

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 9394
Name: D-Oil, Inc.
Address 1: P.O. Box 259
Address 2: _____
City: Victoria State: Ks. Zip: 67671 + _____
Contact Person: John M. Dreiling
Phone: (785) 735-9225
CONTRACTOR: License # 6426
Name: Express Well Service
Wellsite Geologist: Randall Kilian
Purchaser: NCRA
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 Enhr. _____ Conv. to SWD
_____ Plug Back: _____ Plug Back Total Depth
_____ Commingled _____ Docket No.: _____
_____ Dual Completion _____ Docket No.: _____
_____ Other (SWD or Enhr.?) _____ Docket No.: _____
11-20-09 11-24-09 1-15-10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 051-25931-00-00
Spot Description: _____
 s/2 NW SE Sec. 16 Twp. 14 S. R. 17 East West
1505 Feet from North / South Line of Section
2310 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ellis
Lease Name: Klaus/Sander Unit Well #: 1
Field Name: Toulon
Producing Formation: Arbuckle
Elevation: Ground: 1981 Kelly Bushing: 1986
Total Depth: 3580 Plug Back Total Depth: 3559
Amount of Surface Pipe Set and Cemented at: 219 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 3576
feet depth to: surface w/ 385 sx cmt.

Drilling Fluid Management Plan Alt II NR 4-2-10
(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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

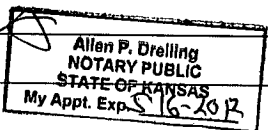
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: John M. Dreiling
Title: Gen. Mgr. Date: 3-30-2010

Subscribed and sworn to before me this 30th day of MARCH,
2010.

Notary Public: Allen P. Dreiling
Date Commission Expires: _____



KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
_____ UIC Distribution
RECEIVED
APR 01 2010

KCC WICHITA

Operator Name: D-Oil, Inc. Lease Name: Klaus/Sander Unit Well #: 1
 Sec. 16 Twp. 14 S. R. 17 East West County: Ellis

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 checked="" type="checkbox"/> Yes <input 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: | <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>Anhydrite</td> <td>1155</td> <td></td> </tr> <tr> <td>Topeka</td> <td>2964</td> <td></td> </tr> <tr> <td>Heebner</td> <td>3216</td> <td></td> </tr> <tr> <td>Toronto</td> <td>3235</td> <td></td> </tr> <tr> <td>Lansing</td> <td>3262</td> <td></td> </tr> <tr> <td>Base KC</td> <td>3492</td> <td></td> </tr> <tr> <td>Arbuckle</td> <td>3505</td> <td></td> </tr> </table> | Name | Top | Datum | Anhydrite | 1155 | | Topeka | 2964 | | Heebner | 3216 | | Toronto | 3235 | | Lansing | 3262 | | Base KC | 3492 | | Arbuckle | 3505 | |
| Name | Top | Datum | | | | | | | | | | | | | | | | | | | | | | | |
| Anhydrite | 1155 | | | | | | | | | | | | | | | | | | | | | | | | |
| Topeka | 2964 | | | | | | | | | | | | | | | | | | | | | | | | |
| Heebner | 3216 | | | | | | | | | | | | | | | | | | | | | | | | |
| Toronto | 3235 | | | | | | | | | | | | | | | | | | | | | | | | |
| Lansing | 3262 | | | | | | | | | | | | | | | | | | | | | | | | |
| Base KC | 3492 | | | | | | | | | | | | | | | | | | | | | | | | |
| Arbuckle | 3505 | | | | | | | | | | | | | | | | | | | | | | | | |

| 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 |
| Surface | 12 1/4 | 8 5/8 | 23 | 219 | Common | 160 | |
| Production | 7 7/8 | 5 1/2 | 14 | 3577 | A-Con | 385 | |
| | | | | | | | |

| 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> | Depth |
|----------------|---|--|-------|
| 4 | 3559-62 CIBP@3550 | 250 gal. mud acid | |
| 4 | 3526-31 | 250 gal. mud acid | |
| 4 | 3510-20 | 250 gal. mud acid, 500 gal. 20% NEFE | |
| | | | |

| | | |
|---|--|---|
| TUBING RECORD: Size: <u>2 3/8</u> Set At: <u>3445</u> Packer At: <u> </u> | | Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumed Production, SWD or Enhr. <u>2-16-10</u> | Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> | |
| Estimated Production Per 24 Hours | Oil Bbls. <u>12 bopd</u> | Gas Mcf <u> </u> Water Bbls. <u>1/2 bwpd</u> Gas-Oil Ratio <u> </u> Gravity <u>34</u> |

| | | |
|---|--|---|
| 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other <i>(Specify)</i> _____ | PRODUCTION INTERVAL: Arbuckle <div style="text-align: center; border: 1px solid black; padding: 5px;"> RECEIVED APR 01 2010 </div> |
|---|--|---|

ALLIED CEMENTING CO., LLC. 038558

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell

| | | | | | | | |
|----------------------------------|-----------------|---------------------------------|-----------------|------------|---------------------|-------------------------|--------------------------|
| DATE <u>11-20-09</u> | SEC. <u>16</u> | TWP. <u>14</u> | RANGE <u>17</u> | CALLED OUT | ON LOCATION | JOB START <u>7:30pm</u> | JOB FINISH <u>8:00pm</u> |
| LEASE <u>Klaus Sander</u> | WELL # <u>1</u> | LOCATION <u>Toulon Elmer 2E</u> | | | COUNTY <u>Ellis</u> | STATE <u>Ks.</u> | |
| OLD OR <u>(NEW)</u> (Circle one) | | <u>1/2 5 Winto</u> | | | | | |

CONTRACTOR W W Drilling Rig #8

TYPE OF JOB Sandace Sub

HOLE SIZE 12 1/4 T.D. 220

CASING SIZE 8 5/8 DEPTH 220.42

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 13 bbl

OWNER _____

CEMENT AMOUNT ORDERED 160 Can 38CC264

| | | | | |
|----------|---------------------|---|--------------|----------------|
| COMMON | <u>160</u> | @ | <u>13.50</u> | <u>2160.00</u> |
| POZMIX | | @ | | |
| GEL | <u>3</u> | @ | <u>20.25</u> | <u>60.75</u> |
| CHLORIDE | <u>5</u> | @ | <u>51.50</u> | <u>257.50</u> |
| ASC | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| HANDLING | <u>160</u> | @ | <u>2.25</u> | <u>360.00</u> |
| MILEAGE | <u>110/sk/price</u> | | | <u>300.00</u> |

EQUIPMENT

PUMP TRUCK CEMENTER Shane

398 HELPER John

BULK TRUCK

328 DRIVER Matt

BULK TRUCK

_____ DRIVER _____

REMARKS:

Est Circulation

Mixed 160 sks

Cement Circulated!

TOTAL 3138.25

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 991.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 5 @ 71.00 357.00

MANIFOLD _____ @ _____

RECEIVED _____ @ _____

APR 01 2010 _____ @ _____

KCC WICHITA TOTAL 1026.00

CHARGE TO: D-Oil

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

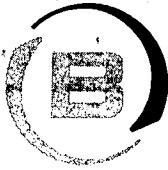
_____ @ _____

_____ @ _____

_____ @ _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment

Thanks!



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 1005 A

DATE _____ TICKET NO. _____

| | | | | | | | | | |
|--|--------|--|-----|------------|-----|---|----------|----|------|
| DATE OF JOB 11-25-09 DISTRICT KANSAS | | 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 D.O.L INC | | LEASE Klaus/Sander Unit #1 WELL NO. | | | | | | | |
| ADDRESS | | COUNTY Ellis 16-14-17 STATE Ks | | | | | | | |
| CITY STATE | | SERVICE CREW A. Werth C. Roush M. McGraw | | | | | | | |
| AUTHORIZED BY | | JOB TYPE: CNW Longstring 5/2 | | | | | | | |
| EQUIPMENT# | HRS | EQUIPMENT# | HRS | EQUIPMENT# | HRS | TRUCK CALLED | DATE | AM | TIME |
| 28443 | P.U. | 2 | | | | | 11-24-09 | PM | 1600 |
| 19959 | 20920 | 2 | | | | ARRIVED AT JOB | 11-24-09 | AM | 2230 |
| 19831-19836 | 219862 | | | | | START OPERATION | 11-25-09 | PM | 0100 |
| 19826-19860 | 2 | | | | | FINISH OPERATION | 11-25-09 | AM | 0300 |
| | | | | | | RELEASED | 11-25-09 | PM | 0330 |
| | | | | | | MILES FROM STATION TO WELL 100 miles | | | |

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 |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| CP101 | A-con Blend | | 415-SK | | 157470.00 |
| CC102 | Cell Flake | | 104.15 | | 8384.00 |
| CC155 | Superflush # | | 500-gal | | 6750.00 |
| C704 | CS-16 KCL Sub. | | 1-gal | | 350.00 |
| CF607 | Latchdown Plug + Baffle 5/2 Blue | | 1-CN | | 400.00 |
| CF1251 | Auto Fill Float shoe 5/2 Blue | | 1-CA | | 360.00 |
| CF1651 | Turbolizer 5/2 Blue | | 1-CA | | 270.00 |
| CF1901 | Basket 5/2 Blue | | 4-CA | | 1160.00 |
| E101 | Heavy Equip mileage | | 200-MI | | 1400.00 |
| E113 | Bulk Delivery Charge | | 1955-T | | 13128.00 |
| E100 | Unit mileage Charge Pickup | | 100-MI | | 425.00 |
| CE240 | Blending + mixing Service Charge | | 415-SK | | 581.00 |
| S003 | Service Supervisor First 8hrs on Loc | | 1-CA | | 175.00 |
| CE204 | Depth Charge 3000-4000' | | 1-4hrs | 2160. | 750.00 |
| CE504 | Plug container Utilization Chg. | | 1-CA | | 200.00 |
| CE501 | Casing Swivel Rental | | 1-CA | | 200.00 |

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APR 01 2010

| CHEMICAL / ACID DATA: | | | |
|-----------------------|--|--|--|
| | | | |
| | | | |
| | | | |

KCC WICHITA

SERVICE & EQUIPMENT %TAX ON \$
MATERIALS %TAX ON \$

SUB TOTAL

TOTAL

\$983190

| | |
|--|---|
| SERVICE REPRESENTATIVE Allen F. Werth | THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Allen F. Werth |
|--|---|

FIELD SERVICE ORDER NO.

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET
1718 1005 A

DATE _____ TICKET NO. _____

| | | | | | | | | | |
|--|-----|--|-----|------------|-----|---------------------------------------|----------|----|------|
| DATE OF JOB: 11-25-09 DISTRICT: Kansas | | 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: D.O.L INC | | LEASE: Klaus/Kawder 110.4 #1 WELL NO. | | | | | | | |
| ADDRESS: | | COUNTY: Ellis 16-14-17 STATE: KS | | | | | | | |
| CITY: STATE: | | SERVICE CREW: A. W. H. C. R. O. H. M. McGraw | | | | | | | |
| AUTHORIZED BY: | | JOB TYPE: CNW Longstring 5/2 | | | | | | | |
| EQUIPMENT# | HRS | EQUIPMENT# | HRS | EQUIPMENT# | HRS | TRUCK CALLED | DATE | AM | TIME |
| 2493 P.U. | 2 | | | | | | 11-24-09 | PM | 1600 |
| 197920922 | 3 | | | | | ARRIVED AT JOB | 11-24-09 | AM | 1230 |
| 19831-19831 | 2 | | | | | START OPERATION | 11-25-09 | AM | 1100 |
| 11-25-09 | 2 | | | | | FINISH OPERATION | 11-25-09 | AM | 1500 |
| | | | | | | RELEASED | 11-25-09 | AM | 1330 |
| | | | | | | MILES FROM STATION TO WELL: 100 miles | | | |

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 |
|---------------------|---------------------------------------|------|----------|------------|-----------|
| CP101 | A-Cow Blend | | 415 SK | | 15747.50 |
| CR102 | Gell Fines | | 104.16 | | 5384.00 |
| CC100 | Super Flush # | | 500 gal | | |
| C704 | CS-14 RCL Sub. | | 1 gal | | 1.70 00 |
| CF607 | Latchdown Plug & Bottle 5/2 Blue | | 1 ea | | 530.00 |
| CF1251 | Auto Fall Float Slave 5/2 Blue | | 1 ea | | 600.00 |
| CF1621 | Turbid. 5/2 Blue | | 1 ea | | 300.00 |
| CF1701 | Basket 5/2 Blue | | 4 ea | | 1160.00 |
| EP101 | Headgear | | | | |
| EP103 | Bulk Delivery Charge | | 19257 | | 19257.00 |
| EP104 | Unit Delivery Charge | | 122 | | 3120.00 |
| CE240 | Bleeding Service Charge | | 415 SK | | 2581.00 |
| 2003 | Service Super 1200 5/2 Blue | | 1 ea | | 2160.00 |
| CE204 | Depth Charge 3000 4/2 | | 1 ea | | 258.00 |
| CE204 | Plug container 4/2 1200 4/2 | | 1 ea | | 200.00 |
| EP101 | Posing Tower Rental | | 1 EA | | 200.00 |

SUB TOTAL

| CHEMICAL / ACID DATA: | | | |
|-----------------------|--|--|--|
| | | | |
| | | | |
| | | | |

| | |
|---------------------|------------|
| SERVICE & EQUIPMENT | %TAX ON \$ |
| MATERIALS | %TAX ON \$ |
| TOTAL | |

RECEIVED
APR 01 2010

\$9800.00

SERVICE REPRESENTATIVE: Allen F. Smith KCC WICHITA
THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: _____
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____

BASIC

energy services, L.P.

TREATMENT REPORT

| | | | |
|--------------------------------|----------------------|-------------------------------|----------------|
| Customer D-D, L INC | Lease No. | Date 11-25-09 | |
| Lease Klaus / Sander Unit | Well # #1 | | |
| Field Order # 1781004A | Station Pratt KS | Casing 5 1/2" | Depth 3578' |
| | | County Ellis | State KS |
| Type Job 5 1/2" Long String | Formation 3580 TP | Legal Description 16-14-17 | |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | | |
|-------------------------|--------------|------------------|----|-----------------------------|------------|------------------|-------|------------------|
| Casing Size | Tubing Size | Shots/Ft | | Acid | | RATE | PRESS | ISIP |
| 5 1/2" | | 10 BBL | | CL-MAX | | | | 5 Min. |
| Depth 3578' | Depth | From | To | Pre Pad | Max | | | 10 Min. |
| Volume 87 | Volume | From | To | 325 SKS A-con @ 11.2 # | Min | | | 15 Min. |
| Max Press # 1000 | Max Press | From | To | 75 SKS A-con @ 14 # | Avg | | | |
| Well Connection P.C. | Annulus Vol. | From | To | | HHP Used | | | Annulus Pressure |
| Plug Depth 2561' | Packer Depth | From | To | Flush DISP Freshwater | Gas Volume | | | Total Load |

| | | |
|--|-------------------------------|---------------------------|
| Customer Representative Aven Werberly | Station Manager Dave Scott | Treater Allen F. Worth |
|--|-------------------------------|---------------------------|

| | | | | | | | | | | | |
|---------------|----------|-------|--------|-------|--------|----------|-------|--|--|--|--|
| Service Units | 19843 | 19831 | 19862 | 19826 | 19860 | 19959 | 20920 | | | | |
| Driver Names | A. Worth | M. Ke | McGraw | E. J. | McGraw | C. Roush | | | | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|------|-----------------|-----------------|--------------|-------|---------------------------------------|
| 2230 | | | | | on hoc. Discuss Safety Setup Plan Sub |
| 2300 | | | | | Rig up to Run 5 1/2" casing 14 # |
| | | | | | Start 5 1/2 csg - Shoe It. 16.60' |
| | | | | | w/ Float Shoe + Insert L.D. |
| | | | | | Cent. 1-3-5-7-9-59-75 |
| | | | | | Baskets 1-9-59-75 |
| 0045 | | | 5 | | Tag Bottom @ 3580 - Pickup 2' Hook |
| 0110 | 200 # | | 12 | 5 | up + CIR + Rotate w/ Rig. |
| | | | | | Start Pump Super Flush # |
| | | | | | Start Pump 10 BBLS CL-MAX. |
| | | | | | Plug Rat Hole w/ 15 SKS. |
| 0210 | 0 # | | | | 6 Start mix + Pump cement down csg. |
| | | | 202 | | Finish mix 325 SKS @ 11.2 #/gal |
| | | | | | 75 SKS @ 14 #/gal |
| | | | | | wash out Pump + Line - Release Plug |
| 0215 | 200 # | | | 6 1/2 | Start Disp. casing cap. 87 BBLs |
| 0230 | 1000 # | | 87 | 3 | Plug down - Release PSI - OK. |
| | | | | | RECEIVED |
| | | | | | APR 1 2010 |
| | | | | | wash up Equip + Rack up. |
| | | | | | Job Complete - Thanks Allen, Chad |
| | | | | | McGraw Brothers |
| | | | | | (CMT TO) Allen F. Worth |
| | | | | | (cellar) |