

11/8/08

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 31938
Name: Indian Oil Co., Inc.
Address: PO Box 209
City/State/Zip: Medicine Lodge, KS 67104
Purchaser: Oneck
Operator Contact Person: Anthony Farrar
Phone: (620) 886-3763
Contractor: Name: AA Drill-N
License: 32753
Wellsite Geologist: none

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: Trans Pacific Oil Corp.

Well Name: #1 Chinn
Original Comp. Date: 11/25/88 Original Total Depth: 4700
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

<u>7/31/07</u>	<u>8/2/07</u>	<u>9/26/07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 2910 KCC 8-12-08 ~~151-21010-00-01~~
County: Pratt
SE SW NW Sec. 15 Twp. 29 S. R. 14 East West
2310 feet from S (N) (circle one) Line of Section
990 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: Chinn Well #: 1
Field Name: Baptist
Producing Formation: Lansing/KC
Elevation: Ground: 1998 Kelly Bushing: 2006
Total Depth: 4617 Plug Back Total Depth: 4557
Amount of Surface Pipe Set and Cemented at 337 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 AIT I Nit 8-12-08
(Data must be collected from the Reserve Pit)
Chloride content 70 ppm Fluid volume 2600 bbls
Dewatering method used allow to evaporate
Location of fluid disposal if hauled offsite:
Operator Name: none
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

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: _____
Title: Vice President Oper. Date: 11/6/07
Subscribed and sworn to before me this 6 day of November
20 07.
Notary Public: April Renee Miller
Date Commission Expires: July 10, 2010

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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KANSAS CORPORATION COMMISSION
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CONSERVATION DIVISION
WICHITA, KS

Operator Name: Indian Oil Co., Inc. Lease Name: Chinn Well #: 1
 Sec. 15 Twp. 29 S. R. 14 East West County: Pratt

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 checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: <u>Cement bond log</u>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>B/ANH</td> <td>837</td> <td>+1168</td> </tr> <tr> <td>HEEB</td> <td>3818</td> <td>-1813</td> </tr> <tr> <td>BR LM</td> <td>3998</td> <td>-1993</td> </tr> <tr> <td>LANS</td> <td>4015</td> <td>-2010</td> </tr> <tr> <td>BKC</td> <td>4382</td> <td>-2377</td> </tr> <tr> <td>MISS</td> <td>4478</td> <td>-2473</td> </tr> <tr> <td>VIOLA</td> <td>4498</td> <td>-2493</td> </tr> <tr> <td>SIMP SD</td> <td>4587</td> <td>-2582</td> </tr> <tr> <td>AKS</td> <td>4603</td> <td>-2658</td> </tr> </table>	Name	Top	Datum	B/ANH	837	+1168	HEEB	3818	-1813	BR LM	3998	-1993	LANS	4015	-2010	BKC	4382	-2377	MISS	4478	-2473	VIOLA	4498	-2493	SIMP SD	4587	-2582	AKS	4603	-2658
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AKS	4603	-2658																													

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CASING RECORD <input type="checkbox"/> New <input checked="" 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	10-3/4	8-5/8	24	337	Class A 60-40:20	225	---
Production	7-7/8	4-1/2	10.5	4617	AA2	200	---

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 (Amount and Kind of Material Used)	Depth
4	4344-4350	1500g 15% HCl	4350

TUBING RECORD	Size <u>2-3/8</u>	Set At <u>4300'</u>	Packer At <u>4300'</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------	-------------------	---------------------	------------------------	---

Date of First, Resumerd Production, SWD or Enhr. <u>10/4/07</u>	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
--	---

Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
---	---	150	---	---	---

Disposition of Gas <input type="checkbox"/> Vented <input checked="" 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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 KANSAS CORPORATION OF ENGINEERS

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PAGE 1 of 2	CUST NO 1970-IND009	INVOICE DATE 08/03/2007
INVOICE NUMBER 1970000651		

B I L L
INDIAN OIL COMPANY INC
P O BOX 209

T O
MEDICINE LODGE KANSAS 67104
ATTN: JOSCELYN NITTLER

J O B S I T E
LEASE NAME Chinn
WELL NO. 1 OWWO
COUNTY Pratt
STATE KS
JOB DESCRIPTION Cement Casing Seat Prod Well
JOB CONTACT JOSCELYN NITTLER

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
1970-00655	301		Net 30 DAYS	09/02/2007
For Service Dates: 08/02/2007 to 08/02/2007				
1970-00655				
1970-16457	Cement-Casing Seat-Proc 8/2/07			
Pump Charge-Hourly Casing Cement Pumper	1.00	Hour	1827.000	1,827.00 T
Cementing Head w/Manifold Cement Head Rental	1.00	EA	250.000	250.00 T
Float Equipment - Existing Auto Fill Float Shoe	1.00	EA	269.000	269.00 T
Float Equipment - Existing Basket	1.00	EA	220.000	220.00 T
Float Equipment - Existing I.R. Latch Down Float Shoe	1.00	EA	230.000	230.00 T
Float Equipment - Existing Turbolizer	10.00	EA	67.000	670.00 T
Extra Equipment Casing Swivel Rental	1.00	EA	150.000	150.00 T
Mileage Cement Service Charge	225.00	DH	1.500	337.50 T
Mileage Heavy Vehicle Mileage	30.00	DH	5.000	150.00 T
Mileage Proppant and Bulk Delivery	158.00	DH	1.600	252.80 T
Pickup Car, Pickup or Van Mileage	15.00	Hour	3.000	45.00 T
Additives Cement Friction Reducer	57.00	EA	6.000	342.00 T
Additives Defoamer	47.00	EA	3.450	162.15 T
Additives FLA-322	94.00	EA	8.250	775.50 T
Additives Gas Blok	188.00	EA	5.150	968.20 T
Additives Gilsonite	1,000.00	EA	0.670	670.00 T
Additives Salt	1,046.00	EA	0.250	261.50 T
Additives Super Flush II	1,000.00	EA	1.530	1,530.00 T

PAID

CK NO. 1975 S
DATE 8/30/07

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CONSERVATION DIVISION
WICHITA, KS



Pratt

PAGE 2 of 2	CUST NO 1970-IND009	INVOICE DATE 08/03/2007
INVOICE NUMBER 1970000651		

B INDIAN OIL COMPANY INC
L P O BOX 209
L
T MEDICINE LODGE KANSA: 67104
O ATTN: JOSCELYN NITTLER

J LEASE NAME Chinn
O WELL NO. 1 OWWO
B COUNTY Pratt
S STATE KS
I JOB DESCRIPTION Cement Casing Seat Prod Well
T JOB CONTACT JOSCELYN NITTLER
E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.		TERMS	DUE DATE
1970-00655	301			Net 30 DAYS	09/02/2007
		QTY	U of M	UNIT PRICE	INVOICE AMOUNT
Cement 60/40 POZ		25.00	EA	10.710	267.75 T
Cement AA2		200.00	EA	16.530	3,306.00 T
Supervisor Service Supervisor		1.00	Hour	150.000	150.00 T

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CONSERVATION COMMISSION

PLEASE REMIT TO:
BASIC ENERGY SERVICES, LP
 PO BOX 841903
 DALLAS, TX 75284-1903

SEND OTHER CORRESPONDENCE TO:
BASIC ENERGY SERVICES, LP
 PO BOX 10460
 MIDLAND, TX 79702

BID DISCOUNT	-2,054.18
SUBTOTAL	10,780.22
TAX	679.17
INVOICE TOTAL	11,459.39

COATS - 1 W TO 60' - 3/4 N - E IN 10



FIELD ORDER 16457

Subject to Correction

Date 8-2-07	Customer ID	Lease CHINN	Well # 10wwd	Legal 15-29-14
CHARGE		County PRATT	State Ks.	Station PRATT, Ks.
INDIAN OIL CO.		Depth	Formation	Shoe Joint 40'
		Casing 4 1/2	Casing Depth 4617	TD 4700'
		Customer Representative MIKE		Treater BORDLEY

AFE Number	PO Number	Materials Received by X <i>[Signature]</i>	DLS
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Station Code	Product Code	QUANTITY	MATERIALS, EQUIPMENT, and SERVICES USED	UNIT PRICE	AMOUNT
P	D205	200 SK.	AAZ CEMENT —		3306.00
P	D203	25 SK.	60/40 P02 —		267.75
P	C195	94 lb.	FLA-322 —		775.50
P	C221	1046 lb.	SALT —		261.50
P	C243	47 lb.	DEFOAMER —		162.15
P	C244	57 lb.	CFR —		342.00
P	C312	188 lb.	GAS BLOK —		968.20
P	C321	1000 lb.	GILSONITE —		670.00
P	C304	1000 gal.	SUPERFLUSH II —		1530.00
P	F100	10 EA.	4 1/2 TURBOLIZER —		670.00
P	F120	1 EA.	4 1/2 BASKET —		220.00
P	F170	1 EA.	4 1/2 LATCH DOWN PLUG —		230.00
P	F210	1 EA.	4 1/2 FLOAT SHOE —		269.00
P	E100	30 mile	TRUCK MILEAGE		150.00
P	E101	15 mile	PICKUP MILEAGE		45.00
P	E104	158 TM	BULK DELIVERY		252.00
P	E107	225 SK	CEMENT SERVICE CHARGE		337.50
P	E891	1 EA.	SERVICE SUPERVISOR		150.00
P	R210	1 EA.	PUMP CHARGE	CONFIDENTIAL	1827.00
P	R701	1 EA.	CEMENT HEAD	NOV 08 2007	250.00
P	R702	1 EA.	CASING SWIVEL	KCC	150.00

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CONSERVATION DIVISION
WICHITA, KS

Customer: INDIAN OIL CO. Lease No. _____ Date: 8-2-07
 Lease: CHENW Well # 1 0WUO
 Field Order # 16457 Station: PRAN, Ks. Casing: 4 1/2 Depth: 4617 County: PRAN State: Ks.
 Type Job: BAK - L.S. - CCSPW Formation: D-4700 Legal Description: 15-29-14

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<u>4 1/2</u>								
Depth	Depth	From	To	Pre Pad	Max		5 Min	CONFIDENTIAL
<u>4617</u>								
Volume	Volume	From	To	Pad	Min		10 Min	CONFIDENTIAL
Max Press	Max Press	From	To	Frac	Avg		15 Min	CONFIDENTIAL
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load	
<u>457</u>								

Customer Representative: MIKE Station Manager: SCOTTY Treater: GORDIEY
 Service Units: 19841
 Driver Names: MELSON

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<u>1400</u>					<u>ON LOCATION</u>
<u>1500</u>					<u>RUN 4617 4 1/2 C.S.G. 112 JTS.</u>
					<u>FLOW SHOE, LATCH BAFFLE 15' COLLAR</u>
					<u>CENT-1-3-4-6-8-10-12-14-16-18</u>
					<u>BASKET - BOTTOM #2</u>
					<u>#10 IS SHORT MARKER JOINT</u>
					<u>SET 4 1/2 MARKER - DROP BALL - @ DRC.</u>
					<u>ROTATE CASING</u>
<u>1630</u>	<u>200</u>		<u>3</u>	<u>5</u>	<u>PUMP 3 bbl H₂O</u>
	<u>200</u>		<u>24</u>	<u>5</u>	<u>PUMP 24 bbl SUPER FLUSH</u>
	<u>200</u>		<u>3</u>	<u>5</u>	<u>PUMP 3 bbl H₂O</u>
	<u>200</u>		<u>51</u>	<u>5</u>	<u>MIX 200 SK. AA7 - 3% CFR</u>
					<u>.25% DEFOAM .5% FLA-322, 10%</u>
					<u>SALT, 1% GHS BULK, 5% GILSONITE</u>
					<u>STOP - WASH LINE - DROP PLUG</u>
	<u>0</u>		<u>0</u>	<u>6</u>	<u>START DESP.</u>
	<u>200</u>		<u>40</u>	<u>6</u>	<u>LEFT CEMENT</u>
	<u>800</u>		<u>65</u>	<u>3 1/2</u>	<u>SLOW RATE</u>
<u>2000</u>	<u>1750</u>		<u>72.5</u>	<u>3 1/2</u>	<u>PLUG DOWN - HOLD</u>
					<u>PLUG RH</u>
<u>2030</u>					<u>JOB COMPLETE - THANKS - KEVIN</u>

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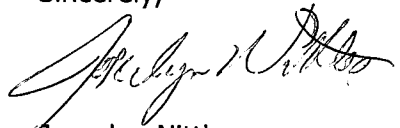
Indian Oil Company, Inc.
P.O. Box 209
Medicine Lodge, KS 67104
620/886-3763 (voice) 620/886-3765 (fax)
indianoil@sbcglobal.net

Kansas Corporation Commission
Oil & Gas Conservation Division
130 S. Market—Room 278
Wichita, KS 67202

To Whom It May Concern:

This letter shall serve as the written request for confidentiality pertaining to the well completion form for the Chinn #1, API No. 15-151-21810.

Sincerely,



Joscelyn Nittler
Indian Oil Co., Inc.

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