31/2017				
0041045466				
171815141A Cement-New Well Casing/Pi 07/31/2017				
Cement 5/8 Surface				
Common Cement	200.00	EA	7.42	1,484.80
Calcium Chloride	376.00	EA	0.49	183.19
Celloflake	51.00	EA	1.72	87.56
"Wooden Cmt Plug, 8 5/8""	1.00	EA	74.24	74.24
"Unit Mileage Chg (PU, cars one way)"	55.00	MI	2.09	114.84
Heavy Equipment Mileage	110.00	MI	3.48	382.80
"Proppant & Bulk Del. Chgs., per ton mil	517.00	EA	1.16	599.72
Blending & Mixing Service Charge	200.00	BAG	0.65	129.92
Plug Container Util. Chg.	1.00	EA	116.00	116.00
Depth Charge; 0-500'	1.00	EA	464.00	464.00
"Service Supervisor, first 8 hrs on loc.	1.00	EA	81.51	81.51

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	3,718.58
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	131.67
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	3,850.25
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		

TTM4-24



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

11-355-13W

FIELD SERVICE TICKET
1718 15141 A

DATE _____ TICKET NO. _____

DATE OF JOB 7/31/2017 DISTRICT P1922, KS				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 Lotus Operations Company, LLC				LEASE Charlie		WELL NO. 1			
ADDRESS				COUNTY Barber		STATE KS			
CITY STATE				SERVICE CREW Darin, Scott, John					
AUTHORIZED BY				JOB TYPE: 2421 85/8 sulfate					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
19843	1/2						7/31	AM	6:00
19918	1/2						7/31	AM	8:00
							7/31	AM	10:45
							7/31	AM	11:15
							8/01	AM	12:00
						MILES FROM STATION TO WELL	60		

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: Dion Vargney
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT	
CP100	Common	SK	200		3,200 00	
CC109	Calcium Chloride	Lb	376		394 80	
CC102	Cellof19ke	Lb	51		188 70	
CF153	Wooden Cement Plug	E9	1		160 00	
E100	unit mileage chrsse - pickups, sm 9 hrs. etc	m.	55		247 50	
E101	Heavy Equipment Mileage	m.	110		825 00	
E113	Pic pp 92 & 92 Bulk Delivery chrsse, per 100 ^{mi}	Tdm	517		1,292 50	
CE200	Depth chrsse, 0-500	4hrs	1		1,000 00	
CE240	Blending & mixing Service chrsse	SK	200		280 00	
CE504	Plug container utilization chrsse	Job	1		250 00	
SO03	Service Supervisor, first 8 hrs. antea.	E9	1		175 00	
					SUB TOTAL	8,013 50

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	✓
TOTAL		3,718 58

SERVICE REPRESENTATIVE Darin Faxon

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

FIELD SERVICE ORDER NO. _____

BASIC

energy services, L.P.

TREATMENT REPORT

Customer: **LOUIS OPERATING COMPANY, LLC** Lease No. _____ Date: **7/31/2017**
 Lease: **Charlie** Well # **1**
 Field Order # **15141** Station **Pos 2, KS** Casing **8 5/8** Depth **265** County **Borner** State **KS**
 Type Job **242/8 5/8 SURFACE** Formation **TD-265** Legal Description **11-355-13w**

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8 5/8	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth 265	Depth	From	To	Pre Pad	Max			5 Min.
Volume 16.8	Volume	From	To	Pad	Min			10 Min.
Max Press	Max Press	From	To	Frac	Avg			15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth 215	Packer Depth	From	To	Flush Freshwater	Gas Volume			Total Load

Customer Representative: **Deon** Station Manager: **Justin Westerman** Treater: **Darin Franklin**

Service Units	92911	84981	19843	19955	99918				
Driver Names	Darin	Scott	Scott	John	John				

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
8:30pm					on location / safety meeting
					200SK cement, 3% calcium chloride
					0.25 DPS, 1.5.6 pps, 1.20 vcid, 5.23 water
10:45pm	200		3	4	PUMP 3 bbl's water
	200		43	4	mix 200SK cement
					Shut down
					Release Plus
	200		0	3	Start displacement
11:15pm	200		15.5	3	Shut in
					Cement dia Circulation - 10 bbl's
					Job complete / Darin decon
					Thank you!!



PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1002427	1718	08/14/2017
INVOICE NUMBER			
92494861			

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** Charlie 1
 O **LOCATION**
 B **COUNTY** Barber
 S **STATE** KS
 I **JOB DESCRIPTION** Cement-New Well Casing/Pi
 T **JOB CONTACT**
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
41048145	19843		Net - 30 days	09/13/2017

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 08/07/2017 to 08/07/2017</i>				
0041048145				
171815143A Cement-New Well Casing/Pi 08/07/2017 Cement Longstring				
AA2 Cement	175.00	EA	7.83	1,369.69 T
60/40 POZ	50.00	EA	5.52	276.24 T
FLA-322	132.00	EA	3.45	455.80 T
Celloflake	44.00	EA	1.70	74.95 T
C-41P	42.00	EA	1.84	77.35 T
Salt	930.00	EA	0.23	214.09 T
Gilsonite	875.00	EA	0.31	269.91 T
Mud Flush	500.00	EA	0.69	345.30 T
"Auto Fill Float Shoe 5 1/2" (Blue)"	1.00	EA	165.74	165.74
"Latch Down Plug & Baffle, 5 1/2" (Blue)"	1.00	EA	184.16	184.16
"5 1/2" Basket (Blue)"	1.00	EA	133.52	133.52
"Turbolizer, 5 1/2" (Blue)"	4.00	EA	50.65	202.58
"Unit Mileage Chg (PU, cars one way)"	55.00	MI	2.07	113.95
Heavy Equipment Mileage	110.00	MI	3.45	379.83
569---Propp & Bulk Del.Chrg per ton mil	1.00	EA	655.44	655.44
Blending & Mixing Service Charge	225.00	BAG	0.64	145.03
Plug Container Util. Chg.	1.00	EA	115.10	115.10
Depth Charge; 5001-6000'	1.00	EA	1,325.95	1,325.95
"Service Supervisor, first 8 hrs on loc.	1.00	EA	80.57	80.57

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	6,585.20
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	231.25
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	6,816.45
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

11-355-13W

FIELD SERVICE TICKET
1718 15143 A

DATE _____ TICKET NO. _____

DATE OF JOB 8/17/2017 DISTRICT Pratt, KS		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 Lotus Operating Company, LLC		LEASE Charlie WELL NO. 1							
ADDRESS		COUNTY Barber STATE KS							
CITY STATE		SERVICE CREW Derin, Ed, M. Clymer							
AUTHORIZED BY		JOB TYPE: 242/5 1/2 Long String							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM/PM	TIME
19843	1						8/16	AM	4:00
21010	1/2					ARRIVED AT JOB	8/16	AM	7:00
						START OPERATION	8/16	AM	11:30
						FINISH OPERATION	8/17	PM	12:30
						RELEASED	8/17	AM	1:30
						MILES FROM STATION TO WELL	60		

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: Robin Brown
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP105	AA 2 Cement	SK	175		2,975 00
CP103	60/40 DOZ	SK	50		600 00
CC129	FLA-322	Lb	132		990 00
CC102	Cellofloc	Lb	44		162 80
CC105	C-41P	Lb	42		168 00
CC111	S91+	Lb	930		465 00
CC201	Gilsonite	Lb	875		586 25
CF1251	Auto Fill Flange Shoe 5 1/2" (Blue)	Eg	1		360 00
CF107	Latch Down Plug & Baffle, 5 1/2" (Blue)	Eg	1		400 00
CF1901	5 1/2" Basket (Blue)	Eg	1		290 00
CF1651	Turbolizer, 5 1/2" (Blue)	Eg	4		440 00
CE151	Mud Flush	GSI	500		750 00
E100	Unit Mileage Charge - Pickups, small us...	Mi	55		247 50
E101	Heavy Equipment Mileage	Mi	110		825 00
E113	Proposals and Bulk Delivery Charges, per ton mi	Ton/mi	569		1,423 13
CE206	Depth Charge, 500' - 6,000'	4hr	1		2,880 00
CE240	Blending & mixing Service Charge	SK	225		315 00
S003	Service Supervisor, first 8 hrs on loc.	Eg	1		175 00
CE504	Plug container Utilization Charge	Job	1		250 00

SUB TOTAL **14,302 68**

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		6,585 20

SERVICE REPRESENTATIVE Derin Frank THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Robin Brown
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

ITM 11' 36



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 15143 A

11-355-13W

DATE _____ TICKET NO. _____

DATE OF JOB: 8/17/2017		DISTRICT: Piquette, KS		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. <input type="checkbox"/>
CUSTOMER: Lotus Operating Company, LLC				LEASE: Charlie			WELL NO. 1		
ADDRESS:				COUNTY: Barber		STATE: KS			
CITY:				STATE:		SERVICE CREW: Derry, E., M. C., Mer			
AUTHORIZED BY:				JOB TYPE: 242/5 1/2 Long string					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED			
19943	1					8/16	AM	4:00	TIME
21010	1/2					8/16	AM	7:00	ARRIVED AT JOB
						8/16	AM	11:30	START OPERATION
						8/17	AM	12:30	FINISH OPERATION
						8/17	AM	1:30	RELEASED
						MILES FROM STATION TO WELL: 60			

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
CP105	AA2 Cement	SK	175		2,975 00
CP103	60/40 DOZ	SK	50		600 00
CC129	FLA 322	Lb	132		990 00
CC102	Cellofibre	Lb	44		162 80
CC105	C-41 P	Lb	42		168 00
CC111	SGI	Lb	930		465 00
CC201	Gilsonite	Lb	875		586 25
CF1251	Auto Fill Plug + Shoe 5 1/2" (Blue)	EA	1		360 00
CF107	Level Down Plug + Bellie, 5 1/2" (Blue)	EA	1		400 00
CF1901	5 1/2" Baskets (Blue)	EA	1		290 00
CF1651	Turbolizer, 5 1/2" (Blue)	EA	4		440 00
CC151	mud flush	GSI	500		750 00
E100	un + mileage charge - P. C. 100, 5 mi. 100 mi.	m.	55		247 50
E101	Heavy Equipment + Mileage	m.	110		825 00
E113	Proppant and Bulk Delivery Charges, per ton/mi	Ton/mi	567		1,423 13
CF706	Dopin Charge, 50 gal. 6,000'	4hr	1		2,880 00
CF140	Blending & mixing Service Charge	SK	225		315 00
S003	Service Supervisor, 1 hr + 8 hrs on job	EA	1		175 00
CF304	Plus. Carriage for 1 1/2 hrs on Charge	Job	1		250 00
SUB TOTAL					14,302 68

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		6,585 10

SERVICE REPRESENTATIVE: Steve Lumbert THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: _____

FIELD SERVICE ORDER NO. _____ (WELL OWNER OPERATOR CONTRACTOR OR AGENT)

Customer Lojus Operating Compns, LLC	Lease No.	Date 8/1/2017
Lease Charlie	Well # 1	
Field Order # 15143	Station Pratt, KS	Casing 5 1/2
		Depth 5161
Type Job 242/5 1/2 LongString	Formation	County Barber
		State KS
		Legal Description 11-355-13W

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
5 1/2				Pre Pad	Max		5 Min.	
Depth 5161	Depth	From	To	Pad	Min		10 Min.	
Volume 111.7	Volume	From	To	Frac	Avg		15 Min.	
Max Press	Max Press	From	To		HHP Used		Annulus Pressure	
Well Connection	Annulus Vol.	From	To	Flush Freshwater	Gas Volume		Total Load	
Plug Depth 5127	Packer Depth	From	To					

Customer Representative Robin Brown	Station Manager Justin Westerman	Treater Darin Franklin
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Service Units	92911	84981	19843	70959	21010				
Driver Names	Darin	Ed	Ed	Clymer	Clymer				

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
7:00pm					on location / safety meeting
					5 1/2 17# Casing set at 5157'
					T-1, 5, 20, 25 B-17
					175SK AA2 cement, 5% gypsum
					0.8% fluid loss, 0.25 pps defoamer
					10% silt, 0.25 pps cellofluke, 5 pps Gilsonite
					14.8 ppg, 1.47 veld, 6.35 water
					Pipe on bottom, break circulation
11:30pm	300		3	5	Pump 3 bbls water
	300		12	5	Pump 12 bbls mud flush
	300		3	5	Pump 3 bbls water
	300		46	5	Mix 175SK AA2
					Shutdown
					Wash pump & lines & Release Plug
	100		0	6	Start displacement
	500		85	6	Lift Pressure
	800		108	3	Slow Rate
12:30pm	1500		116	3	Bump Plug
					Float - Held
	100		7	3	Plug set hold
	100		5	3	Plug mouse hole
1:30pm					Job complete / Darin & crew

LOTUS OPERATIONS CO. LLC
#1 CHARLIE
ELEVATION 1472

LEASE #1 CHARLIE
FIELD #1 CHARLIE - SPARKMAN #1
LOCATION #1 SW-34
T-11S R-13W
COUNTY BARRE STATE KS
CONTRACTOR SUEK, Dale
CORN 131/17
LTD 5650
FORMERLY C-80 6078

FORMATION TOPS & STRUCTURAL POSITION
SAMPLE E LOG SUB-SECT STRATIGRAPHICAL POSITION

FORMATION	TOP	DEPTH	A	B	C
TK	4120	4120			
R/C	4121	4121			
CARB. SN	4121	4121			
MISS	4584	4584			
MS SH	5194	5194			
Widow	5110	5110			
Viola	5108	5108			
AKB	5116	5116			
Red	5116	5116			
RTD	5120	5120			
LT D	5248	5248			

REMARKS: Due to structural position of the Miss chert, along w favorable logs calculations and sample shows, it was recommended that pipe be set to further test the miss chert through perforations and necessary acid and coal treatments.

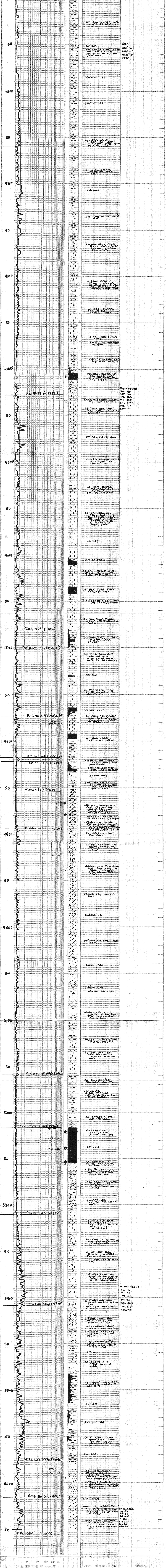
LEGEND

	Anyhydrite
	Silt
	Sandstone
	Shale
	Chert on Limestone
	Oil Limestone
	Chert
	Dolomite

SCALE 1" = 100'

DRILLING TIME IN MINUTES PER FOOT
Rate of Penetration Increase

DEPTH	DRILLING TIME (MIN)
3400	15
3500	20
3600	25
3700	30
3800	35
3900	40
4000	45
4100	50
4200	55
4300	60
4400	65
4500	70
4600	75
4700	80
4800	85
4900	90
5000	95
5100	100
5200	105
5300	110
5400	115
5500	120
5600	125
5700	130



DEPTH DRILLING TIME Minutes/foot
Rate of Penetration Increase

COMPANY Lotus Operations Co LLC ELEVATION 1480 KB

LEASE #1 CHARLIE

LOCATION #1 SW-34 SEC 11 TWP 35S RND 13 W

COUNTY BARRE STATE KS