

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

ORIGINAL

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 6039
Name: L. D. DRILLING, INC.
Address 1: 7 SW 26 AVE.
Address 2: _____
City: GREAT BEND State: KS Zip: 67530 + _____
Contact Person: L. D. DAVIS
Phone: (620) 793-3051

CONTRACTOR: License # 33323
Name: PETROMARK DRILLING, LLC
Wellsite Geologist: _____
Purchaser: _____

Designate Type of Completion:

New Well Re-Entry Workover

Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:
Operator: L. D. DRILLING, INC.

Well Name: #1 DAVIS RANCH

Original Comp. Date: 10/08/1982 Original Total Depth: 3580'

Deepening Re-perf. Conv. to ENHR Conv. to SWD
 Conv. to GSW

Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

<u>10/20/2010</u>	<u>10/22/2010</u>	<u>10/30/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 185-21661-00-01

Spot Description:
_____ NW NW NW Sec. 14 Twp. 21 S. R. 12 East West
330 5046 Feet from North / South Line of Section
330 4939 Feet from East / West Line of Section
GPS-KCC-DIG

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: STAFFORD
Lease Name: DAVIS RANCH OWWD Well #: 1 SWD

Field Name: SAUNDRA

Producing Formation: NA

Elevation: Ground: 1833' Kelly Bushing: 1838'

Total Depth: 4040' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: OLD 280 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1596 Feet

If Alternate II completion, cement circulated from: 1596

feet depth to: SURFACE w/ 275 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 #: _____

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.

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.

Signature: _____
Title: Susan Schneweis Clerk Date: November 11, 2010

KCC Office Use ONLY

Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received (WLC)
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Dag Date: 11/16/10

Operator Name: L. D. DRILLING, INC. Lease Name: DAVIS RANCH OWWD Well #: 1 SWD
 Sec. 14 Twp. 21 S. R. 12 East West County: STAFFORD

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 complete copy of all Electric Wire-line 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 Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray / Neutron & Sonic Cement Bond Log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum SEE ATTACHED
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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
OLD SURFACE		8 5/8"		280		285	
PRODUCTION - BTM STG	7 7/8"	5 1/2"	14#	3742'	A-Con&60/40 Pozmix	125 & 150	3%CC,1/4#CF,18%Salt,5# GA
PRODUCTION - TOP STG					A-CON	412	3%CC,1/4#CF

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
		1500 gal 20% Acid	

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>3708'</u> Packer At: <u>3708'</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. WHEN PERMITTED		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 checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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** Attachment to and Made a Part of ACO1: Davis Ranch OWWD #1 SWD, Sec 14-21-12, Stafford Co., KS

DAILY DRILLING REPORT

OPERATOR: **L. D. DRILLING, INC.** LEASE: **DAVIS RANCH OWWD #1 SWD**
NW NW NW Sec 14-21-12
WELLSITE GEOLOGIST: Stafford Co., KS

CONTRACTOR: Petromark Drilling ELEVATION: GR: 1833'
KB: 1838'

SPUD: 10/20/2010 @ 12:15 P.M. PTD: 4000'

SURFACE: Old Well Information: 8 5/8" Surface Casing, Set @ 280' w/ 285 sx

10/20/10 Move in, Rig up & Spud
10/21/10 2515' Washing Down
10/22/10 3920' Drilling
10/23/10 Ran 5 1/2" Casing

Ran 91 jts 14# Used 5 1/2" Production Casing, Set @ 3742.15'
Ran DV Tool on top of Jt 52, @ 1596.65',
Bottom Stage: 125 sx A-Con @ 12# 3% CC, 1/4# Cell Flake & 150 sx 60/40 Pozmix
18% Salt, 1/2% CFR, 5# Gilsonite, 1/4# Cell Flake, Plug Down @ 11:30 P.M. on 10/22/10
Top Stage: 137 sx A-Con Cement - Bulk Truck Broke Down
275 sx A-Con @ 12#, 3% CC, 1/4# Cell Flake
Plug Down @ 4:45 A.M. on 10/23/13
Plug Rathole w/ 25 sx A-Con @ 5:30 A.M.

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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 02790 A

DATE _____ TICKET NO. _____

DATE OF JOB: 10-23-2010		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: L.D. DRUG, INC.				LEASE: DAVIS RANCH SWD				WELL NO. 1			
ADDRESS:				COUNTY: STAFFORD				STATE: Ks.			
CITY:				STATE:				SERVICE CREW: GORDLEY, LESLEY, McBRIDE, MITCHELL			
AUTHORIZED BY:				JOB TYPE: CNW - 5 1/2" 2-STAGE 2.5.							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	TIME			
19907							10-22-10	PM 4:00			
19889/19842	2 1/2					ARRIVED AT JOB		PM 7:00			
19826/19860	2 1/2					START OPERATION		PM 2245			
19960/19918	2 1/2					FINISH OPERATION	10-23-10	AM 0445			
33708/20920	2 1/2					RELEASED		AM 0530			
						MILES FROM STATION TO WELL		45			

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
C 704	C5-16, KCL SUBSTITUTE	GAL	1		35 00
CC 151	MUD FLUSH	GAL	500		430 00
E 100	PICKUP MILEAGE	MI	45		191 25
E 101	HEAVY EQUIPMENT MILEAGE	MI	135		945 00
E 113	BULK DELIVERY CHARGE	Tm	1190		1904 40
CE 204	DEPTH CHARGE, 3001-4000'	HR	1-4		2,160 00
CE 240	BLENDING SERVICE CHRG.	SK	575		805 00
CE 504	PLUG CONTAINER UTILIZATION CHRG.	JOB	1		250 00
S 003	SERVICE SUPERVISOR	EA	1		175 00
					RECEIVED
					NOV 15 2010
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CHEMICAL / ACID DATA			

SUB TOTAL	20,272.85
SERVICE & EQUIPMENT	%TAX ON \$
MATERIALS	%TAX ON \$
TOTAL	

SERVICE REPRESENTATIVE: <i>H. GORDLEY</i>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:
---	---

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



BASIC
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

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

FIELD SERVICE TICKET

1718-02789-A

"CONTINUATION"

DATE _____ TICKET NO. _____

DATE OF JOB: 10-23-2010		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: L.D. DRUG, INC.				LEASE: DAVIS RANCH				WELL NO. 15			
ADDRESS:				COUNTY: STAFFORD				STATE: KS.			
CITY:				STATE:				SERVICE CREW: GORDLEY, LESLEY, McYNAW, MITCHELL			
AUTHORIZED BY:				JOB TYPE: CNW - 5 1/2" 2-STAGE							
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED: 10-22-10		DATE: 10-22-10		TIME: 4:00 PM	
19907						ARRIVED AT JOB				7:00 PM	
19889/19842	2 1/2					START OPERATION				22:45 PM	
19826/19860	2 1/2					FINISH OPERATION		10-23-10		04:45 AM	
19960/19918	2 1/2					RELEASED				0530 AM	
33708/20920	2 1/2					MILES FROM STATION TO WELL				45	

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
CP 101	A-CON BLEND	SK	150		2,700.00
CP 103	60/40 P02	SK	150		1,800.00
CP 101	A-CON BLEND	SK	275		4,950.00
CC 102	CELL-FLAKE	lb	144		532.80
CC 109	CALCIUM CHLORIDE	lb	1,200		1,260.00
CC 111	SALT	lb	1,336		668.00
CC 112	CEMENT FRICTION REDUCER	lb	65		390.00
CC 201	GILSONITE	lb	750		502.50
CF 401	TWO STAGE CEMENT COLLAR, 5 1/2"	EA	1		6,100.00
CF 601	LATCH DOWN PLUG & ASSEMBLY, 5 1/2"	EA	1		850.00
CF 1001	PACKER SHOE - CEMENT TYPE, 5 1/2"	EA	1		3,700.00
CF 1651	TURBOBLIZER, 5 1/2"	EA	5		550.00
CF 1901	BASKET, 5 1/2"	EA	1		290.00

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CHEMICAL / ACID DATA:			

SUB TOTAL		DL5
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE: *K. Conroy*

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *James Nichols*

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO. _____

BASIC

energy services, L.P.

Pg. # 1 of 2

TREATMENT REPORT

Customer	L.D. DRUG, INC.		Lease No.			Date	10-22-2010				
Lease	DAVIS RANCH		Well #	#1 SWD							
Field Order #	2190	Station	PRATT, Ks.	Casing	5 1/2	Depth	3746	County	STAFFORD	State	Ks.
Type Job	CNW - 5 1/2" 2-STAGE L.S.			Formation	TD-4040		Legal Description 14-21-12				

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	5 1/2	Tubing Size		Acid		RATE	PRESS	ISIP
Depth	3746	From	To	Pre Pad		Max		5 Min.
Volume	918BL	From	To	Pad		Min		10 Min.
Max Press	2000	From	To	Frac		Avg		15 Min.
Well Connection	P.C.	From	To			HHP Used		Annulus Pressure
Plug Depth	3731	From	To	Flush	50H ₂ O + 35MUD	Gas Volume		Total Load

Customer Representative: L.D. DAVIS Station Manager: D. SCOTT Treater: K. GORDLEY

Service Units	19907	19889	19842	19826	19860	19960	19918	33708-20920
Driver Names	GORDLEY	LESLEY	—	McGRAW	—	MITCHELL	—	LESLEY

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
7:00PM					ON LOCATION - SAFETY MEETING
					RECEIVED NOV 15 2010
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22:00					RUN 91 FT 5 1/2" 14" USED CSC, PACKER SHOE, LD Baffle 1st column
					AVT-2-5-8-11-51 BASKET-52
					DU TOOL ON TOP 52 AT 1600'
					BREAK CALCULATION
	1400				DROP BALL - SET Packer at 3746
					BOTTOM STAGE
22:45	400		20	6	Pump 20 bbl. 2% KEL H ₂ O
	400		12	6	Pump 12 bbl MUD FLUSH
	300		3	6	Pump 3 bbl H ₂ O
	700		57	6	Pump 125 SA A - CON AT 12"
					3% CC, 1/4" #1 SA CELL PASTE
	200		31	6	Pump 150 SA 60/40 P&Z AT 154'
					18" SPT, 4 1/2% CCP 5" CDS, 1/4" C.F.
					STOP - WASH LINE - DROPPING
	0		0	6	START H ₂ O DESP.
	300		56	6	START MUD DESP
	750		85	3	SLOW RATE
23:30	1500		91	3	PLUG DOWN - HOLD
					NEXT PAGE

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energy services, L.P.

TREATMENT REPORT

Customer	LD NELSON, INC	Lease No.		Date	10-23-10			
Lease	DINES RANCH	Well #	15WD					
Field Order #	2790	Station	PRATT, KS	Casing	5 1/2	Depth	3746	
Type/Job	ON W - LOWCSTREN		Formation	TD-4040	County	STAFFORD	State	KS
							Legal Description	14-21-12

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
5 1/2								
Depth	Depth	From	To	Pre Pad	Max			5 Min.
1600	DU TOOL							
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	LD	Station Manager	SCOTT	Treater	CONDY
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Service Units									
Driver Names									

Time	Casing Pressure	Tubing Pressure	Bbbls. Pumped	Rate	Service Log
2335					DROP DU OPEN PLUG
2345	700				OPEN DU TOOL AT 1600'
					CIRC. WITH REG PUMP
					DID NOT CIRC. CEMENT
					TOP STAGE
0100	700		60	6	PUMP 1375K A CON CEMENT
					AND BULK TRUCK BROKE DOWN
					HOOK UP TO REG PUMP
					AND CIRC. CEMENT TO
					RESERVE PVT. WAIT ON
					NEW BULK TRUCK.
0400					TRUCK ON LOCATION
					TOP STAGE
0415	200		125	6	PUMP 275 SIL A CON
					CEMENT AT 12" 39 CC 1/4" DIA
					STOP - WASH LINE - DROP PLUG
	0		0	6	START DISP.
0445	1500		39	2	PLUG DOWN - DU CLOSED
					GOOD CIRC. - DID NOT
					CIRC. CEMENT
					PLUG PAT HOLE - 25K A CON
0530					DID NOT COMPLETE - NEVER

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What are you planning for your future?

TD-4040'

91 JTs - 5 1/2 CSG 14# = 3742.15

JTs #53 Thru #75 = 937.53

JTs #76 Thru #91 = 659.12

TOP JT # 52 = DU = 1596.65

DU TOOL ON TOP JT. # 52 AT 1596.65

PACKER SHOE ON BOTTOM JT. # 1 AT 3747'
WITH LANDS JT. 6' UP.

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PRATT Community College 

(620) 672-5641, ext. 229