

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5225

Name: Quinque Operating Company

Address 1: 908 N.W. 71st St.

Address 2: _____

City: Oklahoma City State: Ok Zip: 73116 + _____

Contact Person: Catherine Smith

Phone: (405) 840-9876 ext. 129

CONTRACTOR: License # 5929

Name: Duke Drilling

Wellsite Geologist: _____

Purchaser: N/A

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil SWD SLOW
- Gas ENHR SIGW
- CM (Coal Bed Methane) Temp. Abd.
- Dry Other _____
(Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to Enh. Conv. to SWD

Plug Back: _____ Plug Back Total Depth _____

Commingled Docket No.: _____

Dual Completion Docket No.: _____

Other (SWD or Enh.?) Docket No.: _____

<u>4/28/09</u>	<u>5/5/09</u>	<u>5/10/09</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

*for copy
KCC
w/
5/10/09*

API No. 15 - 119-21237-00-00

Spot Description: _____

W/2 NE4 SE4 Sec. 32 Twp. 33 S. R. 29 East West

2029 Feet from North / South Line of Section

986 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Meade

Lease Name: Larrabee Well #: 1

Field Name: Singley

Producing Formation: N/A

Elevation: Ground: 2566' Kelly Bushing: 2581'

Total Depth: 6250' Plug Back Total Depth: 0

Amount of Surface Pipe Set and Cemented at: 1595' 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/ _____

AH 1-Dig - 7/23/09

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 1200 ppm Fluid volume: 320 bbls

Dewatering method used: Natural - Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name: Gene R. Dill

Lease Name: Regier SWD License No.: 6652

Quarter _____ Sec. 17 Twp. 33A S. R. 27 East West

County: Meade Docket No.: C-21232

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Catherine Smith


Title: Regulatory Date: 5/27/09

Subscribed and sworn to before me this 27th day of May

20 09

Notary Public: Kelly Freeman

Date Commission Expires: 08/01/10


KELLY FREEMAN
 Notary Public
 State of Oklahoma
 Commission # 06007471 Expires 08/01/10

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED

MAY 27 2009

KCC WICHITA

Operator Name: Quinque Operating Company Lease Name: Larrabee Well #: 1
 Sec. 32 Twp. 33 S. R. 29 East West County: Meade

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Microresistivity, Dual Compensated Porosity, Dual Induction	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Kansas City</td> <td>4838'</td> <td>-2234</td> </tr> <tr> <td>Swope</td> <td>5083'</td> <td>-2479</td> </tr> <tr> <td>Marmaton</td> <td>5250'</td> <td>-2646</td> </tr> <tr> <td>Atoka</td> <td>5590'</td> <td>-2966</td> </tr> <tr> <td>Morrow</td> <td>5761'</td> <td>-3157</td> </tr> <tr> <td>Chester</td> <td>5881'</td> <td>-3277</td> </tr> <tr> <td>St. Genevieve</td> <td>6175'</td> <td>-3571</td> </tr> </table>	Name	Top	Datum	Kansas City	4838'	-2234	Swope	5083'	-2479	Marmaton	5250'	-2646	Atoka	5590'	-2966	Morrow	5761'	-3157	Chester	5881'	-3277	St. Genevieve	6175'	-3571
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CASING RECORD <input checked="" 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
Surface Casing	12 1/4"	8 5/8"	24#	1595'	A Con	490 sx	

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				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>
	N/A	

TUBING RECORD: Size: <u>N/A</u> Set At: _____ Packer At: _____	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>N/A</u>	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

1700 S. Country Estates Rd.
P.O. Box 129
Liberal, Kansas 67905
Phone 620-624-2277

FIELD SERVICE TICKET
1717 00033 A

4-29-9 DATE TICKET NO.

DATE OF JOB 4-29-9	DISTRICT	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 Huntington Energy	LEASE Staley Larrabee		WELL NO. 1						
ADDRESS	COUNTY Meade		STATE KS						
CITY	STATE	SERVICE CREW C. Hinz, S. Chavez, Ruben M							
AUTHORIZED BY Jerry Bennett	IRB	JOB TYPE: Surface 242							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE 4-29-9	AM 6:00	TIME
30464	5					ARRIVED AT JOB	4-29-9	AM 7:55	
19919	3					START OPERATION	4-29-9	AM 11:50	
15566	2					FINISH OPERATION	4-30-9	AM 11:15	
19805		19805	5			RELEASED	4-30-9	AM 1:45	
8128	5					MILES FROM STATION TO WELL	15		
14983	2								

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 Roger Pearson
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CL101	A-Con Blend	SK	340		6324 00
FL110	Premium Plus Cement	SK	150		2445 00
CC109	Calcium Chloride	lb	1242		1304 10
CC102	Cello-Flake	lb	116		429 20
CC130	WCA-1	lb	64		1600 00
CF453	Insert Float Valve	EA	1		280 00
CF1773	Centralizer 8 5/8	EA	4		580 00
CF1903	8 5/8 Basket	EA	1		315 00
CF253	Guide Shoe 8 5/8	EA	1		380 00
CF105	Rubber Plug	EA	1		225 00
E101	Heavy Equipment Mileage	mi	45		315 00
CE240	Mixing Service Charge	SK	490		686 00
E113	Bulk Delivery Charge	+m	346		553 60
CE202	Depth Charge	4hrs	1		1500 00
E100	Pickup Mileage	mi	15		63 75
5003	Service Supervisor	EA	1		175 00
CE504	Plug Container Charge	job	1		250 00
SUB TOTAL					
CHEMICAL / ACID DATA:					
SERVICE & EQUIPMENT					%TAX ON \$
MATERIALS					%TAX ON \$
TOTAL					9584 11

RECEIVED
MAY 23 2009
KCC WICHITA

SERVICE REPRESENTATIVE S. Chavez THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Roger Pearson
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

Customer	Huntington Energy	Lease No.		Date	5-6-09
Lease	Larrabee	Well #	1		
Field Order #	00091	Station	Liberal, KS-1717	Casing	
Type Job	4 1/2 PTA-(2-44)	Formation		County	Moore
				State	KS
				Legal Description	32-33-29

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP
Depth	Depth	From	To	160 sks - 60/110	4 1/2 gpm	Well	5 Min.
Volume	Volume	From	To	Rate	Max		10 Min.
Max Press	Max Press	From	To	1.50 (43/sk)	7.5 gal/sk		15 Min.
Well Connection	Annulus Vol.	From	To	Pad			Annulus Pressure
Plug Depth	Packer Depth	From	To	Frac			Total Load
				Flush	Fresh		

Customer Representative	R. Pearson	Station Manager	J. Bennett	Treater	A. Olivera
Service Units	18937	27462	14355	14284	
Driver	A. Olivera	R. Cox	E. Madrid		
James					

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
5:20					On loc. - site assessment
5:25					500+ trucks - rig up
6:10					Safety meeting
6:30			10	4	circ hole @ 9620'
6:45			13.5	4	mix 50 sks cnt @ 13.5 #
7:00			13.5	4	start pumping cnt
7:05			2	3	wash pumping lines
7:10			18	3	disp balanced plug
8:00			10	4	circ hole @ 450'
9:00					mix 40 sks cnt @ 13.5 #
9:10			11	4	start pumping cnt
9:15			2	3	wash pumping lines
9:20			2	3	disp balanced plug
9:40					circ hole @ 60'
9:45				4	mix 20 sks cnt @ 13.5 #
9:50			5.3	4	start pumping cnt
9:55					circ hole w/ cnt
20:00			6	4	plug rat + mouse hole w/ 45 sks