



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

1718 16194 A

DATE _____ TICKET NO. _____

DATE OF JOB <u>3/9/2018</u> DISTRICT <u>P1911111</u>				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 <u>Vincent O.</u>				LEASE <u>Nash</u> WELL NO. <u>1</u>			
ADDRESS				COUNTY <u>Kows</u> STATE <u>KS</u>			
CITY STATE				SERVICE CREW <u>Dson, Ed, Dsz</u>			
AUTHORIZED BY				JOB TYPE: <u>241/PTA</u>			
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE <u>3/9</u> AM <input checked="" type="checkbox"/> PM <input type="checkbox"/> TIME <u>1:00</u>
<u>20920</u>	<u>1 1/4</u>					ARRIVED AT JOB	<u>3/9</u> AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> <u>4:00</u>
<u>21010</u>	<u>1/2</u>					START OPERATION	<u>3/9</u> AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> <u>4:15</u>
						FINISH OPERATION	<u>3/9</u> AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> <u>5:30</u>
						RELEASED	<u>3/9</u> AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> <u>6:00</u>
						MILES FROM STATION TO WELL	<u>46</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)

[illegible]

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$		
MATERIALS	%TAX ON \$		
D. Secured TOTAL		4,222	85

SERVICE REPRESENTATIVE <i>[Signature]</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i>
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)	

[illegible]



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

1718 16195 A

DATE _____ TICKET NO. _____

DATE OF JOB 3/12/2018		DISTRICT Piquette		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 Vincent O. I.				LEASE Newby								WELL NO. 1					
ADDRESS				COUNTY K. Ows								STATE KS					
CITY				STATE				SERVICE CREW D. G. R. Osborn, D. G. 2									
AUTHORIZED BY				JOB TYPE: 241/PTA													
EQUIPMENT#		HRS		EQUIPMENT#		HRS		EQUIPMENT#		HRS		TRUCK CALLED		DATE 3/12		TIME 5:00	
19843		1 1/4										ARRIVED AT JOB		3/12		7:30	
19860		3 1/4										START OPERATION		3/12		12:30	
												FINISH OPERATION		3/12		1:45	
												RELEASED		3/12		2:00	
												MILES FROM STATION TO WELL		46			

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

[illegible]

SERVICE REPRESENTATIVE <i>Dean L. Smith</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>M. J. Smith</i> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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Customer Vincent Oil		Lease No.		Date 3/12/2018	
Lease Newby		Well # 1			
Field/Order # 16195	Station P911, KS	Casing	Depth	County Kiowa	State KS
Type Job 2411/PTA			Formation	Legal Description	

PIPE DATA		PERFORATING DATA		FLUID USED	TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
Depth	Depth	From	To	Pre Pad	Max		5 Min.
Volume	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	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative	SPencer Suck	Station Manager	Justin Westphalen	Treater	Dan Frick
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Service Units	92911	84981	19843	19960	19860						
Driver Names	Disco	P. 12	Riley	Dis2	Dis2						

[illegible]